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DLN: 93493091009166

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	or the 2014 c	alendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015		
B Ch	eck if applicabl	e PACE UNIVERSITY	D Emplo	yer identification number
☐ Ad	dress change	% ROBERT C ALMON	13-55	562314
☐ Na	me change	Doing business as		
┌ Ini	tıal return		F Telenh	one number
┌ Fir	nal :urn/terminated	Number and street (or P O box if mail is not delivered to street address) Room/suite ONE PACE PLAZA		346-1227
_	nended return plication pendir	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 100381598	G Gross r	receipts \$ 503,800,263
		STEPHEN J FRIEDMAN ONE PACE PLAZA NEW YORK NY 100381598	I(a) Is this a group subordinates?	Γ Yes Γ No
т Та	ıx-exempt statı	IS	included?	a list (see instructions)
	•		,	,
			I(c) Group exempt	ion number 🕨
		on Corporation Trust Association Other -	L Year of formation 19	M State of legal domicile NY
Pa	rt I Su	mmary		
Governance	PACE QUAL ———	describe the organization's mission or most significant activities UNIVERSITY CONSIDERS TEACHING AND LEARNING ITS PRIORITY P IFIED AND DIVERSE STUDENT POPULATION		
	2 Check	this box 🔭 if the organization discontinued its operations or disposed of m	nore than 25% of its	net assets
Activities &		er of voting members of the governing body (Part VI, line 1a)		3 28
ij.		er of independent voting members of the governing body (Part VI, line 1b)		4 25
Ę		number of individuals employed in calendar year 2014 (Part V, line 2a) .		5 5,674
۹,		number of volunteers (estimate if necessary)		6 120
		inrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34		7a -33,685 7b -62,748
	D Net an	Telaced business taxable income nonitrollings of 1, line 31. 1. 1. 1.	Prior Year	Current Year
	8 Con	tributions and grants (Part VIII, line 1h)	16,475,	
ĕ		ram service revenue (Part VIII, line 2g)	444,839,	
Rayenue	10 Inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)	28,822,	291 5,176,427
ď		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,850,	619 3,365,547
		l revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	492,988,	304 497,798,171
		nts and similar amounts paid (Part IX, column (A), lines 1–3)	136,727,	
		efits paid to or for members (Part IX, column (A), line 4)	100,727,	0 0
	15 Sala	ries, other compensation, employee benefits (Part IX, column (A), lines	203,866,	468 190,915,020
Expenses	5-1 16a Prof	0) essional fundraising fees (Part IX, column (A), line 11e)	273,	
Ð		fundraising expenses (Part IX, column (D), line 25) -5,189,664		000,200
Ш		er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	125,508,	517 133,266,210
	1	l expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	466,375,	
	1	enue less expenses Subtract line 18 from line 12	26,612,	
Net Assets or Fund Balances			Beginning of Curre Year	nt End of Year
LSS4 Bak		ll assets (Part X, line 16)	593,137,	972 599,905,019
28	1	ıl lıabılıtıes (Part X, lıne 26)	408,784,	
		assets or fund balances Subtract line 21 from line 20 . . .	184,353,	738 208,171,878
Unde my k	er penalties on nowledge an arer has any	of perjury, I declare that I have examined this return, including accompanyin d belief, it is true, correct, and complete Declaration of preparer (other than	officer) is based on 2016-03-28 Date	
Pai	d	LAURA J PARELLO LAURA J PARELLO	Check If self-employed	P01080295
	parer	Firm's name ► PRICEWATERHOUSECOOPERS LLP	Firm's EIN ►	
	Only	Fırm's address ► 300 MADISON AVENUE	Phone no (646	6) 471-3000

NEW YORK, NY 10017

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

┌ Yes ┌ No

Forn	990 (2014)					Page
Par		nt of Program Ser hedule O contains a re			III	
1	Briefly describe th	ne organization's mission	on			
		UCATES STUDENTS T S WHO POSITIVELY I			", HIGHLY SOUGHT AFTER AS DCIETY	S INNOVATORS AND
_						
2		on undertake any signif or 990-EZ?			r which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on	Schedule O			
3	_	on cease conducting, or	•	2	nducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Sch	edule O			
4	expenses Section		(4) organization	s are required to report	ree largest program services, a t the amount of grants and alloo	
4a	(Code) (Expenses \$	116,550,785	ıncludıng grants of \$	0) (Revenue \$	391,290,546)
	INSTRUCTIONAL - TO UNDERGRADUATE ST		PLIES, EQUIPMENT	AND OTHER MATERIALS FO	R THE INSTRUCTION OF FULL AND PA	RT-TIME GRADUATE AND
	(Code) (Expenses \$	148,561,121	ıncludıng grants of \$	148,561,121) (Revenue \$	4,513,419)
.5	•	PROVIDE STUDENTS WITH A	, ,			
4c	(Code) (Expenses \$	58,928,858	ıncludıng grants of \$	0) (Revenue \$	59,216,297)
	AUXILIARIES - TO ME	ET NON-INSTRUCTIONAL NE	EEDS OF STUDENTS	SUCH AS DORMS AND CAF	ETERIA SERVICES	
	See Additional Da	ata				
	Other program as	orugos (Doserbo :	hadula O)			
4u	Other program se	ervices (Describe in Sc	nedule O)			

91,272,664 including grants of \$

415,313,428

4e

(Expenses \$

Total program service expenses ►

14,210,349)

0) (Revenue \$

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^{\bullet}	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	Yes	
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
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, 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	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f color}$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI 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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	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	
15	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
16	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
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more 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 domestic 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 or for domestic individuals 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		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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	Yes	
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M $\footnote{50}$	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	Yes	
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	_
		F	orm 990	(2014)

Part V Statements Regarding Other IRS Filings and Tax Compliance

. G	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 417	. !		
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	ļ !		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	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 over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b		
_	In res, to fine 3a of 3D, and the organization life rottin 0000-17	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	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		No
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
F	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
Эа	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
,	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	_	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N c
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b		140

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

Check if Schedule O	contains a	response	or note to an	/ line in t	his Part VI		_	_	_									V
Check if Schedule O	contains a	1 C3 POII3 C	or mote to an	, ,,,,,	.iii3 i aic vi	•	•	•		•	•	•	•	•	•	•	•	-,

Se	ction 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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Νo
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	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶NY
- 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 V 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
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►ROBERT C ALMON

235 ELM ROAD

BRIARCLIFF MANOR, NY 10510 (212) 346-1227

Form 990 (2014)	
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age 🛭	,
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
--	-----------------------	---------------------------------------	--	---	-----	------------------

Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is	ne l both	box, an d	heck unless officer stee)	6	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	7,481,452	0	1,178,346

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►409

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ABM JANITORIAL SVCS NORTHEAST INC, 551 Fifth Avenue Suite 300 NEW YORK, NY 10176	CLEANING SERVICES	8,485,764
WINFIELD SECURITY CORP, 57 WEST 38TH STREET NEW YORK, NY 10018	SECURITY SERVICES	5,768,780
KIRCHOFF-CONSIGLI CONSTRUCTION MGMT, 199 WEST ROAD SUITE 100 PLEASANT VALLEY, NY 12569	CONSTRUCTION SERVICE	53,010,154
CHARTWELLS DINING SERVICE, 303 CROSSWAYS PARK DRIVE WOODBURY, NY 11797	FOOD SERVICES	11,323,573
ANDRON CONSTRUCTION CORPORATION, 21 ANDERSON LANE GOLDENS BRIDGE, NY 10526	CONSTRUCTION SERVICE	5,270,028
2 Total number of independent contractors (including but not limited to tho	se listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶150

Part V	/	Statement o						
		Check if Schedi	ule O contains a respoi	nse or note to any IIr	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue and Other Similar Amounts	1a	Federated cam	paigns 1a					
ants	ь	Membership du	ıes 1b					
Gr.	c c	Fundraising ev	ents 1c	933,584				
Ē,	d	Related organiz						
Gi Jiaa	e	Government grant		8,306,445				
Sin		_						
uţi ře	f	similar amounts no	ons, gifts, grants, and 1f ot included above	10,785,556				
를등	g	Noncash contributi 1a-1f \$	ons included in lines	727,389				
No.	h	Total. Add lines	s 1a-1f		20,025,585			
				Business Code				
ını	2a	TUITION AND FEES	S	900099	407,256,115	407,256,115		
95 57	b	DORMITORY RENT	ALS	900099	48,459,581	48,459,581		
- Ce	С	FOOD SERVICE RE	VENUE	900099	10,734,501	10,734,501		
ē. Z	d	ACADEMIC ACTIVI	TIES	900099	2,324,622	2,324,622		
S =	e	BOOKSTORE COM	MISSIONS	900099	350,000	350,000		
Ž	f	All other progra	am service revenue		105,793	105,793	0	
Ě	g	Total. Add lines	s 2a-2f		469,230,612			
	3		ome (including dividen		1,750,915		-33,685	1,784,600
	4	and other simil	ar amounts) stment of tax-exempt bond	<u> </u>	86,873		33,003	86,873
	5	Royalties .			70,000			70,000
		•	(ı) Real	(II) Personal				
	6a	Gross rents	2,064,943					
	b	Less rental expenses	2,020,324					
	С	Rental income or (loss)	44,619	0				
	d	, ,	me or (loss)		44,619			44,619
	_	C	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of 6,664,627 assets other						
		than inventory	than inventory					
	b	Less cost or other basis and	3,325,988					
	c	sales expenses Gaın or (loss)	3,338,639					
	d	Net gaın or (los	ss)		3,338,639			3,338,639
<u> </u>	8a	events (not inc	from fundraising luding 3,584					
Other Revenue		¥	s reported on line 1c)					
<u>.</u>	Ь	less directev	penses b	290,486 655,780				
돌	c		(loss) from fundraising		-365,294			-365,294
-	9a		from gaming activities ne 19 a					
	Ь	Less direct ev	penses b					
	c		(loss) from gamıng actı		0			0
	10a	Gross sales of returns and allo						
	b	Less cost of a	oods sold b					
			(loss) from sales of inv	entory	0			0
		Miscellaneou	s Revenue	Business Code				
	11a	NO N-PRO GRA	M REVENUE	900099	3,011,042			3,011,042
	b		S IN FUNDS HELD AXABLE 2013B	900099	-984			-984
	С	ATHLETIC ME		900099	606,164			606,164
	d	-	ue					
	е	Total. Add lines	s 11a-11d	🕨	3,616,222			
	12	Total revenue.	See Instructions .	🗚	497,798,171	469,230,612	-33,685	8,575,659

