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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form

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Finformation about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 ca	endar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2	2014			
		pplicable	C Name of organization		D Emplo	yer ide	ntification number
_	Iress ch		PRATT INSTITUTE		11-16	530822	2
┌ Nai	ne cha	inge	Doing Business As				
┌ Inıt	ıal retu	ım	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Teleph	ono num	hor
Г Тег	mınate	ed .	200 WILLOUGHBY AVE Suite				
┌ Am	ended	return	City or town, state or province, country, and ZIP or foreign postal code		(718)	636-3	600
Г Арг	lication	n pending	BROOKLYN, NY 11205		G Gross i	eceipts \$	5 244,484,754
			F Name and address of principal officer	H(a) Is	this a group		· · ·
			DR THOMAS SCHUTTE 229 CLINTON AVE		bordinates?		r Yes r No
			RROOKIVN NV 11205	Η(b) Δ r	e all subord	nates	Γ Yes Γ No
					cluded?	illaces	1 1631 110
I Ta	x-exen	npt status	▼ 501(c)(3)	If	"No," attach	a list	(see instructions)
J W	ebsite	e: ► W\	VW PRATT EDU	H(c) G	roup exempt	ion nur	mber ►
K Forr	n of or	ganizatioi	Corporation Trust Association Other ►	L Year o	f formation 18	887 M	State of legal domicile N
	rt I		ımary				
		Briefly o	escribe the organization's mission or most significant activities				
		•	edule O				
ပိ							
鞷	·						
Activities & Governance	2	Check t	his box দ if the organization discontinued its operations or disposed of n	nore tha	n 25% of its	net as	sets
5 5							
26			of voting members of the governing body (Part VI, line 1a)			3	3:
≅			of independent voting members of the governing body (Part VI, line 1b)			4	32
ቜ			mber of individuals employed in calendar year 2013 (Part V, line 2a) .			5	4,07
ą.			mber of volunteers (estimate if necessary)		• •	6	32
	l		related business revenue from Part VIII, column (C), line 12			7a	-75,759
	Ь	Net unr	elated business taxable income from Form 990-T, line 34			7b	-76,009
	_	C t-	.h.uh.ana and muanta (Daut)(TTT line 1 h.)		Prior Year	422	Current Year
ā	8		ibutions and grants (Part VIII, line 1h)		14,516, 190,839,		6,302,309 198,666,776
Revenue	10		am service revenue (Part VIII, line 2g)		4,974,		6,992,378
Æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,232,		13,575,996
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		2,232,	023	13,373,330
					212,561,		225,537,459
	13	Grant	s and similar amounts paid (Part IX, column (A), lines 1–3)		40,401,	495	42,668,705
	14		its paid to or for members (Part IX, column (A), line 4)			0	C
92	15	Salar 5-10	es, other compensation, employee benefits (Part IX, column (A), lines		96,761,	203	101,388,328
Expenses	16a		' ssional fundraising fees (Part IX, column (A), line 11e)			386	125,201
÷	ь		ındraısıng expenses (Part IX, column (D), line 25) ▶3,171,042				
Ω	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		59,112,	769	65,243,991
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		196,374,		209,426,225
	19		nue less expenses Subtract line 18 from line 12		16,186,		16,111,234
ຮኞ				Beginn	ning of Curre		End of Year
Net Assets or Fund Balances			ļ		Year		
4 5 5 5 6	20		assets (Part X, line 16)		507,551,		541,597,642
2 E	21		liabilities (Part X, line 26)		210,576,		224,872,303
	22	_	ssets or fund balances Subtract line 21 from line 20		296,975,	265	316,725,339
Unde my kı	nowled	alties of dge and	nature Block perjury, I declare that I have examined this return, including accompanyin belief, it is true, correct, and complete Declaration of preparer (other than nowledge				
		***			2015-05-14		
Sign		Sign	ature of officer		Date		
Here	e		UND RUTKOWSKI VP FOR FINANCE AND ADMIN				
		17	e or print name and title	Т		DTTN	
D	J		Print/Type preparer's name Preparer's signature Date CPMG LLP Preparer's signature	I `	Check if self-employed	PTIN P00634	1378
Paid			Firm's name F KPMG LLP		Firm's EIN 🟲	•	
	pare		Firm's address ► 345 Park Avenue		Phone no (718	1) 626 24	500
use	On	IV	IIII 3 GUGIC33 F 3T3 FOIK AVEITO	1	1 110 HE 110 (716	,, 050-30	300

New York, NY 101540102

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

✓ Yes 厂No

Par	3111		f Program Servile O contains a res		lishments o any line in this Part I	II	
1	Briefl	y describe the or	ganızatıon's mıssıo	n			
SEE:	SCHEE	ULE O					
2		ie organization ur ior Form 990 or 9		cant program se	ervices during the year	which were not listed on	┌ Yes ┌ No
	If "Ye	s," describe thes	e new services on S	Schedule O			
3	servi	es?			nt changes in how it cor	nducts, any program	┌ Yes ┌ No
	If"Ye	s," describe thes	e changes on Sche	dule O			
4	exper	ses Section 501		4) organization:	s are required to report	ee largest program services, a the amount of grants and alloc	
4a	(Code	2) (Expenses \$	103,176,698	including grants of \$	42,668,705) (Revenue \$	201,306,525)
	certifi State	cates and degrees co s Association of Colle	onferred are registered b ges and Schools The Co	by the NYS Departnomnission on High	nent of Education Pratt is ac	er academic degrees by the Board of credited by the Commission on Highe al accrediting agency recognized by the e O)	er Education of the Middle
4b	(Code) (Expenses \$	2,696,153	ıncludıng grants of \$) (Revenue \$	1
טר	Public comm	Service In view of	Pratt's mission to educa g and research program	te artists and creat	ive professionals to be respo	nsible contributors to society, Pratt In to develop robust urban centers in wh	
4c	(Code) (Expenses \$	15,312,857	ıncludıng grants of \$) (Revenue \$)
	Pratt Comr	Libraries provide outs	standing services and ac ers ongoing support and	ccess to a resource-	rich environment that facilita	ms as well as research, library and in ates critical thinking and creative teac ter, Intensive English Program and W	hing and learning in the Pratt
	(Code	`) (Expenses \$	14,945,590	ıncludıng grants of \$) (Revenue \$	\
	•	= ENT SERVICES) (Expenses \$	14,543,350	including grants or \$) (Revenue \$)
		EMI SERVICES					
	(Code	E TUTIONAL SUPPORT) (Expenses \$	17,284,875	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	34,066,035	ıncluding grants of \$) (Revenue \$	1
	•	E ATION & MAINTENAN	, , , ,	34,000,035	including grants of \$) (Revenue \$)
	(Code	e IARY ENTERPRISES) (Expenses \$	10,506,385	including grants of \$) (Revenue \$)
4d		er program servic enses \$	es (Describe in Sch 76,802,885 in	nedule O) cluding grants o	of\$) (Revenue \$)
4e	Tota	l program service	e expenses 🗠	197,988,593			
			F	/ /- 00			

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
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		No
LO	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	Yes	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
l2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L 5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L 6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
.7	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	Yes	
L 8	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	Yes	
L 9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2013)

GII	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 448			.40
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		163	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
	If "Yes," enter the name of the foreign country 🕨 IT			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		14
	74 1 1 1 1 1 1 1 1 1			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	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?			
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Se	ection A. Governing Body and Management							
			Yes	No				
1 a	Enter the number of voting members of the governing body at the end of the tax year							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	Did the organization have members or stockholders?	6		No				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	b Each committee with authority to act on behalf of the governing body?							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No				
C.	ection B. Policies (This Section B requests information about policies not required by the Internal R		· · · Cad	~ \				
36	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie coa	e.)				
36	ection b. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	No No				
10a	Did the organization have local chapters, branches, or affiliates?	10a						
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No				
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No				
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No				
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No				
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No				
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a	Yes	No No				
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No				
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b 12c	Yes Yes Yes	No No				
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No				
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No				
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No				
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No				
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No				
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No No				
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No No				

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►SYLVIA O ACUESTA CONTROLLER 200 WILLOUGHBY AVE BROOKLYN, NY 11205 (718) 636-3523

