

Form **990-PF**


Department of the Treasury
Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015
Open to Public Inspection

For calendar year 2015, or tax year beginning 07-01-2015 , and ending 06-30-2016

Name of foundation ROCKEFELLER ARCHIVE CENTER		A Employer identification number 20-8030810
Number and street (or P O box number if mail is not delivered to street address) 15 DAYTON AVENUE	Room/suite	B Telephone number (see instructions) (914) 366-6308
City or town, state or province, country, and ZIP or foreign postal code SLEEPY HOLLOW, NY 10591		C If exemption application is pending, check here ☐
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 126,144,654	J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,721,696			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	4,061	4,061	4,061	
	4 Dividends and interest from securities	6,249,651	6,249,651	6,249,651	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV , line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	 24,822	0	0	
	12 Total. Add lines 1 through 11	8,000,230	6,253,712	6,253,712	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	417,100	0	0	377,398
	14 Other employee salaries and wages	2,436,488	0	0	2,366,727
	15 Pension plans, employee benefits	1,100,640	0	0	1,048,112
	16a Legal fees (attach schedule).	 7,194	0	0	0
	b Accounting fees (attach schedule).	 46,400	0	0	0
	c Other professional fees (attach schedule)	 641,957	523,526	523,526	22,126
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	 117,126	0	113,000	0
	19 Depreciation (attach schedule) and depletion	 656,224	0	0	
	20 Occupancy	1,030,203	0	0	826,230
	21 Travel, conferences, and meetings.	208,620	0	0	174,743
	22 Printing and publications	3,250	0	0	3,024
	23 Other expenses (attach schedule).	 356,200	0	0	539,068
	24 Total operating and administrative expenses. Add lines 13 through 23	7,021,402	523,526	636,526	5,357,428
	25 Contributions, gifts, grants paid	128,781			122,292
	26 Total expenses and disbursements. Add lines 24 and 25	7,150,183	523,526	636,526	5,479,720
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	850,047			
	b Net investment income (if negative, enter -0-)		5,730,186		
	c Adjusted net income (if negative, enter -0-)			5,617,186	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash—non-interest-bearing		220,980	297,638	297,638
	2	Savings and temporary cash investments		833,301	1,191,937	1,191,937
	3	Accounts receivable ▶ <u>68</u>				
		Less allowance for doubtful accounts ▶ _____		1,250	68	68
	4	Pledges receivable ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	5	Grants receivable		8,500	17,636	17,636
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).				
	7	Other notes and loans receivable (attach schedule) ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		28,935	11,350	11,350
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶ _____				
	Less accumulated depreciation (attach schedule) ▶ _____					
12	Investments—mortgage loans					
13	Investments—other (attach schedule)		110,620,786	103,987,647	103,987,647	
14	Land, buildings, and equipment basis ▶ <u>21,848,992</u>					
	Less accumulated depreciation (attach schedule) ▶ <u>3,857,594</u>		18,376,604	17,991,398	17,991,398	
15	Other assets (describe ▶ _____)		2,646,980	2,646,980	2,646,980	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)			132,737,336	126,144,654	126,144,654
Liabilities	17	Accounts payable and accrued expenses		639,392	537,362	
	18	Grants payable				
	19	Deferred revenue		2,594,396	2,485,783	
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶ _____)		948	640	
	23	Total liabilities (add lines 17 through 22)		3,234,736	3,023,785	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted		61,018,506	58,837,699	
	25	Temporarily restricted		46,586,444	42,385,520	
	26	Permanently restricted		21,897,650	21,897,650	
	Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions)		129,502,600	123,120,869	
	31	Total liabilities and net assets/fund balances (see instructions)		132,737,336	126,144,654	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	129,502,600
2	Enter amount from Part I, line 27a	2	850,047
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	130,352,647
5	Decreases not included in line 2 (itemize) ▶ _____	5	7,231,778
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	123,120,869

Part IV

Capital Gains and Losses for Tax on Investment Income

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

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)

If gain, also enter in Part I, line 7
If (loss), enter -0- in Part I, line 7

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-
in Part I, line 8

2

3

Part V

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	5,900,257	109,329,567	0 053968
2013	5,211,178	103,050,131	0 050569
2012	5,619,896	94,509,928	0 059464
2011	5,740,491	92,760,503	0 061885
2010	5,883,558	90,793,519	0 064802

2 Total of line 1, column (d).

2

0 290688

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by
the number of years the foundation has been in existence if less than 5 years

3

0 058138

4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.