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colu

	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, , 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 domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	148,561,121	148,561,121		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals 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	6,726,323	2,729,986	3,583,560	412,777
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	147,605,170	125,170,913	19,653,242	2,781,015
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	10,199,503	8,649,298	1,358,037	192,168
9	Other employee benefits	15,709,673	13,321,987	2,091,702	295,984
10	Payroll taxes	10,674,351	8,868,759	1,587,001	218,591
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	620,910	48,865	564,789	7,256
С	Accounting	296,782		296,782	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	355,109			355,109
f	Investment management fees	972,718		972,718	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	9,191,186	6,128,087	2,715,098	348,001
12	Advertising and promotion	3,862,714	3,162,458	650,270	49,986
13	Office expenses	10,790,091	6,693,363	3,969,500	127,228
14	Information technology	4,092,708	2,239,412	1,779,020	74,276
15	Royalties	0			
16	Occupancy	60,414,128	52,441,242	7,972,886	
17	Travel	5,165,191	4,552,460	500,296	112,435
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	705,180	529,484	140,938	34,758
20	Interest	4,366,803	4,111,680	255,123	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	12,695,582	11,452,332	1,243,250	
23 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)	1,058,061	658,460	394,601	5,000
а	MEALS COSTS&STUDENT ACTIVITY	11,012,089	10,263,537	600,180	148,372
b	LIBRARY BOOK PURCHASES	1,961,756	1,947,645	14,111	, :-
c	EQUIPMENT REPAIR SERVICE EXP	2,607,508	2,156,715	450,793	
d	MISC EXPENSES	3,452,803	1,625,624	1,800,471	26,708
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	473,097,460	415,313,428	52,594,368	5,189,664
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	τX	Check if Schedule O contains a response or note to any line ii	n this Part X			
	_			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		11,183,992	2	12,458,627
	3	Pledges and grants receivable, net		10,604,842	3	13,896,332
	4	Accounts receivable, net		9,097,049	4	7,572,757
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete I Schedule L	Part II of	, key o	5	0
ŧ	6	Loans and other receivables from other disqualified persons (4958(f)(1)), persons described in section 4958(c)(3)(B), and and sponsoring organizations of section 501(c)(9) voluntary organizations (see instructions) Complete Part II of Schedule	oyers		0	
Assets	7	Notes and loans receivable, net		12,882,717	_	12,125,689
4	8	Inventories for sale or use		41,621	8	0
	9	Prepaid expenses and deferred charges		6,649,708	_	6,464,988
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		15,487	,	9, 10 1,000
	Ь	Less accumulated depreciation	10b 171,6	B8,148 281,647,487	10c	354,627,339
	11	Investments—publicly traded securities		73,236,910		64,241,487
	12	Investments—other securities See Part IV, line 11		86,559,341	12	94,839,802
	13	Investments—program-related See Part IV, line 11		0		0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		101,234,305		33,677,998
	16	Total assets. Add lines 1 through 15 (must equal line 34) .		593,137,972		599,905,019
	17	Accounts payable and accrued expenses		46,078,534		56,969,801
	18	Grants payable		12,841,700	18	13,091,236
	19	Deferred revenue		18,312,485	19	21,768,059
	20	Tax-exempt bond liabilities		201,469,455	20	198,224,268
	21	Escrow or custodial account liability Complete Part IV of Sc		0		0
ilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	ctors, trustees,			
Liabilit		persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third part	ies	34,130,000	23	23,565,000
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete P	art X of Schedule			
		D		95,952,060		78,114,777
	26	Total liabilities. Add lines 17 through 25		408,784,234	26	391,733,141
ě		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	_j v and complete			
anc	27	Unrestricted net assets		9,942,479	27	37,932,394
89 	28	Temporarily restricted net assets		95,910,910	28	90,824,912
귤	29	Permanently restricted net assets		78,500,349	29	79,414,572
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here ► ┌ and			
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
AS	32	Retained earnings, endowment, accumulated income, or other			32	
Šet	33	Total net assets or fund balances		184,353,738	33	208,171,878
Z	34	Total liabilities and net assets/fund balances		593,137,972	34	599,905,019
		• • • • • • • • • • • • • • • • • • • •		, ,		Form 000 (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. IV
1	Total revenue (must equal Part VIII, column (A), line 12)	1		497,7	98,171
2	Total expenses (must equal Part IX, column (A), line 25)	2		473 (97,460
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				700,711
5	Net unrealized gains (losses) on investments	5			353,738 916,114
6	Donated services and use of facilities	6		-:	710,114
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			27,931
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		208,	71,878
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. $ abla$
				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 review a separate basis, consolidated basis, or both	ewed o	n		
	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 sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	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	

Additional Data

Software ID:

Software Version:

EIN: 13-5562314

Name: PACE UNIVERSITY

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code ACADEMIC SUPPORT) (Expenses \$	45,945,839	including grants of \$) (Revenue \$	7,041,217)
(Code STUDENT SERVICES) (Expenses \$	41,073,659	including grants of \$) (Revenue \$	5,383,735)

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	4,253,166	including grants of \$) (Revenue \$	1,785,397)
RESEARCH					

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

Compensated Employees, and Inde	ependent Cor	ntracto	rs			•	-			1
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th person and a	ion (nan o n is b	ne booth a	ox, u an of trus	inless 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	Key employee	Highest compensated employee	Former		, , , , , , , , , , , , , , , , , , ,	related organizations
(1) MARK M BESCA	1 0	х						0	0	0
TRUSTEE (1) ANIELLO A BIANCO	0 0									
TRUSTEE	0 0	x						0	0	0
(2) PHILIP F BLESER	1 0									
TRUSTEE	0 0	X						0	0	0
(3) CHRISTOPHER A EDWARDS	1 0	x						0	0	0
TRUSTEE	0.0							_	-	
(4) JOHN A GERSON	1 0	х						0	0	0
TRUSTEE (5) CYNTHIA GREER GOLDSTEIN	1 0									
TRUSTEE	0 0	X						0	0	0
(6) BARRY M GOSIN	1 0	×						0	0	0
TRUSTEE	0 0	_ ^						0	0	0
(7) BRIDGET-ANNE HAMPDEN	1 0	x						0	0	0
TRUSTEE (8) JAMES E HEALEY	0 0									
TRUSTEE	0 0	х						0	0	0
(9) SURESH MUNSHANI	1 0									
TRUSTEE	0 0	Х						0	0	0
(10) EDWARD F MURPHY	1 0	x						0	0	0
TRUSTEE (11) JOHN T O'CONNOR	0 0									
TRUSTEE	0.0	x						0	0	0
(12) MICHAEL O'REILLY	1 0	.,								
TRUSTEE	0 0	Х						0	0	0
(13) DAVID J PECKER	1 0	x						0	0	0
TRUSTEE (14) BARBARA ANN PORCEDDU	0 0									
TRUSTEE	0.0	x						0	0	0
(15) THOMAS J QUINLAN	1 0									
TRUSTEE	0 0	Х						0	0	0
(16) CAROL RAPHAEL	1 0	X						0	0	0
TRUSTEE (17) JACK J RIBEIRO	0 0									
TRUSTEE	0 0	x						0	0	0
(18) JOSEPH F RYAN	1 0	.,						205.006		64.670
TRUSTEE, FT FACULTY MEMBER	0 0	Х						205,906	0	61,679
(19) JACK L SALZMAN	1 0	l x						0	0	0
TRUSTEE (20) IVAN G SEIDENBERG	0 0									
TRUSTEE	0 0	х						0	0	0
(21) MARIE J TOULANTIS	1 0							_	_	_
TRUSTEE	0 0	Х						0	0	0
(22) RICHARD F ZANNINO	1 0	х						0	0	0
TRUSTEE (23) SUSAN S WALLACH	0 0								_	
TRUSTEE	0 0	x						0	0	0
(24) NANCY A GARVEY PHD	1 0									
TRUSTEE	0 0	X						0	0	0
										