Form 990	(2013	
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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 or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	Name and Title A verage hours per week (list any hours A verage hours per week (list any hours A verage hours per wore than one box, unless week (list any hours and a director/trustee) A verage hours per wore than one box, unless compensation from the organization (Worganizations) A verage hours per wore than one box, unless compensation from related organization (Worganizations) A verage hours per wore than one box, unless compensation from related organization (Worganizations)									/- '	(F) Estimated amount of other compensation from the organization and			
		for related organizations below dotted line)	Individual trustiei or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC		rganizati relate organiza	ed	
												_			
												+			
												+			
												+			
												+			
												+			
1b	Sub-Total			•				Þ							
C	Total from continuation sheet	s to Part VII, S	ection A	١.			•	•							
d	Total (add lines 1b and 1c) .				•	•		-		3,093,006		0		421,627	
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an				
													Yes	No	
3	Did the organization list any fo on line 1 a? <i>If "Yes," complete S</i>					key •	emplo	yee,	or highes	t compen	sated employee	3		No	
4	For any individual listed on line organization and related organ	1a, is the sum	of repo	rtabl	есо							<u> </u>		<u>No</u>	
_	Individual				• • • • • • • • • • • • • • • • • • • •	• on fr			· ·		or individual for	4	Yes		
5	Did any person listed on line 1 services rendered to the organ									• • •		5		No	
Se	ction B. Independent Co	ntractors													
1	Complete this table for your five compensation from the organization												tax year		
		(A) ame and business						-			(B) cription of services		(C		
Officia		OBox 677498 Dalla		77498	3					Payment P	•		Compensation 1,172,761		

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Official Payments Corp, Lockbox Account POBox 677498 Dallas TX 752677498	Payment Processing	1,172,761
SAFE ENVIRONMENT BUSINESS SOLUTIONS, 8 Revolutionary Road Ossining NY 10562	Security Service	1,813,866
Culinart Inc, 175 SUNNYSIDE BOULEVARD Plainview NY 11803	Food Services	4,194,360
LEGACY BUILDERSDEVELOPERS, 519 8th Avenue Seventh Floor NEW YORK NY 10018	Construction	4,711,770
Windsor Construction Enterprises, 5 Lyons Mall Suite 317 Basking Ridge NJ 07920	Construction	8,742,520

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►83

Form 99		•						Page 9
Part V	/ • • •	Statement of Check of Schedu	o f Revenue ule O contains a respor	nse or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တည	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ies 1b					
يَ ق	С	Fundraising ev	ents 1c	136,845				
iffs,	d	Related organiz	zations 1d					
i5 ¦E	e	Government grant		2,540,699				
Sir		_		3,624,765		-		
utir Tër	f	similar amounts no						
를	g	Noncash contributi 1a-1f \$	ons included in lines	239,854				
Contributions, and Other Sim	h	Total. Add lines	s 1 a - 1 f		6,302,309			
				Business Code				
Program Serwce Revenue	2a	Tuition & fees		900099	181,915,677	181,915,677		
æ ₹	ь	Auxiliary Enterprise	es	451211	15,971,917	15,971,917		
ъ. П	С	Related student ac	ccount revenues	900099	779,182	779,182		
is E	d		_					
Ø E	e							
⊆ Ea	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f		198,666,776			
	3		ome (including dividen		·			
		and other simil	aramounts)		1,334,447		-39,064	1,373,511
	4		stment of tax-exempt bond	proceeds P	0			
	5	Royalties .	(ı) Real	(II) Personal	ŭ			
	6a	Gross rents	626,404	(II) I ersonar				
	ь	Less rental	797,922					
	c	or (loss)		0				
	d				-171,518		-33,388	-138,130
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	23,042,496					
	ь	Less cost or other basis and	17,384,565					
		sales expenses						
	C	Gain or (loss)	5,657,931		5,657,931			5,657,931
	d 8a		ss)	· · · · •	3,037,331			3,037,331
Other Revenue		events (not inc \$136	luding 5,845 s reported on line 1c)					
Яе Ве			a	1,121,852				
ā.	ь	Less direct ex	penses b	671,383				
ફ	С		(loss) from fundraising	events 🕨	450,469			
_	9a		from gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	С		(loss) from gamıng actı) ا	vities	0			
	10a	Gross sales of returns and allo		155,907				
	ь	Less cost of g	oods sold b	93,425				
	С	_	loss) from sales of inve		62,482		-3,307	65,789
		Miscellaneou		Business Code				
	l _	INSURANCER		900099	10,594,485			10,594,485
	Ь	INTEREST AN ON LOANS RE	D LATE CHARGES CEIVABLE	900099	293,066	293,066		
	с	OTHER MISCE INCOME	ELLANEOUS	900099	2,347,012	2,347,012		
	d		ue					
	е	Total. Add lines		•	13,234,563			
	12	Total revenue.	See Instructions	🕨	225,537,459	201,306,854	-75,759	17,553,586

Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) o	rganizations must complete all columns	All other organizations must complete column (A	()
--	-----------------------------------	--	---	----

	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al		•	iete column (A.)	
	Check if Schedule O contains a response or note to any line in this	Part IX		(c)	· · · · · · · · · · · · · · · · · · ·
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	42,668,705	42,668,705		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	,,		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,089,682	2,468,874	315,892	304,916
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	72,568,065	68,163,945	2,951,427	1,452,693
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,598,486	2,394,843	131,795	71,848
9	Other employee benefits	17,597,868	16,221,608	892,536	483,724
10	Payroll taxes	5,534,227	5,100,509	280,697	153,021
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	360,861	360,861		
C	Accounting	1,230,839	792,788	438,051	
d	Lobbying	210,516	187,424	10,156	12,936
e	Professional fundraising services See Part IV, line 17	125,201			125,201
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,866,003	7,612,758	223,064	30,181
12	Advertising and promotion	1,092,044	1,047,147	44,434	463
13	Office expenses	12,394,615	11,863,589	231,581	299,445
14	Information technology	987,408	974,628	11,222	1,558
15	Royalties	987,408	974,020	11,222	1,550
16	Occupancy	7,392,056	7,373,701	6,388	11,967
17	Travel	1,098,656	1,029,890	13,468	55,298
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,098,030	1,029,090	13,400	33,296
19	Conferences, conventions, and meetings	169,963	153,373	10,265	6,325
20	Interest	3,359,702	3,359,702	10,203	0,323
21	Payments to affiliates	0	0,003,102		
22	Depreciation, depletion, and amortization	12,027,445	11,456,425	571,020	
23	Insurance	1,204,786	939,296	265,490	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	, ,	,	,	
а	Capital expenses	4,619,506	4,496,628	90,091	32,787
b	OTHER MISCELLANEOUS EXPENSES	4,461,397	4,030,576	366,193	64,628
c	Meal Plan Costs	3,173,397	3,173,397		
d	BAD DEBTS	1,427,091	27,091	1,400,000	
е	All other expenses	2,167,706	2,090,835	12,820	64,051
25	Total functional expenses. Add lines 1 through 24e	209,426,225	197,988,593	8,266,590	3,171,042
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► □ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line i	n this	Part X			
					(A) Beginning of year	· ·	(B) End of year
	1	Cash-non-interest-bearing			526,859	1	970,927
	2	Savings and temporary cash investments			107,059,676	2	105,061,372
	3	Pledges and grants receivable, net			4,356,836	3	3,966,055
	4	Accounts receivable, net			175,482	4	262,621
	5	Loans and other receivables from current and former officers employees, and highest compensated employees Complete Schedule L	of	0	5	0	
Assets	6	Loans and other receivables from other disqualified persons $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, an and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedul	d conti emplo	ributing employers	0	6	0
မွ	7	Notes and loans receivable, net			11,862,970	7	12,011,231
ă	8	Inventories for sale or use			151,564	8	72,230
	9	Prepaid expenses and deferred charges			4,212,034	9	5,021,655
	10a	Land, buildings, and equipment cost or other basis	1	 I	1,212,001		0,021,000
	100	Complete Part VI of Schedule D	10a	354,036,731			
	ь	Less accumulated depreciation	10b	102,420,165	246,898,522	10 c	251,616,566
	11	Investments—publicly traded securities			36,274,412	11	45,537,506
	12	Investments—other securities See Part IV, line 11			95,742,774	12	116,411,522
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			290,413	15	665,957
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			507,551,542	16	541,597,642
	17	Accounts payable and accrued expenses			88,752,550	17	107,290,669
	18	Grants payable			7,063,208	18	7,271,809
	19	Deferred revenue			5,976,216	19	5,215,080
	20	Tax-exempt bond liabilities			93,836,614	20	90,989,629
Ø.	21	Escrow or custodial account liability Complete Part IV of Sc	hedule	D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, dire key employees, highest compensated employees, and disqua	alıfıed	•			
jat		persons Complete Part II of Schedule L			0	22	0
-	23	Secured mortgages and notes payable to unrelated third part			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	5.		0	24	0
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete ID	art X		14,947,689	25	14,105,116
	26	Total liabilities. Add lines 17 through 25			210,576,277	26	224,872,303
.,		Organizations that follow SFAS 117 (ASC 958), check here					
ě		lines 27 through 29, and lines 33 and 34.	•	-			
an	27	Unrestricted net assets			229,105,004	27	240,610,288
<u>8</u>	28	Temporarily restricted net assets			25,055,811	28	32,492,110
Fund Balances	29	Permanently restricted net assets			42,814,450	29	43,622,941
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here F	+ ┌─ and			
ا دِ	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund	i .			31	
Ą.	32	Retained earnings, endowment, accumulated income, or other	r funds			32	
Net	33	Total net assets or fund balances			296,975,265	33	316,725,339
	34	Total liabilities and net assets/fund balances			507,551,542	34	541,597,642
							Form 990 (2013)