4

105,739,032

5 Multiply line 4 by line 3.

5

6,147,456

6 Enter 1% of net investment income (1% of Part I, line 27b).

6

57,302

7 Add lines 5 and 6.

7

6,204,758

8 Enter qualifying distributions from Part XII, line 4.

8

5,697,452

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

Part VII

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

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		1	114,604
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3 Add lines 1 and 2.		3	114,604
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	114,604
6 Credits/Payments			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	113,000	
b Exempt foreign organizations—tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868).	6c	60,000	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d.		7	173,000
8 Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached		8	43
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	58,353
11 Enter the amount of line 10 to be Credited to 2015 estimated tax ☐ 58,353 Refunded ☐		11	0

Part VII-A

Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b		No
c Did the foundation file Form 1120-POL for this year?	1c		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ _____ (2) On foundation managers ☐ \$ _____			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ NY _____			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes	
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.ROCKARCH.ORG</u>	13	Yes	
14	The books are in care of ► <u>CAMELIA MURESAN</u> Telephone no ► <u>(914) 366-6370</u> Located at ► <u>15 DAYTON AVENUE SLEEPY HOLLOW NY</u> ZIP+4 ► <u>10591</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ☐ and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country ►	16	Yes	No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 1b			
	Organizations relying on a current notice regarding disaster assistance check here. ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>). 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

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

5a During the year did the foundation pay or incur any amount to				
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	☐ Yes ☒ No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b	
Organizations relying on a current notice regarding disaster assistance check here. 				
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
If "Yes," attach the statement required by Regulations section 53.4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

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

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LEE R HILTZIK 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	98,729	48,261	0
ROBERT W CLARK 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	DIRECTOR OF ARCHIVES 35 00	114,231	17,649	0
MICHELE J BECKERMAN 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	95,027	35,232	0
ROBERT BATTALY 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	ASST DIRECTOR 35 00	95,027	19,271	0
FERNANDO CARRASCO 15 DAYTON AVENUE SLEEPY HOLLOW, NY 10591	IT COORDINATOR 35 00	87,768	0	0