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(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	Key employee	Highest compensated employee	Former	_,,	2,200	related organizations
(26) JOSEPH IANNIELLO	1 0	Х						0	0	0
TRUSTEE (1) PHOTEINE M ANAGNOSTOPOULOS	0 0									
TRUSTEE	0 0	X						0	0	0
(2) STEPHEN J FRIEDMAN PRESIDENT	40 0	х		х				691,800	0	44,684
(3) CHARLES N JORDAN JR	1 0	х						0	0	0
TRUSTEE (THROUGH 05/15) (4) HAROLD O LEVY	0 0									
TRUSTEE (THROUGH 08/14) (5) ROBERT C ALMON	0 0	Х						0	0	0
EVP AND CFO	0 0			Х				362,090	0	38,560
(6) UDAY SUKHATME PROVOST & EVP ACADEMIC AFFAIRS	40 0			х				394,910	0	38,368
(7) STEPHEN BRODSKYCORP SECRETARY & LEGAL COUNSEL	40 0			х				213,423	0	51,861
(8) ELIZABETH GARTI	40 0			Х				163,607	0	18,415
ASSOCIATE VP FOR HR (9) ROBERT GM KEATING	0 0 40 0									
VP, STRATEGIC INITIATIVES (10) WILLIAM MCGRATH	0 0			X				235,144	0	26,062
SVP AND CAO	0 0			х				303,976	0	29,822
(11) JENNIFER BERNSTEIN VICE PRESIDENT FOR DEVELOPMENT	40 0			х				208,194	0	57,491
(12) MATTEO RENNA	40 0			х				166,707	0	49,324
ASSOCIATE VP FOR HR (13) ROBINA C SCHEPP	40 0			<u> </u>						
VICE PRESIDENT FOR ENROLLMENT (14) THOMAS M BRADY	0 0			Х				256,477	0	26,063
TREASURER	0 0			Х				176,399	0	17,648
(15) FREDERICA N WALD	40 0			х				209,293	0	32,164
(16) CHRISTOPHER V ELARDE INTERIM CIO	40 0			х				154,803	0	38,789
(17) CLARE VAN DEN BLINK	40 0			х				95,041	0	12,249
VICE PRESIDENT, CIO (18) NEAL S BRAUN	40 0				×			359,611	0	39,199
DEAN, LUBIN SCHOOL OF BUSINESS (19) HARRIET R FELDMAN	0 0 40 0									
DEAN, COLLEGE OF HEALTH PROFS (20) NIRA HERRMANN	0 0				X			274,157	0	48,576
DEAN, DYSON COLLEGE	0 0				Х			318,461	0	28,245
DEAN, SCHOOL OF EDUCATION	40 0				Х			191,462	0	33,457
(22) MICHELLE S SIMON DEAN, SCHOOL OF LAW	40 0				х			414,931	0	36,143
(23) AMAR GUPTA	40 0				х			362,639	0	57,259
DEAN, SEIDENBERG SCHOOL (24) DAVID S YASSKY	40 0				х			253,543	0	25,846
Dean, Law School	0 0							,		<u>, , , , , , , , , , , , , , , , , , , </u>

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more the personal Individual trusties or director	ion (e nan o n is b	ne booth a	ox, u an of trus	inless ficer tee)	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
(51) JONATHAN HILL INTERIM DEAN, SEIDENBERG	40 0				х			150,969	0	48,255
(1) JOHN NOLON PROFESSOR, LAW SCHOOL	40 0					х		273,368	0	68,250
(2) DANIEL BAUGHER PROFESSOR	40 0					х		286,594	0	73,071
(3) RUDOLPH JACOB PROFESSOR	40 0					х		276,894	0	64,587
(4) NANCY URBANOWICZ EXECUTIVE DIRECTOR	40 0					х		243,486	0	38,462
(5) BRIDGET CRAWFORD LAW PROFESSOR	40 0					х		237,567	0	73,817

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As Filed Data -

DLN: 93493091009166

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

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.

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

Open to Public Inspection

Employer identification number PACE UNIVERSITY 13-5562314 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iv) Is the organization (vi) A mount of (iii) Type of (v) A mount of listed in your governing other support (see organization organization monetary support (described on lines document? (see instructions) instructions) 1-9 above or IRC section (see instructions)) Yes No

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	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	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
,	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	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
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 VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	, , ,						
16a	a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
h					and line 15 is 3	3 1/3% or mo	re check this
	b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organizations	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493091009166

Employer identification number

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE C

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

Political Campaign and Lobbying Activities

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

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) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

PAC	CE UNIVERSITY				
				13-5562314	
Par	Complete if the or	ganization is exempt under	section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect polit	ıcal campaıgn act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the or	ganization is exempt under	section 501(c)(3).	
1	-	e tax incurred by the organization u	_		
2	•	e tax incurred by organization mana			\$
3		section 4955 tax, did it file Form 47			☐ Yes ☐ No
4a	Was a correction made?	·	,		⊤ Yes
ь	If "Yes," describe in Part IV				, ,
		ganization is exempt under	section 501(c), except section 50)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to o	ther organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	70-POI line 17h ►	
			and on rorm 112	10 1 0 L, IIII C 1 7 B	\$
4 5	Did the filing organization file F	- orm 1120-POL for this year? nd employer identification number (I		537 1	·
	amount of political contribution	For each organization listed, enter the received that were promptly and political action committee (PAC) I	directly delivered	to a separate political orga	anızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
or F	Paperwork Reduction Act Notice. se	 ee the instructions for Form 990 or 99	 0-EZ. /		Form 990 or 990-F7\ 2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
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 fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	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 lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
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

	dule C (Form 990 or 990-EZ) 20					Page 3
Pai		organization is exempt under section 501(c)(3) and has (election under section 501(h)).		a)		
For ea	ach "Yes" response to lines 1a throi	s" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying			(b)	
activ	•	, responde to mines in through it polon, provide in rule in a detailed description of the 1922, mg				ount
1		ganization attempt to influence foreign, national, state or local ot to influence public opinion on a legislative matter or referendum,				
а	Volunteers?			No		
b	Paid staff or management (inclu	de compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?			No		
d	Mailings to members, legislator	s, or the public?		Νo		
e	Publications, or published or bro	padcast statements?		Νo		
f	Grants to other organizations fo	r lobbying purposes?		Νo		
g		their staffs, government officials, or a legislative body?	Yes			3,500
h		irs, conventions, speeches, lectures, or any similar means?		No		
i	Other activities?		Yes			1,800
j D-	Total Add lines 1c through 1	- the communities to be not decombed in continue 501/2/2/2		l N.a		5,300
2a b		e the organization to be not described in section 501(c)(3)? y tax incurred under section 4912		No		
c	•	y tax incurred by organization managers under section 4912				
d		d a section 4912 tax, did it file Form 4720 for this year?		I		
		organization is exempt under section 501(c)(4), section	501(c)(5). (r sec	tion
	501(c)(6).	- 3	(-	,,-,,		
				_		es No
1		more) dues received nondeductible by members?		<u> </u>	1	
2		in-house lobbying expenditures of \$2,000 or less?		L	2	
3		rry over lobbying and political expenditures from the prior year? organization is exempt under section 501(c)(4), section	504 /-	\(\(\)	3	
	501(c)(6) and if line 3, is answere	either (a) BOTH Part III-A, lines 1 and 2, are answered " ed "Yes."				
1	Dues, assessments and similar		1			
2	Section 162(e) nondeductible to expenses for which the section	bbbying and political expenditures (do not include amounts of political 527(f) tax was paid).	2-			
a	Current year		2a			
b	Carryover from last year		2b			
с 3	Total	ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	2c 3			
4	If notices were sent and the am	ount on line 2c exceeds the amount on line 3, what portion of the excess earryover to the reasonable estimate of nondeductible lobbying and	3			
	political expenditure next year?		4			
5	Taxable amount of lobbying and	political expenditures (see instructions)	5			
Pa	rt IV Supplemental In	formation				
		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground in Also, complete this part for any additional information	up list),	Part II	-A , line	s 1 and
	Return Reference	Explanation				
LOB	BYING ACTIVITIES	SCHEDULE C, PART II-B, LINE 1G LOBBYING IS NOT A SUBSTANT UNIVERSITY'S OVERALL BUDGET PACE UNIVERSITY ENGAGES II LEGISLATIVE ADVOCACY AT THE FEDERAL LEVEL AND MODEST AYORK STATE AND NEW YORK CITY LEVELS THE UNIVERSITY'S LO ADVOCATE FOR APPROPRIATIONS FOR PROGRAMS OF IMPORTA PACE UNIVERSITY RECEIVES FUNDING FOR STUDENT AID FROM AND THE FEDERAL GOVERNMENT THE AMOUNT AND CONTINUATION GUARANTEED THE MAJORITY OF THE UNIVERSITY'S EFFOR ACTIVITIES SUPPORTING STUDENT AID THE UNIVERSITY HAS CLOBBYING ACTIVITIES RELATED TO HIGHER EDUCATION ISSUES PACE'S DAY TO DAY OPERATIONS, AND OTHER ISSUES RELATED MISSION THE UNIVERSITY ALSO ENGAGES IN LEGISLATIVE ADVOMESTIC RELATIONS ISSUES (IN CONNECTION WITH PACE'S LAND ENVIRONMENTAL ISSUES (IN CONNECTION WITH PACE'S LAND ENVIRONMENTA	N INSU ACTIVI BBYIS NCE TO THE ST FION O TS ARE CONDU S, ISSU TO OU /OCAC	BSTAN TY AT TS OCC THE L ATE O FTHES RELAT CTED N ES THA IR ORG Y RELA	TIAL THE NE CASION INIVER F NEW SE FUN ED TO AINIMA T AFFI ANIZA TING T	NALLY RSITY YORK DS ARE L ECT TIONAL O ENTER)
OTHER LOBBYING ACTIVITIES		SCHEDULE C, PART II-B, LINE 1I UNIVERSITY STUDENTS PARTIC DAY ACTIVITIES ORGANIZED BY CICU (COMMISSION FOR INDEPUNIVERSITIES), DURING WHICH THE STUDENTS, ACCOMPANIED	IPATE PENDEN	IN ANN NT COL	IUAL L LEGES	O BBY A N D