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		225,5	37,459
2	Total expenses (must equal Part IX, column (A), line 25)	2		209,4	126,225
3	Revenue less expenses Subtract line 2 from line 1	3		16,1	11,234
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		296,9	75,265
5	Net unrealized gains (losses) on investments	5		13,6	503,275
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-9,9	64,435
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		316,7	25,339
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: Software Version:

EIN: 11-1630822

Name: PRATT INSTITUTE

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

PRESENTE MOD TRUSTEE	Form 990, Part VII - Compensation Compensated Employees, and Inde				ıru	ste	es, r	сеу	Employees, Higi	nest	
THOMAGE FIGURE 1973 20	(A)	(B) Average hours per week (list any hours	Posit more th perso and a	ion (c nan o n is b	do no ne b ooth ctor,	ox, u an of trus	inless fficer tee)		Reportable compensation from the organization (W-	Reportable compensation from related organizations (W-	Estimated amount of other compensation from the
PRESENTE MOLTREETHE		organizations below	individual trustae or director	Institutional Trustee	Officei	(e) emplojee	Highest compensated employee	Former		-,,	related
PRESIDENT AND TRUTTETE	THOMAS F SCHUTTE	35 0	X		x				667.297	0	129,199
MILE PRINTED 10					<u> </u>				337,237		
MIXE PRACT			x		х				0	0	0
VICE CHARGAN OF THE BOARD	MIKE PRATT				\						
NEC CIAMR OF THE BOARD NEC CIAMR OF THE BO									0	0	0
DE COSTANIA SANTIN 10		1 0	×		×				0	0	0
SECRETARY	DR JOSHUA L SMITH	1 0									
REMAIN REMAINS	SECRETARY		Х						0	0	0
KIRT RADERSEN TRUSTEE TRUSTEE AN A B B B B B B B B B B B B B B B B B B	HOWARD S STEIN	1 0	х						0	0	0
TRUSTEE	TREASURER KURT ANDERSEN	1.0									
DEBORANT IBJECK 10			X						0	0	0
TRUSTEE	DEBORAH J BUCK	1 0	 						0	0	0
TRUSTEE	TRUSTEE								Ů	0	
SISAN HAKAKARAINEN TRUSTEE RUSTEE RUSTEER RUSTEER		1 0	x						0	0	0
TRUSTEE COPY HUGHES TRUSTEE JUNE KELLY		1 0									
TRUSTEE	TRUSTEE		Х						0	0	0
TRUSTEE	GARY S HATTEM	1 0	х						0	0	0
TRUSTEE		20.0									
NUSTEE	TRUSTEE		X								
TRUSTEE	JUNE KELLY	1 0	X						0	0	0
TRUSTEE		1.0	<u> </u>								
ROELFIEN KUIDPERS TRUSTEE DAVID S MACK 10 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		10	X						0	0	0
TRUSTEE DAVID S MACK 10	ROELFIEN KULIPERS	1 0									
TRUSTEE			_ ×						0	0	0
KATHARINE L MCKENNA		1 0	x						0	0	0
TRUSTEE DAVID G MARQUIS 1 0	KATHARINE L MCKENNA	1 0									
X	TRUSTEE		X						0	0	0
DOWN MORNING	DAVID G MARQUIS	1 0	х						0	0	0
TRUSTEE	TRUSTEE 10HN MORNING	1.0									
DAVID O PRATT			X						0	0	0
TRUSTEE STAN RICHARDS 1 0		1 0							0	0	0
TRUSTEE MARIE TERESA ASARE-BOADI TRUSTEE FROM 07/01/13 KATHRYN C CHENAULT TRUSTEE MICHAEL KRISHER TRUSTEE FROM 07/01/13 X TRUSTEE FROM 07/01/13 X TRUSTEE FROM 07/01/13 X TRUSTEE FROM 07/01/13 TRUSTEE FROM 07/01/13 RALPH PUCCI 10 X 0 0 0 0 0 0 0 0 0 0 0 0	TRUSTEE								Ů	0	
MARIE TERESA ASARE-BOADI TRUSTEE FROM 07/01/13 KATHRYN C CHENAULT TRUSTEE MICHAEL KRISHER TRUSTEE FROM 07/01/13 RALPH PUCCI TRUSTEE TRUSTEE FROM 07/01/13		1 0	x						0	0	0
TRUSTEE FROM 07/01/13 KATHRYN C CHENAULT 1 0 X 0 0 0 TRUSTEE MICHAEL KRISHER 1 0 X 0 0 0 0 TRUSTEE FROM 07/01/13 RALPH PUCCI 1 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1 0									
TRUSTEE MICHAEL KRISHER 1 0 X 0 0 0 TRUSTEE FROM 07/01/13 RALPH PUCCI 1 0 X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	TRUSTEE FROM 07/01/13		X						0	0	0
TRUSTEE MICHAEL KRISHER 1 0 X 0 TRUSTEE FROM 07/01/13 RALPH PUCCI 1 0 X 0 0 0 0 0 0		1 0	х						0	0	0
TRUSTEE FROM 07/01/13 RALPH PUCCI 1 0	TRUSTEE MICHAEL KRISHER	1.0	-					-			
RALPH PUCCI 1 0 X 0 0 0 0			×						0	0	0
		1 0	Y							0	0
	TRUSTEE FROM 10/10/13	J							<u> </u>		

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

Compensated Employees, and Inde (A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (han o n is b	ne b oth ctor/	ox, u an of trus	nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former	2/1099-M13C)	2/1099-M13C)	related organizations
MARK D STUMER	1 0	х						0	0	0
TRUSTEE JULIANA C TERIAN	10									
TRUSTEE	10	×						0	0	0
DAVID C WALENTAS	1 0									
TRUSTEE		Х						0	0	0
MICHAEL ZETLIN TRUSTEE	1 0	х						0	0	0
JEFFREY BELLANTONI TRUSTEE FROM 7/1/13	1 0	х						0	0	0
DARRYL HALICKMAN	1 0	х						0	0	0
TRUSTEE FROM 7/1/13 HEATHER LEWIS	10									
TRUSTEE FROM 7/1/13		Х						0	0	0
ANNE H VAN INGEN	1 0									
TRUSTEE		X						0	0	0
PETER BARNA	35 0			х				283,099	0	20,346
PROVOST	0.0			^				203,033	Ů	20,540
JUDY AARON	35 0				x			217,106	0	10,788
VP ENROLLMENT	0.0							·		
ANDREW BARNES	35 0				Х			173,206	0	29,125
DEAN SCH OF LIB ARTS & SCI TODD M GALITZ	35 0									
VP DEVELOPMENT					Х			258,844	0	12,823
JOE HEMWAY	35 0									
CHIEF INFO AND TECH OFFICER	0 0				Х			211,536	0	17,916
HELEN MATUSOW-AYRES	35 0				х			183,739	0	9,152
VP STUDENT AFFAIRS EDMUND RUTKOWSKI	35 0									
VP FINANCE AND ADMIN	0 0				Х			268,108	0	66,270
RUSSELL S ABELL	35 0									
DIRECTOR, SCHOOL OF LIBRARY	0 0					Х		121,106	0	26,526
TULA GIANNINI	35 0					х		178,175	0	31,861
DEAN SCH OF INFO & LIBRARY SCI GLEN GORDON	0 0 35 0					х		178,355	0	9,101
EXEC DIR OF FACILITIES MGMT THOMAS HANRAHAN	0 0 35 0									
DEAN SCHOOL OF ARCHITECTURE	0 0					х		161,838	0	28,545
JOHN L PIERCE	35 0					х		190,597	0	29,975
DIRECTOR	0 0							190,397		29,913