Total number of other employees paid over \$50,000.  19

Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE ROCKEFELLER UNIVERSITY	FINANCIAL SERVICES	523,526
1230 YORK AVENUE		
NEW YORK, NY 10065		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 ARCHIVAL PROGRAM - THE ROCKEFELLER ARCHIVE CENTER IS AN INDEPENDENT OPERATING FOUNDATION THAT PRESERVES AND MAKES AVAILABLE FOR RESEARCH THE ARCHIVAL COLLECTIONS OF MEMBERS OF THE ROCKEFELLER FAMILY, INSTITUTIONS AND ORGANIZATIONS FOUNDED BY ROCKEFELLER FAMILY MEMBERS (INCLUDING THE ROCKEFELLER FOUNDATION, ROCKEFELLER BROTHERS FUND, WINTHROP ROCKEFELLER FOUNDATION, GENERAL EDUCATION BOARD, ROCKEFELLER UNIVERSITY, POPULATION COUNCIL, ASIA SOCIETY, AND MANY OTHER ORGANIZATIONS) AND THE RECORDS OF OTHER PHILANTHROPIC AND SERVICE ORGANIZATIONS SUCH AS THE FORD FOUNDATION, THE COMMONWEALTH FUND, RUSSELL SAGE FOUNDATION, WT GRANT FOUNDATION, MARKLE FOUNDATION, THE SOCIAL SCIENCE RESEARCH COUNCIL AND THE FOUNDATION CENTER. THE CENTER ALSO HOLDS EXTENSIVE COLLECTIONS OF THE PERSONAL PAPERS OF TRUSTEES, OFFICERS, FACULTY AND ASSOCIATES WHO WERE AFFILIATED WITH THESE INSTITUTIONS. CONTINUED - SEE SCHEDULE ATTACHED	5,414,745
2 RESEARCH & EDUCATION - THE RESEARCH AND EDUCATION DEPARTMENT OVERSEES MANY OF THE EXTERNAL PROGRAMS OF THE ROCKEFELLER ARCHIVE CENTER. IT ADMINISTERS A COMPETITIVE PROGRAM THAT AWARDS 40 TO 50 TRAVEL REIMBURSEMENT EACH YEAR TO GRADUATE STUDENTS, FACULTY MEMBERS, AND INDEPENDENT SCHOLARS. IT ORGANIZES AND HOSTS SEVERAL WORKSHOPS AND CONFERENCES EACH YEAR. STAFF MEMBERS ON THE RESEARCH AND EDUCATION TEAM EDIT AND PUBLISH A SERIES OF RESEARCH REPORTS DESCRIBING SCHOLARLY WORK AT THE RAC, A PUBLISHING PROGRAM THAT IS NOW PRIMARILY ELECTRONIC AND WEB-BASED. CONTINUED - SEE SCHEDULE ATTACHED	490,760
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	105,278,370
b	Average of monthly cash balances.	1b	2,070,901
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	107,349,271
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	107,349,271
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,610,239
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	105,739,032
6	Minimum investment return. Enter 5% of line 5.	6	5,286,952

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

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	5,479,720
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	217,732
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,697,452
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	5,697,452

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

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ _____				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9				
a Excess from 2011. . . .				
b Excess from 2012. . . .				
c Excess from 2013. . . .				
d Excess from 2014. . . .				
e Excess from 2015. . . .				

Part XIV

2006-06-20

☒ 4942(j)(3) or ☐ 4942(j)(5)

20,244,553

Part XV

1

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

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

2

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

NORINE HOCHMAN ADMINISTRATOR
15 DAYTON AVENUE
SLEEPY HOLLOW, NY 10591
(914) 366-6309
RACGRANTS@ROCKARCH.ORG

The form in which applications should be submitted and information and materials they should include

APPLICANTS COMPLETE A FOUR-PAGE FORM AND MAIL IT TO THE ADDRESS PROVIDED ABOVE. APPLICANTS MAY ALSO E-MAIL AN APPLICATION TO RACGRANTS@ROCKARCH.ORG.

Any submission deadlines
NOVEMBER 15TH OF EACH CALENDAR YEAR

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

AWARDS ARE MADE TO INDIVIDUALS INSTITUTIONS ARE NOT ELIGIBLE TO APPLY THE REIMBURSEMENT DOES NOT SUPPORT RESEARCH AT OTHER INSTITUTIONS, AND IT DOES NOT PROVIDE GENERAL TUITION SUPPORT APPLICATION TO THE PROGRAM IS OPEN TO U.S. CITIZENS AND CITIZENS OF FOREIGN COUNTRIES CERTAIN U.S. GOVERNMENT REQUIREMENTS WILL APPLY TO NON-U.S. CITIZENS

Part XV

Supplementary Information(continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	128,781
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of				
(1) Cash.		1a(1)		No
(2) Other assets.		1a(2)		No
b Other transactions				
(1) Sales of assets to a noncharitable exempt organization.		1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)		No
(3) Rental of facilities, equipment, or other assets.		1b(3)		No
(4) Reimbursement arrangements.		1b(4)		No
(5) Loans or loan guarantees.		1b(5)		No
(6) Performance of services or membership or fundraising solicitations.		1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received				

[illegible]

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

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	***** Signature of officer or trustee	2017-05-15 Date	***** Title