LOBBYISTS, MEET WITH ELECTED OFFICIALS TO DISCUSS THE IMPORTANCE OF STATE FINANCIAL AID AND OTHER ISSUES

Part IV Supplemental Information (continued)			
Return Reference	Explanation		

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493091009166

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Open to Public Inspection

l <mark>ame of</mark> ACE UNIV	the organization		Employer identification number
ACE ONIA	LKSIII		13-5562314
art I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,	Part IV, line 6.	<u> </u>
		(a) Donor advised funds	(b) Funds and other accounts
Tota	I number at end of year		
Aggr	regate value of contributions to (during year)		
Aggr	regate value of grants from (during year)		
Aggr	egate value at end of year		
	the organization inform all donors and donor adviso s are the organization's property, subject to the or		nor advised Yes No
used	the organization inform all grantees, donors, and do donly for charitable purposes and not for the benef erring impermissible private benefit?	_	
rt II	Conservation Easements. Complete if	the organization answered "Yes" t	to Form 990, Part IV, line 7.
	pose(s) of conservation easements held by the organized procession of land for public use (e.g., recreation or protection of natural habitat	or education)	n historically important land area certified historic structure
Com	Preservation of open space uplete lines 2a through 2d if the organization held a	qualified conservation contribution in t	the form of a conservation
ease	ement on the last day of the tax year		
Tota	I number of conservation easements		Held at the End of the Year
			2a
	I acreage restricted by conservation easements		2b
	ber of conservation easements on a certified histo	. ,	2c
	ber of conservation easements included in (c) acq oric structure listed in the National Register	uired after 8/17/06, and not on a	2d
Num	ber of conservation easements modified, transferr	ed, released, extinguished, or terminate	ed by the organization during
the t	ax year 🗠		
Num	ber of states where property subject to conservati	on easement is located ►	
Does	s the organization have a written policy regarding treement of the conservation easements it holds?		
Staff ►	fand volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments during the year
A mo	ount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the year
	s each conservation easement reported on line 2(c section 170(h)(4)(B)(ii)?) above satisfy the requirements of sec	ction 170(h)(4)(B)(i)
bala	art XIII, describe how the organization reports cor nce sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia	
t III	Organizations Maintaining Collections Complete if the organization answered "You		or Other Similar Assets.
work	e organization elected, as permitted under SFAS 1 is of art, historical treasures, or other similar asse ice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or research in furtherance of public
work	e organization elected, as permitted under SFAS 1 s of art, historical treasures, or other similar asse ice, provide the following amounts relating to these	ts held for public exhibition, education,	
(i) _R	Revenue included in Form 990, Part VIII, line 1		► \$
(ii)	Assets included in Form 990, Part X		▶ -\$ 1
Ifth	e organization received or held works of art, histori wing amounts required to be reported under SFAS		or financial gain, provide the
Reve	enue included in Form 990, Part VIII, line 1		► \$
ASS	ets included in Form 990, Part X		▶ \$

Part	Organizations Maintaining Co	llections of Art,	<u>, His</u>	torica	Treas	sures, or O	<u>the</u>	<u>r Similar As</u>	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	neck any	of the f	ollowing that a	re a	sıgnıfıcant use	e of its	
а	Public exhibition		d	┌ L	an or e	xchange progr	ams			
b	Scholarly research		e	Г о	ther					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explai	n hov	w they fu	rther th	e organızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit	or receive donations	ofar	t, histor	cal trea	sures or other	rsım	ılar		
	assets to be sold to raise funds rather than	to be maintained as	part	of the or	ganızatı	on's collection	?		Yes	✓ No
Par	Part IV, line 9, or reported an ar					ion answered	d "Ye	es" to Form 9	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	dıary	for cont	rıbutıon	s or other ass	ets n	ot	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follov	wing tabl	e	_				
						_		Ar	nount	
С	Beginning balance					-	1c			
d	Additions during the year						1d			
е	Distributions during the year					-	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21,	for escr	ow or cu	stodial accour	nt IIa	bility?	☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expl	anation	nas beei	n provided in P	art >	KIII		Γ
Pa	rt V Endowment Funds. Complete	ıf the organızatıor	ans	wered						
		(a)Current year	(b)	Prior year		Two years back	_			years back
1a	Beginning of year balance	157,282,075		137,634,		121,762,155	<u> </u>	124,108,887		102,527,976
b	Contributions	1,056,014		1,661,	201	2,427,072		2,493,401		3,441,952
С	Net investment earnings, gains, and losses	3,241,047		25,363,	075	16,795,741		-1,963,147		20,903,392
d	Grants or scholarships	2,818,014		2,729,	002	1,986,567		1,296,268		1,502,690
е	Other expenditures for facilities and programs	2,105,920		4,647,	473	1,364,127		1,580,718		1,261,743
f	Administrative expenses	0			0	0		0		0
g	End of year balance	156,655,202		157,282,	075	137,634,274		121,762,155		124,108,887
2	Provide the estimated percentage of the cur	rent year end balanc	e (lır	ne 1g, co	lumn (a)) held as				
а	Board designated or quasi-endowment 🕨	6 100 %								
b	Permanent endowment ► 46 080 %									
c	Temporarily restricted endowment ► 47 The percentages in lines 2a, 2b, and 2c sho	820 % uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	ition	that are	held and	d administered	for	the		
	organization by								Yes	
	(i) unrelated organizations						٠	3a	• •	No
ь	(ii) related organizations							3a(No
4	Describe in Part XIII the intended uses of the	•					•	3	<u> </u>	
	t VI Land, Buildings, and Equipme					swered 'Yes	' to	Form 990. Pa	art IV.	line
	11a. See Form 990, Part X, line			rgamza	don an	.5110104 105			arc 1 v ,	
	Description of property				t or other vestment			(c) Accumulated depreciation	(d) E	ook value
1a	Land					12,659,	093			12,659,093
	Buildings					402,319,		105,449,57	+	296,870,351
	Leasehold improvements					31,078,		15,298,09		15,780,027
	Equipment					79,233,	-+	50,940,47	+	28,293,514
	Other					1,024,	_			1,024,354
	I. Add lines 1a through 1e (Column (d) must e			ımn (B),	line 10(c	:).)	•		3	354,627,339
		·								990) 2014

Part VII Investments—Other Securities. Comp See Form 990, Part X, line 12.	lete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(A) COMMINGLED FUNDS	33,037,456	F
(B) ALT INVESTMENTS - DIVERSIFIERS	13,387,366	F
(C) ALT INVESTMENTS - GLOBAL EQU	11,614,335	F
(D) ALT INVESTMENTS - INFLATION SE	3,872,581	F
(E) ALT INVESTMENTS - LONG/SHORT	19,319,184	F
(F) ALT INVESTMENTS - LLP, LLC	13,608,880	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Com	94,839,802 plete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(2, 2 333), 2 333	(=, = = = = = = = = = = = = = = = = = =	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 a	nswered 'Yes' to Form 990	Part IV, line 11d See Form 990, Part X, line 15
(a) Descript		(b) Book value
(1) FUNDS HELD BY BOND TRUSTEES		33,677,998
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		33,677,998
Part X Other Liabilities. Complete if the organi	zation answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal income taxes	0	
DEFERRED RENTAL REVENUE	4,720,982	
ACCRUED POSTRETIRE BEN OBLG	70,365,159	
ASSET RETIREMENT OBLIGATION	3,028,636	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	78,114,777	

Sche	dule D (Form 990) 2014		Page 4
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er Re	eturn Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	350,052,253
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		· · ·
а	Net unrealized gains (losses) on investments 2a -916,114		
ь	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-888,183
3	Subtract line 2e from line 1	3	350,940,436
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 972,718		
ь	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	146,857,735
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	497,798,171
	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	
1	Total expenses and losses per audited financial statements	1	325,596,412
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		, ,
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	2,038,403
3	Subtract line 2e from line 1	3	323,558,009
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	_	,,
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 972,718		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	149,533,839
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	473,091,848
	, , , , , , , , , , , , , , , , , , , ,		- / /

Part XIII Supplemental Information

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

Return Reference	Explanation
COLLECTIONS OF ART	SCHEDULE D, PART III, LINE 3A PACE UNIVERSITY HAS SEVERAL ART GALLERIES BETWEEN ITS PLEASANTVILLE AND NEW YORK CITY CAMPUSES THAT SERVE THE GENERAL STUDENT POPULATION WITH COURSES AND EXHIBITIONS DONATED ARTWORK INCLUDES PHOTOGRAPHS, PAINTINGS AND SCULPTURES AND IS DISPLAYED ON VARIOUS INTERIOR AND EXTERIOR CAMPUS LOCATIONS AND IN SPECIAL EXHIBITIONS DESIGNED TO PROVIDE VISUAL LITERACY AS PART OF THE UNIVERSITY LEARNING EXPERIENCE AS THE VALUE OF SUCH ART COLLECTIONS IS NOT MATERIAL TO THE UNIVERSITY AS A WHOLE, THE FOOTNOTES TO THE UNIVERSITY'S FINANCIAL STATEMENTS DO NOT INCLUDE RELATED TEXT
INTENDED USES OF ENDOWMENT FUNDS	SCHEDULE D, PART V The University's endowment consists of approximately 397 individual funds established for a variety of purposes, including support of scholarships, academic programs, academic chairs, student activities, research, institutional support and capital projects. Our endowment includes both donor restricted endowment funds and funds designated by the Board of Trustees to function as endowments (quasi endowments). The University's investments are managed to achieve the maximum prudent long term total return. The University's board of trustees has authorized a policy designed to preserve the value of these investments in real terms (after inflation) and provide a predictable flow of funds to support operations.
FEDERAL INCOME TAX	SCHEDULE D, PART X INCOME GENERATED THAT IS UNRELATED TO THE UNIVERSITY'S EXEMPT PURPOSE IS SUBJECT TO TAX THE UNIVERSITY BELIEVES IT DID NOT HAVE ANY MATERIAL TAX LIABILITY NOR ANY SIGNIFICANT UNCERTAIN TAX POSITIONS FOR THE YEAR ENDING JUNE 30, 2015 ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN REFLECTED IN THE UNIVERSITY'S FINANCIAL STATEMENTS
OTHER AMOUNTS INCLUDED IN BOOKS BUT NOT IN RETURN	SCHEDULE D, PART XI, LINE 20 DESCRIPTION AMOUNT CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS \$27,931
OTHER AMOUNTS INCLUDED IN RETURN BUT NOT IN BOOKS	SCHEDULE D, PART XI, LINE 4B DESCRIPTION AMOUNT SCHOLARSHIPS \$148,561,121 RENT EXPENSES -\$2,020,324 SPECIAL EVENTS EXPENSE -\$655,780 \$145,885,017
OTHER EXPENSES INCLUDED IN BOOKS BUT NOT IN RETURN	SCHEDULE D, PART XII, LINE 2D DESCRIPTION AMOUNT RENT EXPENSE \$2,020,324 SPECIAL EVENTS EXPENSE \$655,780 OTHER LOSSES -\$637,701 \$2,038,403
OTHER EXPENSES INCLUDED IN RETURN BUT NOT IN BOOKS	SCHEDULE D, PART XII, LINE 4B DESCRIPTION AMOUNT SCHOLARSHIPS \$148,561,121