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135075555

OMB No 1545-0047

SCHEDULE A Pul

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization
PRATT INSTITUTE

Employer identification number

11-1630822

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganization	ıs must com	nlete this	part.) See i			
				e foundation becaus						nou double	<u> </u>	
1	Ī		-	on of churches, or as	· ·		= -	•	-			
2	<u></u>		•	in section 170(b)(1								
3	Ē			perative hospital se			•	on 170(b)(1	.)(A)(iii).			
4	Ĺ.	•		n organization operat	=					(1)(A)(iii).	Enter the	
-	•			ty, and state						(-)()		
5	Γ	An orga	anızatıon op	erated for the benefi	t of a college	e or univers	ıty owned or	operated by	a governmer	ntal unit des	cribed in	
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)							
6	Γ	A feder	al, state, or	local government or	governmen	tal unıt des	cribed in sec t	tion 170(b)(1)(A)(v).			
7	Γ	An orga	anization tha	at normally receives	a substantia	al part of its	s support fror	n a governm	ental unit or	from the ger	eral publ	ıc
	_			n 170(b)(1)(A)(vi).	•	•						
8	<u> </u>		•	described in section			•	•				
9		_		at normally receives					· ·	-	-	SS
		receipt	s from activ	ities related to its ex	xempt functi	ons—subje	ct to certain	exceptions,	and (2) no m	ore than 33:	L/3 % of	
		ıts supp	oort from gr	oss investment inco	me and unre	lated busin	ess taxable ı	ncome (less	section 511	tax) from b	usinesses	5
		acquire	d by the org	janization after June	30,1975 S	See section	509(a)(2).(Complete Pa	art III)			
10	Γ			ganized and operated								
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to car one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See se the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-fur						See section ! on-function	509(a)(3) ally integ	.Check rated			
By checking this box, I certify that the organization is not controlled directly or indirectly by one or more other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)												
f				received a written de	etermination	from the I	RS that it is a	Type I, Ty	oe II, or Type	III support	ing organ	ıızatıon,
			his box									广
g			•	2006, has the organi	zation accei	pted any gi	ft or contribut	ion from an	y of the			
			g persons?	rectly or indirectly o	ontrols aith	oer alone or	together with	nersons de	secribed in (ii	`	Yes	No
				governing body of th			_	i persons de	sacribed iii (ii		g(i)	110
			•	er of a person descri		-)II·				y(ii)	+
			*	•			ahouo?					+
L				lled entity of a perso						119	(iii)	
h		Provide	the following	ng information about	the Support	eu organiza	tion(s)					
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	tha	(vii) A	mount of
	suppo		(11) [11]	organization	organizat		the organ	•	organiza			netary
	rganiz			(described on	coľ (i) lıs		ın col (i)		col (i) org			oport
				lınes 1- 9 above	your gove	_	suppo	rt?	ın the U	JS?		
				or IRC section	docume	ent?						
				(see								
				instructions))	Yes	No	Yes	No	Yes	No		
Tota												

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (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						
3	behalf The value of services or facilities						
3	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						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts 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 activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts 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	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts 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 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts 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 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts 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 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts 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 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	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts 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 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 Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts 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 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 Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts 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 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

Part IV			Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test									
Retu	Return Reference Explanation									
	Schodulo A / Form 000 or 000 F7) 2013									

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493135075555

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) orga	inizations Complete Part III						
	me of the organization ATT INSTITUTE			Em	ployer iden	nt if ica	tion numb	er
F IX	ATT INSTITUTE			11	-1630822			
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a sec	tion 527	org '	anizatio	n.
1	Provide a description of the ord	ganızatıon's dırect and ındırect politic	al campaign acti	vities in Part I\	/			
2	Political expenditures	•			.	\$		
3	Volunteer hours					Ť <u> </u>		
Par		ganization is exempt under s		:)(3).				
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955		-	\$		
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	►	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?				☐ Yes	┌ No
4a	Was a correction made?						┌ Yes	☐ No
b	If "Yes," describe in Part IV							
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c), except se	ction 50	1(c)	(3).	
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exemp	t function activ	ities 🕨	\$		
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to oth	ner organizations	for section 527	7 ►	\$		
3	Total exempt function expendit	tures Add lines 1 and 2 Enter here a	and on Form 1120	0-POL, line 17t	⊳	\$		
4	Did the filing organization file F	Form 1120-POL for this year?					┌ Yes	┌ No
5	organization made payments F amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid froi rectly delivered t	m the filing orga to a separate po	anızatıon's olitical orga	funds anızatı	Also ente on, such a	r the
	(a) Name	(b) Address	(c) EIN	(d) A mount filing organ funds If none	ization's	con a dire	Amount on the stributions and prompt ectly delives a parate programme anter - 1	received aly and ered to a plitical

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pa	art II-A Complete if the organization	is exempt und	er section 501	(c)(3) and fil	ed Form 5768	
	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and list in Part IV e	ach affiliated gro	up member's nam	e. address. EIN.
	expenses, and share of excess lobb	yıng expenditures)		_		-,,
<u>B</u>	Check ► ☐ If the filing organization checked bo	x A and "limited co	ntrol" provisions ap	pply		T
	Limits on Lobbying E (The term "expenditures" means ar		rred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots	lobbying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lo	obbying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	rom the following ta	able in both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying non	taxable amount is:			
	Not over \$500,000	20% of the amount	on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$500	,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$1,00	00,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1,500	0,000		
	Over \$17,000,000					
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
h	Subtract line 1g from line 1a If zero or less, ento	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	r-0-				
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did	the organization file	e Form 4720 repo	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See th	section 501(h)		t have to con		ne five
	Lobbying Exp	enditures Durii	ng 4-Year Aver	aging Period	_	_
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) ⊤otal
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Pai	rt II-B Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).	has NOT			
For ea	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a)	(b)	
activi		Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		
С	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
е	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			210,516
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	O ther activities?		No		
j	Total Add lines 1c through 1i		1		210,516
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		1		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	tion FO1/s)/F) /		
Раг	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	tion 201(d	3)(5), (or sect	ion
	501(0)(0):			Υe	es No
1	Were substantially all (90% or more) dues received nondeductible by members?		Γ	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answerline 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).				
a	Current year	2a	<u> </u>		
Ь	Carryover from last year	2b			
c	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		-		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	cess			
	political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliate rt II-B, line 1 Also, complete this part for any additional information	d group list)	, Part II	-A, line	2, and
	Return Reference Explanation				
PAR	T IV, LINE 1G LOBBYING EXPENSES WERE INCURRED TO ENSURE FUNDING	AND SUPP	ORT FO	RTHE	
	INSTITUTE AND PRATT CENTER FROM LEGISLATORS				

201104410 3 (1 01111 3 3 0 01 3 3 0 12) 2 0 1 3	1 age =		
Part IV Supplemental Information	on <i>(continued)</i>		
Return Reference	Explanation		