May the IRS discuss this return with the preparer shown below (see instr.)? ☐ Yes ☒ No

Paid Preparer Use Only	Print/Type preparer's name BARBARA LANE CPA	Preparer's Signature	Date	Check if self-employed ☐	PTIN P00005830
	Firm's name ☐ CITRIN COOPERMAN & COMPANY LLP			Firm's EIN ☐ 22-2428965	
	Firm's address ☐ 709 WESTCHESTER AVENUE WHITE PLAINS, NY 10604			Phone no ☐ (914) 949-2990	

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JACK MEYERS 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	PRESIDENT/TRUSTEE 35 00	255,500	80,451	0
JAMES A SMITH 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	VICE-PRESIDENT 35 00	161,600	37,723	0
NEIL RUDENSTINE 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	CHAIR 1 00	0	0	0
STEPHEN HEINTZ 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	TRUSTEE 1 00	0	0	0
IRA KATZNELSON 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	TRUSTEE 1 00	0	0	0
DAVID ROCKEFELLER JR 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	TRUSTEE 1 00	0	0	0
JUDITH RODIN 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	TRUSTEE 1 00	0	0	0
MEGAN SNIFFIN-MARINOFF 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	TRUSTEE 1 00	0	0	0
MARC TESSIER-LAVIGNE 15 DAYTON AVENUE SLEEPY HOLLOW,NY 10591	TRUSTEE 1 00	0	0	0