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

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493091009166

OMB No 1545-0047

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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 PACE UNIVERSITY

Employer identification number

13-5562314

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

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

Return Reference	Explanation
NONDISCRIMINATORY POLICY - STUDENTS' SOLICITATION MATERIALS	SCHEDULE E, PART I, LINE 3 THE ENROLLMENT MARKETING TEAM AND THE UNIVERSITY'S RELATIONS MARKETING TEAM ARE FULLY KNOWLEDGEABLE OF THE REQUIREMENTS OF THE UNIVERSITY'S RACIALLY NONDISCRIMINATORY POLICY AND ENSURE THAT APPROPRIATE POLICY LANGUAGE IS INCLUDED IN ALL PROMOTIONAL MATERIALS
FINANCIAL AID FROM GOVERNMENTAL AGENCIES	SCHEDULE E, PART I, LINE 6A THE UNIVERSITY PARTICIPATES IN STUDENT FINANCIAL AID PROGRAMS THROUGH THE U S DEPARTMENT OF EDUCATION (PELL GRANT PROGRAM, PERKINS LOAN PROGRAM, DIRECT LOAN PROGRAM, SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT PROGRAM, FEDERAL WORK STUDY PROGRAM, AS WELL AS OTHER SMALLER PROGRAMS) AND U S DEPARTMENT OF HEALTH AND HUMAN SERVICES (NURSING STUDENT LOAN PROGRAM AND SCHOLARSHIPS FOR DISADVANTAGED STUDENTS)

Schedule E (Form 990 or 990-EZ) (2014)

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE F

Department of the Treasury

Internal Revenue Service

(Form 990)

As Filed Data -

DLN: 93493091009166

Statement o

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.

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

OMB No 1545-0047

2014

Open to Public Inspection

				Employer ident i	fication number
offices in the region of fices in the region of fices in the region of service, describe specific type of service(s) in region					
			ne United States. Co	omplete if the organiza	ition answered
and other assistance, the gra	ıntees' elıgıbılı	ty for the gran	ts or assistance, and	the selection criteria	┌ Yes ┌ No
		ganızatıon's pı	rocedures for monitorii	ng the use of its grants	s and other
3 Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ice is needed)	
(a) Region	offices in the	employees, agents, and independent contractors in	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	program service, describe specific type of	(f) Total expenditures for and investments in region
(1) See Add'l Data		-			
(2)					
(3)					
(4)					
(5)					
b Total from continuation sheets		22			90,207
c Totals (add lines 3a and 3b)		22			90,207

Schedule F (Form 990) 2014

Pa				izations or Entitie ved more than \$5,0		•	9		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)								
2				ed above that are ro or counsel has pro					
3	Enter total num	nber of other or	ganizations or ent	ities					

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	eeded.				
(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)	F	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; do not file with Form 990)	Γ	Yes	্ব	Νo
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)	V	Yes	Γ	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)	احا	Yes	Γ	Νo
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	V	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: do not file with Form 990)	Г	Yes	굣	No

Schedule F (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 13-5562314

Name: PACE UNIVERSITY

Schedule F (Form 990) 2014

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).

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
Europe (Including Iceland and Greenland)		1	Program Services	TRAVEL COURSES	1,000
Europe (Including Iceland and Greenland)		3	Program Services	STUDENT RECRUITMENT	28,215
South America		2	Program Services	CONFERENCES, OTHER	3,500

Form 990 Schedule F	<u> Part I - Activi</u> t	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
Europe (Including Iceland and Greenland)		1	Program Services	CONFERENCES, OTHER	2,000
Russia and the Newly Independent States		2	Program Services	STUDENT RECRUITMENT	2,224
East Asia and the Pacific		4	Program Services	STUDENT RECRUITMENT	4,823

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
South America		3	Program Services	STUDENT RECRUITMENT	34,580
North America		6	Program Services	STUDENT RECEUITMENT	13,865

DLN: 93493091009166

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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.

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

Open to Public Inspection

lame	of the	organizatioi
ACE	UNIV	ERSITY

^	E UNIVERSITY					I	chi leaction mamber
АC	E UNIVERSITY					13-5562314	
ar	filers are not requi			anızatıo	n answered "Yes" to	Form 990, Part IV,	line 17. Form 990-EZ
L	Indicate whether the organ	uzation raised funds t	:hrough ar	ny of the f	ollowing activities Che	ck all that apply	
а	Mail solicitations		_	e	Solicitation of non-	government grants	
b	✓ Internet and email soli	cıtatıons		f	Solicitation of gove	ernment grants	
c	Phone solicitations			g	Special fundraising	events	
d	✓ In-person solicitations	5					
2a	Did the organization have a or key employees listed in						√ Yes √ N
b	If "Yes," list the ten highes to be compensated at lease			undraisei	rs) pursuant to agreeme	nts under which the fur	ndraiser is
$\overline{}$	i) Name and address of	(ii) Activity	(iii)	Did	(iv) Gross receipts	(v) A mount paid to	(vi) A mount paid to
•	ındıvıdual	(,	fundrais	serhave	from activity	(or retained by)	(or retained by)
	or entity (fundraiser)		1	ody or rol of		fundraiser listed in col (i)	organization
			1	utions?		cor (1)	
		L	Yes	No			
1	RUFFALO CODY LLC CONSULTING MARKE 1025 KIRKWOOD PKWY SW	Tele- Fundraising		No	488,558	335,109	139,061
	CEDAR RAPIDS, IA 52404						
2							
3							
4							
5							
6							
7							
8							
9							
10							
			1			335,109	139,061

Sche	dule	G (Form 990 or 990-EZ) 2014				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
			(a) Event #1 Sopa Dinner (event type)	(b) Event #2 PWJC Dinner (event type)	(c) O ther events 7 (total number)	(d) Total events (add col (a) through col (c))
enses Revenue	1	Gross receipts	467,607	7 212,484	543,979	1,224,070
₩	2	Less Contributions	367,510	165,894	400,181	933,584
ž	3	Gross income (line 1				
		minus line 2)	100,097	46,590	143,798	
	4	Cash prizes	39,103	3		39,103
မှာ က	5	Noncash prizes	403	275	1,524	2,202
Direct Expenses	6	Rent/facility costs		1,400	48,879	50,279
쯊	7	Food and beverages .	146,023	41,214	152,674	339,910
ਹ 9	8	Entertainment	15,800		1,639	17,439
ā	9	Other direct expenses .	119,166	13,844	73,836	206,847
	10	Direct expense summary Add lir	nes 4 through 9 in column) (d)		(655,780)
	11	Net income summary Subtract li				-365,294
Par	t II	I Gaming. Complete if the o	rganization answered	"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u> </u>	1	Gross revenue				
မွ	2	Cash prizes				
sesuedy	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	│ Yes	│ Yes %		
	7	Direct expense summary Add line	s 2 through 5 in column ((d)	•	
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)	🛌	
9 a b	Is	ter the state(s) in which the organiz the organization licensed to conduc No," explain	t gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspe	nded or terminated during		

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3				
11	Does the organization conduct gaming	activities with nonm	nembers?	┌ _{Yes}	Γ _{No}				
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity						
	formed to administer charitable gaming	,,		┌ Yes	Γ _{No}				
13	Indicate the percentage of gaming acti	vities conducted in							
а	The organization's facility				%				
b	An outside facility				%				
14	Enter the name and address of the pers	on who prepares the	e organization's gaming/special events books and records						
	Name 🕨								
	Address ►								
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming						
134				┌ _{Yes}	┌ No				
b	If "Yes," enter the amount of gaming reamount of gaming revenue retained by	•	the 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								
	Director/officer	_ Employee	☐ Independent contractor						
17	Mandatory distributions								
а	Is the organization required under stat	e law to make charıt	table distributions from the gaming proceeds to						
	retain the state gaming license? $$. $$.			Γ_{Yes}	┌ No				
b	Enter the amount of distributions requi	red under state law o	distributed to other exempt organizations or spent						
	ın the organization's own exempt activ								
Pa			xplanations required by Part I, line 2b, columns (iii) 7b, as applicable. Also provide any additional inform						
	Return Reference		Explanation						
		<u> </u>							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493091009166 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number PACE UNIVERSITY 13-5562314 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. 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) SCHOLARSHIPS	8601		148,561,121	воок	TUITION REDU

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
FUNDS IN THE US	THE UNIVERSITY AWARDS FEDERAL AND STATE FINANCIAL AID FUNDS EACH YEAR BASED UPON A STUDENT'S FINANCIAL NEED ADDITIONALLY, THE UNIVERSITY PROVIDES INSTITUTIONAL AID VIA UNIVERSITY GRANTS ON THE BASIS OF ACADEMIC ACHIEVEMENTS ACHIEVEMENTS, FINANCIAL NEED, AND OTHER STANDARDS THE OFFICE OF FINANCIAL AID VERIFIES THE ACADEMIC ACHIEVEMENTS AND THE PERSONAL INCOME DATA PROVIDED FOR ON THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) OF EACH STUDENT TO DETERMINE THE AMOUNT OF AID AWARDED ON AN AS NEEDED BASIS THE UNIVERSITY ALSO OFFERS SCHOLARSHIPS FUNDED THROUGH SPECIAL ENDOWMENTS AND DONATIONS, WHICH ARE AWARDED BASED ON SIMILAR STANDARDS AS WELL AS DONOR'S CRITERIA. THE OFFICES OF FINANCIAL AID AND FINANCE CONTINUOUSLY MONITOR STUDENT ELIGIBILITY FOR THESE AWARDS.						