Schedule D (Form 990) 2013

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DLN: 93493135075555

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

nal Revenue Service	structions is at <u>www.irs.gov/10111990</u> .			Inspect	ion
ame of the organization RATT INSTITUTE		Emp	loyer ident if ica	tion numbe	r
		11-:	1630822		
	Advised Funds or Other Similar F	unds	or Accounts	. Complet	e if th
organization answered "Yes" to Form	(a) Donor advised funds		(b) Funds and o	othor accou	ntc
Total number at end of year	(a) Dollor advised fullus		(b) Fullus allu (otilei accou	111.5
Aggregate contributions to (during year)					
Aggregate grants from (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor a	advisors in writing that the assets held in do	nor advi	sed		
funds are the organization's property, subject to t	_			☐ Yes	┌ No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the				□ Yes	□ Na
conferring impermissible private benefit?	ato if the organization answered "Voc"	to Forn	2 000 Dawt IV		No
·	ete if the organization answered "Yes"	to Forn	n 990, Part Iv	7, line 7.	
Purpose(s) of conservation easements held by th Preservation of land for public use (e g , recre		n histori	ıcally important	land area	
Protection of natural habitat	Preservation of a				
Preservation of open space	•				
Complete lines 2a through 2d if the organization	held a qualified conservation contribution in	the forn	n of a conservat	tion	
easement on the last day of the tax year					
			Held at the	End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easeme		2b			
Number of conservation easements on a certified	historic structure included in (a)	2c			
Number of conservation easements included in (c historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d			
Number of conservation easements modified, trai	nsferred, released, extinguished, or terminat	ed by th	ne organization	during	
the tax year 🗠					
Number of states where property subject to cons	ervation easement is located ►				
Does the organization have a written policy regar enforcement of the conservation easements it ho		ndling of	violations, and	┌ Yes	┌ No
Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation ease	ments o	luring the year		
A mount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation easement	ts during	g the year		
▶ \$	-	•	,		
Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia				
	tions of Art, Historical Treasures,	or Otl	her Similar <i>i</i>	Assets.	
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	assets held for public exhibition, education,	, or rese	arch in furthera		
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	FAS 116 (ASC 958), to report in its revenue assets held for public exhibition, education,	statem	ent and balance		ıc
(i) Revenues included in Form 990, Part VIII, lin	ne 1		► \$		
(ii) Assets included in Form 990, Part X					
If the organization received or held works of art, he following amounts required to be reported under S					
Revenues included in Form 990, Part VIII, line 1			> \$		
			· +		
Assets included in Form 990, Part X			▶ \$		

Part	Organizations Maintaining Co	llections of Art, Hi	stori	cal Tre	asures, or Ot	ther	Similar Ass	ets (continued
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records, c	heck	any of the	e following that a	re a s	significant use (of its
а	Public exhibition	d	Г	Loan or	exchange progra	ams		
b	Scholarly research	е	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co Part XIII	ollections and explain ho	w the	y further I	the organization'	sexe	empt purpose in	
5	During the year, did the organization solicit of							
Dav	assets to be sold to raise funds rather than t t IV Escrow and Custodial Arrang						<u> </u>	Yes No
FGI	Part IV, line 9, or reported an an					1 16	is to Folling:	,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ets n		Yes No
b	If "Yes," explain the arrangement in Part XII	I and complete the follo	wing t	able	_			
					<u> </u>		Amo	ount
c	Beginning balance					1c		
d	Additions during the year				<u>⊢</u>	1d		
e •	Distributions during the year				⊢	1e		
f	Ending balance		_		L	1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21	7				ı	Yes No
ь	If "Yes," explain the arrangement in Part XII							<u> '</u>
Pa	rt V Endowment Funds. Complete		Swere Prior y		to Form 990, (c)Two years back			(e)Four years back
1a	Beginning of year balance	123,371,785	-	599,774	99,014,299	_	73,591,765	63,970,03
ь	Contributions	1,211,592	5,	957,667	725,125		760,654	1,544,48
c	Net investment earnings, gains, and losses	20.701.022	21	097.063	904 449		24 679 761	0 776 53
d	Grants or scholarships	29,701,932 1,476,296		087,962 273,618	-894,448 1,245,202		24,678,761 16,881	8,776,52 699,28
e	Other expenditures for facilities				_,,,_		,	,
_	and programs							
f	Administrative expenses							
g	End of year balance	152,809,013	123,	371,785	97,599,774		99,014,299	73,591,76
2	Provide the estimated percentage of the curi	,	ne 1g	, column ((a)) held as			
а	Board designated or quasi-endowment 🕨	56 000 %						
b	Permanent endowment ► 17 000 %							
С	Temporarily restricted endowment ► 27 (The percentages in lines 2a, 2b, and 2c show	000 % uld equal 100%						
3a	Are there endowment funds not in the posses	ssion of the organization	that a	are held a	ınd admınıstered	for t	he	
	organization by						2-4:	Yes No
	(i) unrelated organizations					•	3a(i	
ь	If "Yes" to 3a(II), are the related organization		Sched	· · · lule R? .		٠	3b	7 1.13
4	Describe in Part XIII the intended uses of th	•					<u> </u>	
Par	t VI Land, Buildings, and Equipme		organ	ızatıon a	answered 'Yes'	to F	orm 990, Par	t IV, line
	11a. See Form 990, Part X, line : Description of property	10.	(a)	Cost or oth	ner (b)Cost or oth	ner T	(c) Accumulated	(d) Book value
	Description of property			(investme			depreciation	(d) Dook value
12					21,098,	556		21,098,556
	Buildings				316,429,		91,023,633	225,405,841
	Leasehold improvements				310,123,	***	71,023,033	223,103,043
	Equipment				16,277,	513	11,396,532	4,880,981
	Other				231,	-+		231,188
	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X, col	umn (i	B), line 10)(c).)		►	251,616,566
		· · · · · · · · · · · · · · · · · · ·	•				Schedule D	(Form 990) 201

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(b)book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) MUTUAL FUNDS	31,901,055	F
(B) ALTERNATIVE INVESTMENTS	84,510,467	F
Table (Calume (b) and a supl Farm 2000 Bart V and (B) line 12)	▶ 116.411.522	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. C		answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment		(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 990	, Part IV , line 11d See Form 990 , Part X , line 15
(a) Desc		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. Complete if the org		Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
1 (a) Description of Hability Federal income taxes	0	
SECURITY AND OTHER DEPOSITS	38,975	
CONDITIONAL ASSET RET OBLIGATI	2,707,771	
PAYABLE UNDER DERIVATIVE INSTR	3,358,370	
NOTE PAYABLE	8,000,000	
	+	
Total (Column (h) must squal form 200, Dark V 11/10 to 25.)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provided the provided in the column (b) must equal Form 990, Part X, col (B) line 25)	▶ 14,105,116 de the text of the footnote to the	e organization's financial statements that

	ale D (1 01111 330) 2013					Page 4
Par		venue per Audited Financial Sta ered 'Yes' to Form 990, Part IV, line :		nts With Revenue	oer R	leturn Complete if
1	Total revenue, gains, and other	support per audited financial statements			1	188,120,324
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investm	ents	2a	13,603,275		
b	Donated services and use of fac	ılıtıes	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII)		2d	-52,583,141		
e	Add lines 2a through 2d .		· .		2e	-38,979,866
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	227,100,190
4	Amounts included on Form 990,	Part VIII, line 12, but not on line 1				
а	Investment expenses not includ	ed on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b	-1,562,731		
c	Add lines 4a and 4b				4c	-1,562,731
5	Total revenue Add lines 3 and 4	k. (This must equal Form 990, Part I, line	12)		5	225,537,459
Part		penses per Audited Financial Sta wered 'Yes' to Form 990, Part IV, line			s per	Return. Complete
1	-	udited financial statements			1	168,370,250
2		not on Form 990, Part IX, line 25	•		<u> </u>	100,07,0,200
a		ilities	2a			
b			2b		1	
c	Other losses		2c		1	
d			2d	1,612,730	1	
e					2e	1,612,730
3	_				3	166,757,520
4		Part IX, line 25, but not on line 1:				
а		ed on Form 990, Part VIII, line 7b	4a			
ь	•		4b	42,668,705	1	
С	Add lines 4a and 4b				4c	42,668,705
5	Total expenses Add lines 3 and	4c. (This must equal Form 990, Part I, lir	ne 18)		5	209,426,225
Part	XIII Supplemental Info		<u> </u>			· · ·
Part		art II, lines 3, 5, and 9, Part III, lines 1a ines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
FORM	·	ENDOWMENT FUND PRIMARILY PURPO ENDOWMENT SCHOLARSHIP TO STUDI FOR CURRENT OPERATIONS AND CAP	ENTS A	AND FOR CURRENT OP		
PART 740)		The Institute is exempt from federal incon Internal Revenue Code Accordingly, the I t has taxable income from activities that	Institut are not	e is not subject to inco related to its exempt p	ne tax irpose	es except to the extent es The Institute