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AXEL C HUENTELMANN THOMASJUSSTRASSE 5 BERLIN,DERMANIA D-10557 GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,300
NICOLE CHRISTINE BOURBONNAIS RUE DES DEUX-PONTS 28 GENEVE 1205 SZ	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,426
EDWARD JK GITRE 305 CORK DRIVE BLACKSBURG,VA 24060	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,061
HELEN CURRY CHURCHHILL COLLEGE CAMBRIDGE CB3 0DS UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
MICHAEL UY LOWELL HOUSE 546 10 HOLYOKE PL CAMBRIDGE,MA 02138	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GAURAV DESAI 7035 CHESTNUT STREET NEW ORLEANS, LA 70118	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,118
JESSE TARBERT 418 BOYD AVENUE TAKOMA PARK, MD 20912	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,454
JOHN L MELOY 1370 PLAZA DE SONADORES SANTA BARBARA, CA 93108	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,382
IAN WASSERMAN 1945 MAYFAIR PARK DR APT 205 HOMewood, AL 35209	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
SUSANNE ANTJE SCHMIDT 1 OXFORD STREET 371 CAMBRIDGE, MA 02138	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,947
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WILLIAM STEPHEN TAYLOR 78 BECHE ROAD CAMBRIDGE CB4 8HU UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,626
ARUN KUMAR FLAT 12 COUNTY LANCASTER,SOUTH BAILRIGG LA1 4YD UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,800
BART DE SUTTER AZALEASTRAAT 42 SIN AMANDSBERG 9040 BE	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
KRISTINA MARIE DARLING 462 LONDONDARY DR BALLWIN,MO 63011	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,000
ANDREJ SVORENCIK C8 14 MANNHEIM 68159 GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JULIO BARNEZ PIGNATA CATTAI RUA FABIANA DE ANDRADE 101 CASE 02 SAO PAULO 11630-000 BR	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,715
KYLIE M SMITH 62 O'DONNELL STREET PORT KEMBLA NSW 2505 AS	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,590
EDWARD J BOTTOMLEY 15 WARKWORTH STREET CAMBRIDGE CB1 1EG UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
JUAN JESUS MORALES MARTIN SAN ISIDRO 337 SANTIAGO CI	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,505
DANIEL PLATT 106 OLNET STREET APT 2 PROVIDENCE, RI 02906	NONE	NONE	REIMBURSEMENT OF TRAVEL	776
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KIRA LUSSIER 461 ST CLARENS AVE BLDG C UNIT D TORONTO,ONTARIO M6H 3W5 CA	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,285
MARK HONIGSBAUM 9 ELLINGHAM ROAD LONDON W12 9PR UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,460
BEN ZDENCANOVIC 436 PROSPECT ST APT 7 NEW HAVEN,CT 06511	NONE	NONE	REIMBURSEMENT OF TRAVEL	978
LAWRENCE ZEIDMAN 645 W WRIGHWOOD AVE 2 CHICAGO,IL 60614	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,561
DAVID SCHUYLER 521 STATE STREET LANCASTER,PA 17603	NONE	NONE	REIMBURSEMENT OF TRAVEL	400
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KELLY O'REILLY 1364 COLUMBUS AVENUE BURLINGAME,CA 94010	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,823
CHRISTINE LUDI KARL-UNGER STR 9 BERLIN D-12435 GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	707
YEXIN LIU NO 55 ZHONG-GUAN-CUN EAST ROAD HAIDIAN DISTRICT,BEIJING 100190 CH	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
MATTHEW SMITH 1 CRAIGBARNET ROAD MILNGAVIE G62 7RA UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,112
ANDREW SCULL 918 MUIRLANDS DRIVE LA JOLLA,CA 92037	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LIJING JIANG 90 RIVERPATH DR APT 25 FRAMINGHAM,MA 01701	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
NICOLAS GUILHOT 343 GOLD STREET 2802 BROOKLYN,NY 11201	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,000
DAVID HAMMACK 14206 SOUTH WOODLAND RD SHAKER HEIGHTS,OH 441202451	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,744
JULIA FOULKES 202 ST MARKS AVE 3 BROOKLYN,NY 11238	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,000
SARAH ROBEY 1933 FEDERAL STREET PHILADELPHIA,PA 19146	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,498
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RACHEL GRACE NEWMAN 530 RIVERSIDE DR APT 2E NEW YORK,NY 10027	NONE	NONE	REIMBURSEMENT OF TRAVEL	274
MARGARITA RAYZBERG 6717 N GLENWOOD AVE H3 CHICAGO,IL 60626	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,934
PAVEL TRIBUNSKII 6-54B FURMANOVA STREET RYAZAN 390006 RS	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,382
CHRISTINA ALARCON DUDENSTRASSE 66 BERLIN 10965 GM	NONE	NONE	REIMBURSEMENT OF TRAVEL	4,000
EVA PAYNE 585 WINTHROP MAIL CTR CAMBRIDGE,MA 02138	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,239
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OENONE KUBIE 1 MORNING HILL PEEBLES EH45 9JS UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,453
AZRA DAWOOD 418 WEST 160TH STREET NEW YORK,NY 10032	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,876
PHILLIPPE BOURMAUD 50 RUE DES GIRONDINS LYON FR	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,500
HENG WEN 201 HAITSUSEBUN 1-7-7 UNOKI OTAKU,TOKYO 146-0091 JA	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,731
JOSE ANTONIO SANCHEZ ROMAN PASEO SANTA MARIS DE LA CABEZA 35 4B MADRID 28045 SP	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,055
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WFP FOKS 44 BUNTWOOD GRUGE RD LONDON SW18 3JX UK	NONE	NONE	REIMBURSEMENT OF TRAVEL	1,577
GREGORY BREW 1176 RIDGEWAY DRIVE AUSTIN,TX 78702	NONE	NONE	REIMBURSEMENT OF TRAVEL	3,000
BEN NEGLEY 808 LENZEN AVENUE 113 SAN JOSE,CA 95126	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,004
SAVINA BALASUBRAMANIAN 6637 N NEWGARD AVE APT 2E CHICAGO,IL 60626	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,173
DANIEL PROSTERMAN 2244 ELIZABETH AVENUE WINSTONSALEM,NC 27103	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,460
Total ▶ 3a				128,781

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARIA ROSA GUDINO CEJUDO CALLE UNO 83A 23 COL SN PEDRO DE LOS PINOS CP-03800 MX	NONE	NONE	REIMBURSEMENT OF TRAVEL	2,535
JONATHAN D COHEN 29 PARK LANE NEWTON, MA 02459	NONE	NONE	REIMBURSEMENT OF TRAVEL	320
Total ▶ 3a				128,781