DLN: 93493091009166

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

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

Compensation Information

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

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

Open to Public Inspection

Name of the organization PACE UNIVERSITY

Employer identification number

			13-5562314			
Pa	rt I Questions Regarding Compensation	on				
					Yes	No
.a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	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 creimbursement or provision of all of the expenses of			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe		- · · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the filing orgonization's CEO/Executive Director Check all f	that apply	y Do not check any boxes for methods			
	used by a related organization to establish compen	isation of	the CEO/Executive Director, but explain in Part III			
	✓ Compensation committee	굣	Written employment contract			
	Independent compensation consultant	고	Compensation survey or study			
	Form 990 of other organizations	V	Approval by the board or compensation committee			
•	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymen	t?	4a		No
b	Participate in, or receive payment from, a supplement	ental non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiz					
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
•	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
•	For persons listed in Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes,"			7	Yes	
3	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in Part III	ın Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			NI -
				8		No
,	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	ne rebutta	able presumption procedure described in Regulations	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)(1)-(111) 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	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

Part III 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
and Schedule J	COMPENSATION TO TRUSTEE JOSEPH F RYAN IS BASED ON HIS RESPECTIVE FACULTY POSITION HELD AT PACE UNIVERSITY DURING CALENDAR 2014 AND IS NOT RELATED TO HIS POSITION AS TRUSTEE THE AVERAGE HOURS PER WEEK DISCLOSED PERTAINS TO HIS POSITION AS TRUSTEE
Part I, Line 1A and 1B	Short Term housing allowances are occasionally provided per initial hiring agreements and are treated as taxable compensation. Chauffeur services are provided per employment contracts for University business, any personal travel expenses are treated as taxable compensation to the respective officer. Social club dues are paid in accordance with individual employment contracts or business considerations.
SCHEDULE J, PART I, LINE 7	CERTAIN OFFICERS EARNED NON-FIXED PAYMENTS EITHER BASD ON SUCCESSFUL COMPLETION OF INDIVIDUAL/DIVISIONAL/UNIVERSITY WIDE STRATEGIC AND OPERATIONAL GOALS OR BASED ON ADDITIONAL RESPONSIBILITIES OR ROLES IN ADDITION, ONE OFFICER RECEIVES A MILEAGE STIPEND AS PART OF HIS EMPLOYMENT CONTRACT ALL NON-FIXED PAYMENTS PAID BY PACE UNIVERSITY IN CALENDAR YEAR 2014 HAVE BEEN INCLUDED IN PART VII AND SCHEDULE J COMPENSATION REPORTING

Schedule J (Form 990) 2014

Software ID: Software Version:

EIN: 13-5562314

Name: PACE UNIVERSITY

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

Form 990, Schedule J, P	'art II	i - Officers, Direc	tors, Trustees, Ke	y Employees, and	1 Highest Compens	ated Employees		
(A) Name and Title		(i) Base Compensation		GC compensation (iii) O ther reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
JOSEPH F RYAN, TRUSTEE, FT FACULTY MEMBER	(I) (II)	205,138 0	0	768 0	45,669 0	16,010 0	267,585	0
ROBERT C ALMON, EVP AND CFO	(ı) (ıı)	361,694 0	0	396 0	23,400	15,160 0	400,650	0
UDAY SUKHATME, PROVOST & EVP ACADEMIC AFFAIRS	(ı) (ıı)	394,142 0	0	768 0	23,400 0	14,968 0	3 433,278 0 0	0
STEPHEN BRODSKY, CORP SECRETARY & LEGAL COUNSEL	(I) (II)	213,423 0	0	0	26,664 0	25,197 0	265,284	0
STEPHEN J FRIEDMAN, PRESIDENT	(I) (II)	554,904 0	0	11,896 0	23,400	21,284 0	736,484	0
ELIZABETH GARTI, ASSOCIATE VP FOR HR	(I) (II)	158,580 0	ő	5,027 0	14,310 0	4,105 0	182,022	0
ROBERT GM KEATING, VP, STRATEGIC INITIATIVES	(I) (II)	230,908	0	4,236 0	20,886 0	5,176 0	261,206	0
WILLIAM MCGRATH, SVP AND CAO	(I) (II)	303,712 0	0	264 0	23,400	6,422 0	333,798	0
JENNIFER BERNSTEIN, VICE PRESIDENT FOR DEVELOPMENT	(I) (II)	208,134 0	0 0	60 0	20,052	37,439 0	265,685	0
MATTEO RENNA, ASSOCIATE VP FOR HR	(I) (II)	166,707 0	0 0	0	15,969 0	33,355 0	216,031	0
ROBINA C SCHEPP, VICE PRESIDENT FOR ENROLLMENT	(I) (II)	256,213 0	0 0	264 0	22,950 0	3,113 0	282,540	0
THOMAS M BRADY, TREASURER	(1) (11)	171,339 0	5,000	60 0	15,314 0	2,334 0	194,047	0
FREDERICA N WALD, VP AND CHIEF MARKETING OFFICER	(I) (II)	209,029	0	264 0	18,990 0	13,174 0	241,457	0
CHRISTOPHER V ELARDE, INTERIM CIO	(1) (11)	154,731 0	0	72 0	14,671 0	24,118 0	193,592	0
NEALS BRAUN, DEAN, LUBIN SCHOOL OF BUSINESS	(I) (II)	359,215 0	0	396 0	0	39,199 0	398,810	0
HARRIET R FELDMAN, DEAN, COLLEGE OF HEALTH PROFS	(I) (II)	273,389 0	0	768 0	31,200 0	17,376 0		0
NIRA HERRMANN, DEAN, DYSON COLLEGE	(1) (11)	317,693 0	0	768 0	23,400	4,845 0	346,706	0
ANDREA M SPENCER, DEAN, SCHOOL OF EDUCATION	(1) (11)	190,776 0	0 0	686 0	17,568 0	15,889 0	224,919	0
MICHELLE S SIMON, DEAN, SCHOOL OF LAW	(ı) (ıı)	414,667 0	0	264 0	31,200 0	4,943 0	3 451,074 0 0	0
AMAR GUPTA, DEAN, SEIDENBERG SCHOOL	(I) (II)	354,014 0	0	8,625 0	23,400	33,859 0		0

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

(A) Name and Title		(i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	centive reportable		(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
JOHN NOLON, PROFESSOR, LAW SCHOOL	(I) (II)		0	1,236 0	53,086 0	15,164 0	341,618 0	0 0
DAVID S YASSKY, Dean, Law School	(I) (II)	253,435 0	0 0	108 0	0	25,846 0	279,389 0	0
JONATHAN HILL, INTERIM DEAN, SEIDENBERG	(I) (II)	1 ' -1	0	7 2 0	12,384 0	35,871 0	199,224 0	0
DANIEL BAUGHER, PROFESSOR	(I) (II)	286,594 0	0 0	0	56,035 0	17,036 0	359,665 0	0
RUDOLPH JACOB, PROFESSOR	(ı) (ıı)	276,126 0	0 0	768 0	50,163 0	14,424 0	341,481 0	0
NANCY URBANOWICZ, EXECUTIVE DIRECTOR	(I)	233,222	10,000	264 0	12,000 0	26,462 0	281,948 0	0
BRIDGET CRAWFORD, LAW PROFESSOR	(I) (II)	· .	0 0	30,057 0		29,191 0	311,384 0	0

DLN: 93493091009166

Open to Public

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.

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

Nam	ne of the organization									Emp	oloyer id	entifica	tion num	ber	
PAC	CE UNIVERSITY									13-	55623	14			l
Р	art I Bond Issues	,													
<u>-</u> -	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f)	(f) Description of purpose		(g) Defeased		beha	(h) On behalf of ıssuer		Pool ncing
			<u></u>							Yes	No	Yes	No	Yes	No
A	Dormitory Authority of the State of New York	14-6000293	649907JB9	03-07-2013	104,77		Refund outsta	d a portion of andin	of the		Х		Х		Х
В	Westchester County Local Development	45-5135578	95737TBD7	04-03-2014	99,99			NCE UNIVE STRUCTION			Х		Х		Х
Pā	art III Proceeds	, <u> </u>		,											
1					A		\perp	E	3		С	\perp	D		
1_	A mount of bonds retired					2,960,0	000		0			\longrightarrow			
							0		0			\longrightarrow			
3						04,818,1	,124 100,332,751					\longrightarrow			
4	Gross proceeds in reserve fur						0		0			\longrightarrow			
5	Capitalized interest from proc				<u> </u>		0		5,129,318			\longrightarrow			
6	Proceeds in refunding escrow				<u> </u>		0		0						
7	Issuance costs from proceed				<u> </u>	957,3	351		1,947,304						
8	Credit enhancement from pro						0 0					\longrightarrow			
9	Working capital expenditures	<u> </u>				0 0					\longrightarrow				
10	Capital expenditures from pro	oceeds				33,108,078 60,620,908									
11	O ther spent proceeds					70,752,6	695		0						
12	O ther unspent proceeds				<u> </u>		0		32,635,221						
13	Year of substantial completio	vn			20	17	\perp	20	17		ē				
I					Yes	No		Yes	No	Yes	N	•	Yes	\perp	No
14	Were the bonds issued as par	rt of a current refund	ing issue?		Х		\perp		Х					\perp	
15	Were the bonds issued as par	rt of an advance refu	nding issue?		<u> </u>	×			Х						
16	Has the final allocation of pro-	ceeds been made?				Х			Х						
17	7 Does the organization maintain adequate books and records to support the final allocation of proceeds?							Х							
Pa	Private Business U	Use						•			1				
i					-	1		В	+		C			D	
1	147 Eli			10 miles bassand	Yes	No	\dashv	Yes	No	Yes	N	<u>•</u>	Yes	+	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned					'	l x			X						

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

property financed by tax-exempt bonds?

financed property?