FORM 990, PART V, LINE 4	ENDOWMENT FUND PRIMARILY PURPOSE OF THE ENDOWMENT FUND IS TO PROVIDE ENDOWMENT SCHOLARSHIP TO STUDENTS AND FOR CURRENT OPERATIONS ASSISTANCE - FOR CURRENT OPERATIONS AND CAPITAL PROJECTS
PART X, SECTION 2 FIN 48 (ASC 740)	The Institute is exempt from federal income taxes under the provisions of Section 501(c)(3) of the Internal Revenue Code Accordingly, the Institute is not subject to income taxes except to the extent it has taxable income from activities that are not related to its exempt purposes. The Institute utilizes a threshold of more likely than not for recognition and derecognition of tax positions taken or expected to be taken in a tax return. No provision for income taxes was required for fiscal year 2014 or 2013.
PART XI, LINE 2D	SCHOLARSHIPS \$(42,668,706) POSTRETIREMENT RELATED CHANGES OTHER THAN NET PERIODIC POSTRETIREMENT BENEFIT COST (9,964,435) MANDATORY TRANSFERS & INDIRECT COSTS 50,000
PART XII, LINE 2D	COST OF SALES \$ 93,425 RENTAL EXPENSES 797,922 FUNDRAISING EVENT EXPENSES 671,383 MANDATORY TRANSFERS & INDIRECT COSTS 50,000 TOTAL \$ 1,612,730 ========== PART XII, LINE 4B - SCHOLARSHIPS \$42,668,706 ==========

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization PRATT INSTITUTE

Employer identification number 11-1630822 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? <u>5g</u> Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II

7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05

of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Yes

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

Return Reference	Explanation
RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E PART 1 LINE 3 NEWSPAPER ADVERTISEMENTS, WEBSITE, AND CATALOGS
GOVERNMENTAL AID OR ASSISTANCE	PART I LINE 6A THE INSTITUTE RECEIVES FEDERAL TITLE IV STUDENT FINANCIAL AID GRANTS FROM SEVERAL SOURCES, INCLUDING THE DEPARTMENT OF EDUCATION, NYS BUNDY AID, NYS HEOP GRANT, NYS TAP, IMLS

Schedule E (Form 990 or 990-EZ) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

	e of the organization TT INSTITUTE				Employer ident	ification number
KAI	IINSIIIUIE				11-1630822	
Pai	General Informatio "Yes" to Form 990, Pa			he United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the o	rganization m	aıntaın record	s to substantiate the a	amount of its grants ar	ıd
	other assistance, the grantee	es' eligibility fo	or the grants o	r assistance, and the	selection criteria used	
	to award the grants or assist	ance?				│ Yes │ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitor	ing the use of its grant	s and other
3	Activites per Region (The follow	ving Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	Europe (Including Iceland and Greenland)	1	1	Program Services	INSTRUCTIONAL	829,943
(2)	Central America and the Caribbean			Investments		22,334,550
(3)						
(4)						
(5)						
За	Sub-total	1	1			23,164,493
b	Total from continuation sheets to Part I					
_	Totals (add lines 3a and 3h)	1	1			23 164 493

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	duplicated if addit	ional space is ne	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	▼	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	ঘ	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	∀	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	ত	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	ঘ	Νo

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation				
PART I, LINE 3, COLUMN (F)	ACCOUNTING METHOD ACCRUAL				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135075555

OMB No 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE G

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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RAT'	TINS	TITH	TF

(Form 990 or 990-EZ)

PRATT INSTITUTE							Employer identification number			
							11-1630822	11-1630822		
Pa	Fundraising Act	t ivities. Complete s are not required				to Fori	m 990, Part IV,	, lıne 17.		
1										
а	Mail solicitations									
b	✓ Internet and email soli	f ✓ Solicitation of government grai				nt grants				
c	Phone solicitations		g 🔽 Special fundraising events				ts			
d	✓ In-person solicitations	5								
2a	Did the organization have a or key employees listed in							✓ Yes		
b	If "Yes," list the ten highes to be compensated at leas			undraisei	rs) pursuant to agreer	ments ur	nder which the fur	ndraiser is		
	(i) Name and address of ındıvıdual or entity (fundraıser)	(ii) Activity	fundrais custe cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(or	Amount paid to retained by) raiser listed in col (i)	(vi) A mount (or retaine organizat	d by)	
1	5 - 1	CONSULTING	Yes	No						
1	DirectLine Technologies Inc DLT	MANAGEMENT		No	70,67	3	73,057		-2,384	
2										
3										
4										
5										
6										
7										
8										
9										
10										
Tota	al			.	70,67	3	73,057		-2,384	
3	List all states in which the registration or licensing	organization is regist	ered or li	censed to	solicit contributions	or has b	een notified it is	exempt from		

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contributi			
		<u> </u>	(a) Event #1 PRATT LEGENDS (event type)	(b) Event #2 FASHION SHOW (event type)	(c) O ther events 3 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	747,671	200,495	310,531	1,258,697
Revenue	2	Less Contributions	56,025	26,400	54,420	136,845
~ 	3	Gross income (line 1 minus line 2)	691,646			
	4	Cash prizes				
رن د	5	Noncash prizes				
Expenses	6	Rent/facility costs				
盔	7	Food and beverages .				
Direct	8	Entertainment				
à	9	Other direct expenses .	253,022	98,286	320,074	671,382
	10	Direct expense summary Add lin	es 4 through 9 in column	(d)		(671,382)
	11	Net income summary Subtract III	ne 10 from line 3, column	(d)	•	450,470
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes	┌ Yes % % No	
		Direct expense summary Add lines				
9 a b	Ist	er the state(s) in which the organiza he organization licensed to operate No," explain	gaming activities in each	n of these states?		
10a b	Wer	re any of the organization's gaming Yes," explain	icenses revoked, susper	ided or terminated during	the tax year?	

Does	s the organization operate gaming activit	ies with nonmembers	;?
12			st or a member of a partnership or other entity
		•	· · · · · · · · · · · · · · · · · · ·
13	Indicate the percentage of gaming acti		Yes No
a			
ь			
14	·		organization's gaming/special events books and records
			g
	Name 🟲		
	Address ►		
15a			m whom the organization receives gaming
L			
Ь	amount of gaming revenue retained by		ne organization 🟲 \$ and the
_			
С	If "Yes," enter name and address of the	third party	
	Name ▶		
	Address 🏲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation > \$		
	Description of services provided •		
			<u>_</u>
	·	Employee	Independent contractor
17	Mandatory distributions	- I	bla diskubishing form bla manning managed to
а			ble distributions from the gaming proceeds to
			Yes No
b			istributed to other exempt organizations or spent
Day	in the organization's own exempt activity To the organization's own exempt activity To the organization's own exempt activity To the organization's own exempt activity The organization of the organizati		planations required by Part I, line 2b, columns (iii) and (v), and
Fal		b, 15c, 16, and 17	blanations required by Part 1, line 2b, columns (iii) and (v), and b, as applicable. Also complete this part to provide any
	Return Reference	-	Explanation

Schedule I

(Form 990)

DLN: 93493135075555

OMB No 1545-0047

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.