Χ

Part Private Business Use (Continued) D В C Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Χ of bond-financed property? 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 Х Χ property? Are there any research agreements that may result in private business use of bondc Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other Χ Х outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 0 % 0 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Х Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В C No Yes No Yes No Yes No Yes Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Exception to rebate? b No rebate due? c If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Has the organization or the governmental issuer entered 4a Х Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

Part IV	Arbitrage	(Continued)
---------	-----------	-------------

		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	Name of provider	0	0						
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A	Α		В		C		
	Yes	No	Yes	No	Yes	No	Yes	No
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?	X		X					

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
BOND PROCEEDS AND CURRENT VALUES, SCHEDULE K, PART II, LINE 3	Total Proceeds of Issue Column A For the Dormitory Authority Of the State Of New York Bond 2013A the amount on Line 3 represents original issuance costs of \$104,818,124 (including \$95,840,000 of principal and \$8,935,845 of premium) and accumulated earnings on the related construction fund through June 30, 2015 of \$42,279 The outstanding Bond balance at June 30, 2015 was \$98,200,978, which includes \$89,980,000 of principal and unamortized premium of \$8,220,978 Column B for the Westchester County Local Development Corporation Bond 2014A and B the amount on Line 3 represents original issuance cost of \$100,590,000 less the original discount of \$593,190 plus the accumulated earnings of \$335,941 The outstanding Bond balance at June 30, 2015 was \$100,023,290 which includes \$100,590,000 of principal less unamortized discount of \$566,710

Return Reference	Explanation
ISSUANCE COSTS FROM PROCEEDS, SCHEDULE K, PART II, LINE 7	The amount in Line 7 IN COLUMNS A AND B represent costs of issuance subject to the two percent limit of code section 147(G)

Return Reference	Explanation
YEAR OF SUBSTANTIAL COMPLETION, SCHEDULE K, PART II, LINE 13	COLUMN A - The Series 2013A Dormitory Authority Of the State Of New York Bonds were issued as multipurpose bonds in accordance with the provisions of section 1 148(H) of the Treasury Regulations, partly for the purpose of refunding the 2005A bonds, originally issued prior to the effective date of Part III (refunding portion), as well as for the purpose of providing funding for new capital projects (New Money) Part III is therefore only completed for the New Money The completion date in Part II, Line 13, and the "No" answer to Line 16, refers to the New Money portion Column B - The Series 2014A and B Westchester County Local Development Corporation Bonds were issued to finance the University's design, renovation, construction, equipping, and/or furnishing certain facilities including technology improvements and fund the cost of the Bond's issuance and interest cost during the construction period. Therefore, Part III has been completed for the Bond's purpose of funding for new capital projects. The completion date in Part II, Line 13, and the "No" answer to Line 16 refers to the expected completion date of the projects to be 2017.

Return Reference	Explanation
SCHEDULE K, PART III, LINE 4	The percentage of finance property used in a private business use by the entities other than a Section 501(C)(3) Organization or a State or Local Government and the percentage of financed property used in a private business use as a result of unrelated trade or business activity carries on by the University, another 501(C)(3) Organization or State or Local Government, is zero

DLN: 93493091009166

Employer identification number

OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

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

ACE UNIVERSITY						-	13-55	62314			
				501(c)(3), section 501 on Form 990, Part IV, lin		(c)(29) orga	nızatıons		40b	
	ne of disqualified			nip between disqualified						(d) Cor	rected
L (u) ituii	ic or albquaimea	person (2)		and organization	(6) 503	(c) Description of transaction		iption of transaction		Yes	No
4958 .				anagers or disqualified p mbursed by the organiza		he yea · ·	r unde	rsectior ▶ \$ ▶ \$	n		
art III Loans to and Complete if the eported an analy Name of	nd/or From 1	nterested F swered "Yes" 90, Part X, line	Persons on Form 9 5, 6, or 2	990-EZ, Part V, line 38a 2 1 to (e) O rigina	or Form 990,	Part IV (g) defa	In	Т.		anızatıor (i)Wr	tten
art III .oans to a Complete if th	nd/or From 1 ne organization al mount on Form 9 (b) Relationsh	nterested F swered "Yes" 90, Part X, line	Persons on Form 9 5, 6, or 2	p90-EZ, Part V, line 38a 2 n to (e)Origina the principal	or Form 990,	(g)	In	26, or if	ved rd or	(i)Wr	tten
oans to a complete if the ported an arm and name of interested	nd/or From 1 ne organization al mount on Form 9 (b) Relationsh	nterested F swered "Yes" 90, Part X, line p (c) n Purpose of	Persons on Form 9 5, 6, or 2 (d) Loar or from	p90-EZ, Part V, line 38a 2 n to (e)Origina the principal	or Form 990,	(g)	In	26, or if (h) Approby boai	ved rd or	(i)Wr	tten
art II Loans to and Complete if the eported an analana of interested	nd/or From 1 ne organization al mount on Form 9 (b) Relationsh	nterested F swered "Yes" 90, Part X, line p (c) n Purpose of	Persons on Form 9 5, 6, or 2 (d) Loar or from 9 organizat	principal amount	or Form 990,	(g) defa	In ult?	26, or if (h) Approby boaicommit	ved rd or	(i)Wr	tten nent?
cart II coans to a complete if the ported an art and an art and art are sted person	nd/or From 1 ne organization all mount on Form 9 (b) Relationsh with organization	nterested F swered "Yes" 90, Part X, line p (c) Purpose of loan	Persons on Form 9 5, 6, or 2 (d) Loar or from 6 organizat	(e)Origina principal amount	or Form 990,	(g) defa	In ult?	26, or if (h) Approby boaicommit	ved rd or	(i)Wr	tten nent?
art III Loans to all Complete if the eported an air a) Name of interested person	nd/or From Index or ganization and mount on Form 9 (b) Relationsh with organizations or Assis	nterested F sswered "Yes" 90, Part X, line p (c) Purpose of loan	Persons on Form 9 5, 6, or 2 (d) Loar or from 9 organizat To	principal amount	or Form 990, I (f)Balance due	(g) defa Yes	In ult?	26, or if (h) Approby boaicommit	ved rd or	(i)Wr	tten nent?

Part IV Business Transactions Involving Interested Persons.							
Complete if the organization	<u>n answered "Yes" on f</u>	-orm 990, Part IV, lin	<u>e 28a, 28b, or 28c.</u>				
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	: zation's		
				Yes	No		
See Additional Data Table							

Part V Supplemental Information				
Provide additional information for responses to questions on Schedule L (see instructions)				
Return Reference	Explanation			
PART IV, COLUMN A	THE NAMES OF SUBSTANTIAL CONTRIBUTORS HAVE NOT BEEN PRESENTED ON SCHEDULE L SUCH INFORMATION IS PRESENTED ELSEWHERE WITHIN FORM 990 AND/OR IS NOT CONSIDERED PUBLIC INFORMATION SIMILAR TO INFORMATION INCLUDED ON SCHEDULE B			

Schedule L (Form 990 or 990-EZ) 2014

Additional Data

Software ID: Software Version:

EIN: 13-5562314

Name: PACE UNIVERSITY

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the	petween interested transaction person and the		(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) MEDHA U SUKHATME ENROLLMENT MGT	SPOUSE OF KEY EMPLOYEE	57,640	COMPENSATION, FULL TIME STAFF		No
(2) SUBSTANTIAL CONTRIBUTOR	VENDOR	5,768,780	SECURITY SERVICES		No
(3) SUBSTANTIAL CONTRIBUTOR	VENDOR	53,010,154	CONSTRUCTION SERVICES		No
(4) SUBSTANTIAL CONTRIBUTOR	VENDOR	5,270,028	CONSTRUCTION SERVICES		No
(5) SUBSTANTIAL CONTRIBUTOR	VENDOR	214,500	LEGAL SERVICES		No
(6) SUBSTANTIAL CONTRIBUTOR	VENDOR	967,947	LEGAL SERVICES		No
(7) SUBSTANTIAL CONTRIBUTOR	VENDOR	305,000	AUDIT SERVICES		No
(8) SUBSTANTIAL CONTRIBUTOR	VENDOR	309,862	AUDIT AND TAX SERVICES		No

DLN: 93493091009166

OMB No 1545-0047

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SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Name of the organization PACE UNIVERSITY

Employer identification number

				1	3-5562314			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contri		_	ınts
1	Art—Works of art	X	1		1 VALUED \$1 PER	DON	O R	
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property				<u> </u>	_		
	Securities—Publicly traded .	X	28	727,38	1 QUOTED PRICE	S		
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous				-			
	Qualified conservation				1			
	contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
/ A R	Other► (IOUS ITEMS FOR AUCTION AT DRAISING EVENTS)	X	215	32,31	2 RETAIL VALUE			
	Other ► (X	1		1 RETAIL VALUE			
	NITURE)							
	Other►(RDS)	X	1	3,00	O RETAIL VALUE			
28	O ther ▶ ()							
29	Number of Forms 8283 received by the for which the organization completed I				29			1
	for which the organization completed i	-01111 6263,	Part IV, Donee Acknowled	ugement			Yes	No
30a	During the year, did the organization	receive by	contribution any property r	renorted in Part I lines 1	through 28 that		165	NO
Jua	it must hold for at least three years f							
	for exempt purposes for the entire ho		· · · · · · · · · · · · · · · · · · ·		id to be used	20-		.
						30a		No
	If "Yes," describe the arrangement in Does the organization have a gift acc		licy that requires the revie	w of any non-standard c	ontributions?	31	Yes	
3∠a	Does the organization hire or use this contributions?	•	related organizations to s	· · · · · · · · ·	nicasn · ·	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report an a describe in Part II	imount in co	lumn (c) for a type of prop	erty for which column (a) is checked,			

	nether the organization is reporting in Part I, column (b), the number of contributions, the served, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	PACE UNIVERSITY USES A COMBINATION OF REPORTING THE NUMBER OF CONTRIBUTIONS

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493091009166

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Name of the organization
PACE UNIVERSITY

Employer identification number

13-5562314

Return Reference	Explanation
Form 990 Review Process, CORE FORM, PART VI, SECTION B, LINE 11 A	The Form 990 is prepared by the University's Vice President and Controller as assisted by various other staff members in the Finance and Planning Department. The prepared Form is reviewed by the University's President, Chief Financial Officer and In-House Legal Counsel as well as PriceWaterhouseCoopers, LLP the University's outside tax advisors. A draft Form 990 is then presented to the Audit Committee of the Board of Trustees for approval, followed by distribution of the final copy of Form 990 to all members of the Board of Trustees before it is filed.

Return Reference	Explanation
COMPLIANCE WITH CONFLICT OF INTEREST POLICY	CORE FORM, PART VI, SECTION B, LINE 12C Conflict of Interest Policy Disclosure Forms (the "Disclosure Forms") are annually submitted to and retrieved from the University's Trustees, Officers, Deans and Key Employees. The Disclosure Forms for Officers, Deans and Key Employees are reviewed by the Associate Vice President of Human Resources and University In-House Legal Counsel. Potential officer, dean and key employee conflicts are vetted with supervisors in consultation with the Associate Vice President of Human Resources and University's In-House Legal Counsel. The Disclosure Forms for the Trustees are reviewed by University In-House Legal Counsel, who prepares a spreadsheet listing potential trustee conflicts for review by the Board's Committee of Trustees. This listing is used as (1) a guide to ensure that conflicted Trustees are recused from discussions and voting when appropriate and (2) input to assess disclosures in the University's Form 990.

Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION FOR OFFICERS AND KEY EMPLOYEES	CORE FORM, PART VI, SECTION B, LINE 15 Each year, the Chair of the University's Board of Trustees requests the Human Resources Department to collect comparative presidential compensation data from the College and University Professional Association for Human Resources (CUPA-HR), as well as published Form 990 data from such sources as the Chronicle of Higher Education, as a basis in setting the annual compensation of the President of the University for the upcoming year With respect to other University officers, deans and key employees, each year prior comparability data from peer institutions is collected and summarized for review by the President (nine comparable doctoral class institutions of similar size, scope and organizational complexity, locally and nationally, used as comparators for several academic and financial scopes across the university). This data obtained via survey is used by the President to present compensation adjustments to the University's independent Compensation Committee of the Board of Trustees. The competitive data obtained is also used when determining compensation Offers for new hires at the executive level. Once this data is collected and presented for approval by the Compensation Committee and the Board of Trustees, documentation of the surrounding discussions and decisions is prepared by the Special Assistant to the Board of Trustees and filed with the University Archivist, along with the related minutes of the meetings for historical record. The University further has a robust performance evaluation process in place, the results of which are considered during the compensation determination process. The University's President does not take part in Board voting relating to matters involving his compensation, benefits and other terms and conditions of his employment, or participate in or attend Board meetings and discussions relating thereto, except at times when responding to questions from the Compensation.

Return Reference	Explanation
FINANCIAL ACCOUNTS IN A FOREIGN COUNTRY	CORE FORM, PART V, LINE 4A AND 4B The University's financial holdings in any foreign country are limited to equity interests in commingled investment vehicles. Accordingly, the University is not required to file FINCEN REPORT 114 (FORMERLY Form TD F 90-22 1) Report of Foreign Bank and Financial Accounts

Return Reference	Explanation
	CORE FORM, PART VI, SECTION C, LINE 19 The University's audited financial statements and the Conflict of Interest Policy are posted on its website. Form 990 and 990-T are available upon request. The University's governing documents are not available to the public.

Return Reference	Explanation
SERVICE ACTIVITIES, CORE FORM, PART III, LINE 4	A description of the University's other significant program service activities are as follows. ACADEMIC SUPPORT- To provide facilities and personnel to support INSTRUCTIONAL staff in educational efforts such as libraries, academic computer centers, audio visual aids, etc. STUDENT SERVICES- To meet non-instructional needs of students such as admissions, registration, counseling, career planning, and social and cultural activities. RESEARCH- To support activities specifically organized to produce research, whether commissioned by an agency external to the University or separately budgeted by an organizational unit within the University.

Return Reference	Explanation
OTHER CHANGES IN NET ASSETS, PART XI, LINE 9	The change in value of Split-Interest Agreements \$27,931

Return Reference	Explanation
UNRESTRICTED NET ASSETS AND TEMPORARILY RESTRICTED ASSETS	FORM 990 PART X ON JULY 1, 2014, THE UNIVERSITY ELECTED TO CHANGE ITS METHOD OF ACCOUNTING FOR THE EXPIRATION OF RESTRICTIONS ON GIFTS OF LONG-LIVED ASSETS AND FOR THEIR PURCHASE OR CONSTRUCTION, TO EXPIRE (TO BE RELEASED) AS ASSETS ARE PLACE IN SERVICE. PRIOR TO JULY 1, 2014, THE UNIVERSITY'S METHOD WAS TO ACCOUNT FOR THE EXPIRATION OF THE RESTRICTION OVER THE USEFUL LIFE OF THE DONATED, PURCHASED, OR CONSTRUCTED ASSET. THE IMPACT OF THE CHANGE IN NET ASSETS AT JUNE 30, 2014 IS AS FOLLOWS. UNRESTRICTED NET ASSETS TEMP RESTRICTED NET ASSETS AS ORIGINATED \$ 9,942,479 \$95,910,910 ACCUM EFFECT ADJ \$ 6,882,420 -\$ 6,882,420 AS ADJUSTED \$16,824,899 \$89,028,490 PER AUDITED FINANCIAL STATEMENTS.

DLN: 93493091009166

2014

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

Name of the organization PACE UNIVERSITY

Employer identification number

13-5562314

Part I	Identification of Disregarded I	Entities Complete	if the organization answered	"Yes" on Form 990,	Part IV, line 33.
--------	---------------------------------	-------------------	------------------------------	--------------------	-------------------

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	512(b) ntrolled
						Yes	No
(1) PACE ENVIRONMENTAL LITIGATION CLINIC 78 NORTH BROADWAY WHITE PLAINS, NY 10603 13-3709483	EDUCATION	NY	501(C)(3)	11(A)	NA	Yes	
(2) JOHN JAY LEGAL SERVICES INC 80 NORTH BROADWAY	EDUCATION	NY	501(C)(3)	11(A)	NA	Yes	
WHITE PLAINS, NY 10603 13-3403308							

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line	34 د
	because it had one or more related organizations treated as a partnership during the tax year.	

		•	•	•									
(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Dispropitionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership	
							Yes	No		Yes	No		
(1) Pace University Fund LP 125 High Street Boston, MA 02110 46-3422188	Investments		Pace University	EXCLUDED	3,527,895	137,035,884		No	-33,685		No	99 999 %	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i Section (b)(contro entr	n 512 13) olled
								Yes	No
(1) Charitable Remainder Unitrust (1)	Trust Distrib	NY	PACE UNIVERSITY	Т					No
(2) Unitrust (1)	Trust Distrib	NY	PACE UNIVERSITY	Т					No
(3) Pooled Life Income Fund (1)	Trust Distrib	NY	PACE UNIVERSITY	Т					No

Schedule R (Form 990) 2014		Рa	ge 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 3	·6.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1 e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
	4.1		

- I Performance of services or membership or fundraising solicitations for related organization(s)
- **m** Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- **p** Reimbursement paid to related organization(s) for expenses
- **q** Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction threshold.	lds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved				
(1) PACE UNIVERSITY FUND LP	1B	21,255,762	воок				
(2) PACE UNIVERSITY FUND LP	1C	2,976,000	воок				
(3) PACE ENVIRONMENTAL LITIGATION CLINIC	1N		NONE				
(4) JOHN JAY LEGAL SERVICES INC	1N		NONE				

1m

10

1n Yes

No

No

No

No

No No Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	section total	Share of	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No	
									\Box	1			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation						
TAXABLE PARTNERSHIP	PACE UNIVERSITY FUND, LP (PACE FUND) IS A LIMITED PARTNERSHIP, WHICH COMMENCED OPERATIONS ON DECEMBER 4, 2013, IN WHICH THE UNIVERSITY IS THE SOLE LIMITED PARTNER AND CAMBRIDGE ASSOCIATES RESOURCES, LLC IS THE GENERAL PARTNER THE PARTNERSHIP ACTS AS AN INVESTMENT VEHICLE FOR A SIGNIFICANT PORTION OF THE UNIVERSITY'S ENDOWMENT THE PACE FUND IS RECORDED AT NET ASSET VALUE AT JUNE 30.2015						
	PACE UNIVERSITY FUND, LP 46-3422188 125 HIGH STREET BOSTON, MA 02110						

Schedule R (Form 990) 2014