Open to Public **Inspection**

Attach to Form 990 Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization PRATT INSTITUTE

Employer identification number

11-1630822

e) A mount of non- cash assistance	 	h) Purpose of gran r assistance
		No 50055P Schedule 1

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.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT FINANCIAL AID	2583	42,668,706			
Part IV Supplemental Infor	mation. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.
Datama Dafamana	1				

Return Reference

Form 990, SCH I, Part I, line 2

Monitoring the use of grants The Office of Financial Aid processes all students' financial aid awards based on guidelines set forth by federal, state and local governments These awards are included in the student financial package and are applied to the students' accounts once all eligibility requirements are met. The Office of Financial Aid reconciles all federal funds to the US Department of Education Common Origination and Disbursement system on a monthly basis. In addition, the Controller's Office reconciles the award disbursement activities posted to the Institute's General Ledger account to the Students' Accounts receivable ledgers and Financial Aid awards reports. The Controller's Office also handles the reimbursement requests, reconciliation of funds received and monitor the spending level to ensure that actual disbursements does not exceed the authorized government grant.

DLN: 93493135075555

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization PRATT INSTITUTE

Employer identification number

11-1630822

Pa	Tt I Questions Regarding Compensation			
			Yes	No
1a	Check the approplate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		No
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
Ь	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
Ь	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns (B)(ı)-(D)	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits		reported as deferred in prior Form 990
See Addıtıonal Data Table							

Schedule J (Form 990) 2013

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
,	Pratt Institute paid for the President's personal life and home owners insurance premiums in FY 2013-14 The premiums paid on the president's life and homeowner's policies are not included in the nontaxable benefits and are reflected as taxable income on his Form W-2 Housing Allowance Pratt Institute provides housing to Thomas Schutte and Edmund Rutkowski Housing is a condition of their employment and is provided for the convenience of the Institute, therefore, it is not included in taxable income

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 11-1630822

Name: PRATT INSTITUTE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J, Par	Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name	ļ	(B) Breakdown of	f W-2 and/or 1099-MIS	5C compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	reported in prior Form	
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	Compensation	Denents	(6)(1) (6)	990 or Form 990-EZ	
JUDY AARON VP ENROLLMENT	(I) (II)		0	1,346 0	10,788 0	3,342 0	2 231,236	0	
PETER BARNA PROVOST	(1) (11)		0	_/	12,750 0	11,088	306,937 0	0	
ANDREW BARNES DEAN SCH OF LIB ARTS & SCI	(1) (11)	0	o		8,836 0	23,545 0	205,587	0	
TODD M GALITZ VP DEVELOPMENT	(I) (II)	0	0		12,823 0	3,442 0	275,109	0	
TULA GIANNINI DEAN SCH OF INFO & LIBRARY SCI	(I) (II)	0	o	-/	9,075 0	22,786 0	210,036	0	
GLEN GORDON EXEC DIR OF FACILITIES MGMT	(1) (11)	0	o	1 ' 1	9,101	3,266 0	190,722	0	
THOMAS HANRAHAN DEAN SCHOOL OF ARCHITECTURE	(I) (II)	0	o		8,256 0	23,521 0	. 193,615 0 0	0	
JOE HEMWAY CHIEF INFO AND TECH OFFICER	(I) (II)		0		10,609	10,634	232,779	0	
HELEN MATUSOW- AYRES VP STUDENT AFFAIRS	(I) (II)	0	0		9,152 0	3,267 0	196,158 0	0	
JOHN L PIERCE DIRECTOR	(1) (11)		0	' ' '	9,686 0	23,590 0	223,873	0	
EDMUND RUTKOWSKI VP FINANCE AND ADMIN	(1) (11)	0	0	1 ' 1	12,750 0	53,520 0	334,378	0	
THOMAS F SCHUTTE PRESIDENT AND TRUSTEE	(I) (II)		0	12,360	12,750 0	116,449 0	796,496 0 0	0	

DLN: 93493135075555

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Internal Revenue Service Name of the organization PRATT INSTITUTE

Department of the Treasury

Employer identification number

11-1630822

Pa	Part I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue pr	псе	(f)	f) Descriptio	n of purpose	(g) De	feased		On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	DORMITORY AUTHORITY OF THE STATE OF NEW YORK BONDS	11-1630822	6499038R5	03-19-2009	52,195	,000,		ES 2009 A8 JND 199	&B-ADVANCI		x		x		X
В	DORMITORY AUTHORITY OF THE STATE OF NEW YORK BONDS	11-1630822	649905NT9	08-13-2009	50,085	,890	2009C REV BONDS CONTRUCTION OF ED			х		Х		Х	
Pa	art II Proceeds														
					Α			E	3		С			D	
1	A mount of bonds retired					7,645,	,000 3,445,890								
2	A mount of bonds legally defeased						0		0						
3	Total proceeds of issue	5 2	2,195,	,000	!	50,085,890									
4	Gross proceeds in reserve fund	Gross proceeds in reserve funds					,535		3,231,150						
5	Capitalized interest from proce	eeds					0		0						
6	Proceeds in refunding escrows				4 7	47,638,654 0		_					_		
7	Issuance costs from proceeds				1	1,038,520 829,200									
8	Credit enhancement from proc	eeds				252,356 649,155									
9	Working capital expenditures f	rom proceeds					0		0						
10	Capital expenditures from proc	eeds			1	1,465,	,935	4	45,376,385						
11	Other spent proceeds						0		0						
12	Other unspent proceeds						0		0						
13	Year of substantial completion								•			•			
					Yes	No	<u> </u>	Yes	No	Yes	<u> </u>	lo	Yes	:	No
14	Were the bonds issued as part	of a current refund	ng issue?		Х				Х						
15	Were the bonds issued as part	of an advance refu	nding issue?		Х				Х				_		
16	Has the final allocation of proc	eeds been made?			Х				Х						
17	Does the organization maintain	n adequate books a	nd records to supp	ort the final	х			Х							

Part IIII Private Business Use

allocation of proceeds?

			A		В	1	С)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		х				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		×		X				
=								1 1 16 65	222) 2245

Part III Private Business Use (Continued)

	Filvate business use (Continued)								
I			A		В		С	D)
ļ		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		х		х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %	-			
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		2 100 %		0 %				
6	Total of lines 4 and 5		2 100 %		0 %				
7	Does the bond issue meet the private security or payment test?		Х		Х				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		×		Х				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		х		х				

Part IV Arbitrage

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the Issuer filed Form 8038-T?		Х		×				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?								
С	No rebate due?	Х		Х					
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	Х			Х				
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?				Х				
b	Name of provider	0		0					
С	Term of hedge								
d	Was the hedge superintegrated?		Х		Х				
е	Was the hedge terminated?		Х		Х				
							Sc	hedule K (Forn	1 990) 2013

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X				
b	b Name of provider			0					
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	6 Were any gross proceeds invested beyond an available temporary period?		X		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?		x		×				
		•	•	•		•	•	•	

Part V Procedures To Undertake Corrective Action

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

Α		В		С		D	
Yes	No	Yes	No	Yes	No	Yes	No
	×		×				
	^		^				

Part VI	Supplemental Info	ormation. Provide additional	Information for res	ponses to question	<u>s on Schedule K (</u>	see instructions).	

Return Reference	Explanation
PART 1, COLUMN (F)	Part I, Column (B) 2009C Bond Issue DESCRIPTION OF PURPOSE FINANCE THE ACQUISITION AND CONSTRUCTION OF AN EDUCATIONAL CONDOMINIUM BUILDING, PROVIDING CLASSROOM AND ADMINISTRATIVE OFFICE SPACE, LOCATED AT 526-542 MYRTLE AVE PART III, LINE 9, COLUMNS A AND B THE ORGANIZATION IS CURRENTLY WORKING WITH LEGAL COUNSEL/TAX ADVISORS TO ESTABLISH WRITTEN PROCEDURES to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2 PART IV, LINE 2C, COLUMN A REBATE CALCULATION WAS COMPLETED ON MARCH 19, 2014 NO REBATE WAS DUE PART IV, LINE 7, COLUMNS A AND B THE ORGANIZATION IS CURRENTLY WORKING WITH LEGAL COUNSEL/TAX ADVISORS TO ESTABLISH WRITTEN PROCEDURES FOR A POST-ISSUANCE COMPLIANCE PROCESS TO MONITOR COMPLIANCE WITH THE ARBITRAGE REQUIREMENTS AS SET FORTH IN INTERNAL REVENUE CODE SECTION 148 PART V, COLUMNS A AND B THE ORGANIZATION IS CURRENTLY WORKING WITH LEGAL COUNSEL/TAX ADVISORS TO ESTABLISH WRITTEN PROCEDURES FOR POST-ISSUANCE COMPLIANCE THAT QUALITY FOR TREATMENT UNDER THE IRS VOLUNTARY CLOSING AGREEMENT PROGRAM AS SET FORTH IN INTERNAL REVENUE MANUAL SEC. 7 2 3 4 4

DLN: 93493135075555

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Open to Public ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Inspection

Name of the organization PRATT INSTITUTE

Employer identification number

			11	1630822
Part I Types of Property	I			I
	(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	Х	1	3,250	FMV
2 Art—Historical treasures .				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded .	Х	16	202,987	SALE PROCEEDS
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation				
contribution—Other				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Realestate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies .				
21 Taxıdermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other►(ΓWO 55-INCH TVS)	Х	1	16,000	
26 Other►(SONY BETACAM SP)	Х	1	7,000	
27 Other►(FABRIC,BOOKS,&SWATCHES)	Х	1	5,000	
28 Other►(ANTIQUES, MEN'S SUITS, GIFT BOX, & FASHION ITEMS)	Х	6	5,617	FMV
29 Number of Forms 8283 received by th for which the organization completed F	_	-	l 3	9 1 Yes No
30a During the year, did the organization i	eceive by	contribution any property r	reported in Part I, lines 1	
it must hold for at least three years fr	om the date	e of the initial contribution	, and which is not require	d to be used
for exempt purposes for the entire hol				30a No
b If "Yes," describe the arrangement in				354 140
31 Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard co	ontributions? 31 Yes
32a Does the organization hire or use thir contributions?	d parties or	related organizations to s	olicit, process, or sell no	
	•			32a No
b If "Yes," describe in Part II	mount in a	dumn (c) for a type of area	arty for which column (a)	is shocked
33 If the organization did not report an a	mount III CC	namin (c) for a type of prop	ercy for willen column (a)	is checked,

Part II Supplem

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135075555

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization
PRATT INSTITUTE

Employer identification number

11-1630822

Return Reference	Explanation
FORM 990, PART I AND PART III, LINE 1 - ORGANIZATION'S MISSION	TO EDUCATE ARTISTS, DESIGNERS, ARCHITECTS AND OTHER CREATIVE PROFESSIONALS TO BE RESPONSIBLE CONTRIBUTORS TO SOCIETY PRATT SEEKS TO INSTILL IN ALL GRADUATES AESTHETIC JUDGMENT, PROFESSIONAL KNOWLEDGE, COLLABORATIVE SKILLS, AND TECHNICAL EXPERTISE WITH A FIRM GROUNDING IN THE LIBERAL ARTS AND SCIENCES, A PRATT EDUCATION BLENDS THEORY WITH CREATIVE APPLICATION AND MASTERY OF TECHNOLOGY IN PREPARING GRADUATES TO BECOME LEADERS IN THEIR PROFESSIONS PRATT ENROLLS A DIVERSE GROUP OF HIGHLY TALENTED AND DEDICATED STUDENTS, CHALLENGING THEM TO ACHIEVE THEIR FULL POTENTIALS

Return Reference	Explanation
FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	LINE 4A INSTRUCTION

Return Reference	Explanation
FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	LINE 4B PUBLIC SUPPORT ————————————————————————————————————

Return Reference	Explanation
FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	LINE 4C ACADEMIC SUPPORT

Return Reference	Explanation	
	FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	LINE 4D OTHER PROGRAM SERVICES Student Services, Institutional Support, Operation & Main tenance of Plant, Auxiliary Enterprises — Student Services includes expenses incurred for students' activities and eve into by the following student support services departments. Admissions, Registrar, Bursar, Financial Aid, Athletics, International Affairs, Health & Counseling, Career Services and other student services departments. Pratt provides students with opportunities to live, wo rik and create with some of the most interesting, creative and inspring minds as well as a full array of services, programs and activities. Some of the students' achievements incluide participation in an initiative to create work that celebrates the rich history and future innovations of the Wall Street Journal's 125th anniversary and Vogue naming two Pratt Students in its List of 2014 Fashion Graduates to watch. The Student Affairs division provi des programs and services that promote student learning and advocates for and supports students as they meet the challenges of the Pratt experiences. The Office of International Affairs provides services to about 1,200 international students from over 75 countries as well as J1 exchange visitors, exchange students, professors and scholars. This office is responsible to ensure Pratts compliance with the Department of Homeland Security and Department of State Institutional Support Includes expenditures primary incurred by the Security Office, Strategic Planning, Office of Institutional Research Information technology, academic marketing, sustainability and other programs ervices related general institution expenses. Tremendous progress with the implementation of the approved strategic plan for 2012-17 has been achieved and most goals were being implemented on Student Services. The provided by the Educational Technology of the security and State required enrollments. Financial surveys, alunched the online Pratt Fact Book in May and launched three surveys Employee satisfaction with Pratt retrement ben

Return Reference	Explanation	
	FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS	ts currently in design/ feasibility planning/contract documents include renovations on the lower level of the ARC to expand Gallery space for Photo dept, ISC 1st floor for Disability services, 2nd floor for Franklin furnace, creation of a Smart Materials lab on the 3rd floor of Steuben Hall, redisign of the Financial Services reception at Myrtle Hall and mo diffications to the Navy Yard Incubator space for the Arch department. Auxiliary Enterprise is The Residential Life and Student Housing expenditures are reported under auxiliary enterprises. Its mission is to efficiently and effectively administer a housing program in a Learning centered environment that challenges and supports students to 1) enhance self-under standing 2) value community responsibility and 3) learn from their experiences. The polic ies, procedures and programs established and encouraged by Residential Life are those which enhance student learning and involvement outside the classroom. The Institute manages and maintains five dormitories, tow nhouses and off-campus housing that provide housing for P ratt students. Included also in the Auxiliary Enterprise is the management of the student meal plan program, Pratt Art Supply operations (officially closed 12/2013) and Activity Re source Center activities which are primarily maintained for the use and convenience of stu dents, faculty and staff

Return Reference	Explanation
Form 990, Part VI Line 2	FAMILY RELATIONSHIP MIKE PRATT, DAVID PRATT AND ANNE H VAN INGEN

Return Reference	Explanation
FORM 990, PART VI LINE 11	REVIEW OF 990 THE RETURN IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY THE ORGANIZATION AND IN CONSULTATION WITH THE ORGANIZATION'S STAFF THE DRAFT PREPARED BY THE ACCOUNTING FIRM IS THEN SUBMITTED TO THE CONTROLLER AND THE VP OF FINANCE, TO WHOM THE BOARD HAS DELEGATED AUTHORITY TO REVIEW AND APPROVE FOR E-FILING THE COMPLETED FORM 990 WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI LINE 12	CONFLICT OF INTEREST POLICY THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY COVERING ALL TRUSTEES, OFFICERS, AND EMPLOYEES that PROVIDES THAT NO INDIVIDUAL MAY PARTICIPATE IN DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL FINANCIAL INTEREST ALL TRUSTEES, OFFICERS AND INDIVIDUALS WHO HAVE SIGNING AUTHORITY ARE REQUIRED TO CERTIFY COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND TO INDICATE WHETHER THE ORGANIZATION DOES BUSINESS WITH AN ENTITY IN WHICH THEY HAVE A MATERIAL FINANCIAL INTEREST

Return Reference	Explanation
FORM 990, PART VI LINE 15	PROCESS OF DETERMINING COMPENSATION The compensation for the President, CEOs, Officers and certain key Employees are determined by a process that includes the use of comparability data, review and approval by the Board and contemporaneous recordkeeping of deliberations and decisions. The President's level of compensation is further reviewed by the Executive Committee of the Board of Trustees including the president's performance. Based upon the review, President's compensation is then determined and approved by the Committee.

Return Reference	Explanation
VI LINE 19	DISCLOSURE THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC AT ANY TIME UPON REQUEST FROM THE OFFICE OF THE VP OF FINANCE OR THE CONTROLLER'S OFFICE

Return Reference	Explanation
	LINE 5 POSTRETIREMENT RELATED CHANGES OTHER THAN NET PERIODIC POSTRETIREMENT BENEFIT COST \$(9,964,435) ====================================