TY 2015 Accounting Fees Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & AUDITING	38,000	0	0	0
TAX PREPARATION	8,400	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING AND EQUIPMENT		17,010,992	3,857,594	NC	0 %	0	0	0	
LAND		4,838,000		L		0	0	0	

TY 2015 General Explanation Attachment**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Identifier	Return Reference	Explanation
SUMMARY OF DIRECT CHARITABLE ACTIVITIES	FORM 990-PF, PART IX-A, LINES 1 & 2	ARCHIVAL PROGRAM (CONTINUED) THE ARCHIVE CENTER IS LOCATED IN HILLCREST, A HOME OF WESTCHESTER COUNTY FIELD STONE BUILT FOR MARTHA BAIRD ROCKEFELLER (1895-1971), THE SECOND WIFE OF JOHN D ROCKEFELLER, JR. (1874-1960) THE HOUSE WAS DESIGNED BY MOTT B SCHMIDT AND WAS COMPLETED IN 1963 MRS ROCKEFELLER PERSONALLY PLANNED THE FURNISHINGS OF THE HOUSE, BUT ADVANCING AGE AND ILLNESS PREVENTED HER FROM LIVING IN IT AFTER HER DEATH, THE HOUSE WAS GIVEN TO THE ROCKEFELLER BROTHERS FUND AS PART OF HER RESIDUAL ESTATE IN MARCH 1974 THE ROCKEFELLER BROTHERS FUND GAVE THE HOUSE AND THE SURROUNDING 24 ACRES OF GROUNDS FOR USE AS THE ROCKEFELLER ARCHIVE CENTER THE HOUSE PROVIDES WORK SPACE FOR BOTH RESEARCHERS AND STAFF AND INCLUDES A FEW ROOMS WHERE ROCKEFELLER MEMORABILIA ARE ON DISPLAY RESEARCHERS WHO VISIT THE RAC WORK IN THE READING ROOM ON THE SECOND FLOOR OF THE HOUSE AND MAY USE THE RESEARCHERS' LOUNGE ON THE FIRST FLOOR THE CENTER'S READING ROOM IS OPEN TO RESEARCHERS ON WEEKDAYS FROM 9 00AM UNTIL 5 15PM RESEARCH APPOINTMENTS ARE REQUIRED APPOINTMENTS MUST BE MADE WITH, AND CONFIRMED BY, A STAFF MEMBER IN ADVANCE OF A RESEARCH VISIT PHOTO IDENTIFICATION IS REQUIRED RESEARCHERS ARE ADVISED TO CONTACT THE CENTER TO MAKE AN APPOINTMENT BEFORE MAKING TRAVEL PLANS DRIVING DIRECTORS, A LISTING OF THE CENTER'S HOLIDAY CLOSINGS AND LOCAL ACCOMMODATION INFORMATION IS AVAILABLE AT THE RESEARCHER INFORMATION SECTION OF THIS WEBSITE RESEARCHERS ARE INVITED TO WRITE TO THE CENTER, DESCRIBING THEIR PROJECTS IN SPECIFIC TERMS THE STAFF WILL RESPOND WITH A DESCRIPTION OF THE SCOPE AND CONTENT OF RELEVANT MATERIALS IN THE COLLECTIONS RESEARCH & EDUCATION (CONTINUED) THE EDUCATIONAL PROGRAMS ENGAGE A NUMBER OF AREA COLLEGES AND UNIVERSITIES THE RAC BRINGS UNIVERSITY FACULTY AND THEIR GRADUATE OR UNDERGRADUATE STUDENTS TO THE ARCHIVE CENTER FOR COURSE-RELATED LECTURES AND SEMINARS, ADVISES STUDENTS ON PAPERS AND THESES, AND HELPS FACULTY TO FIND PRIMARY MATERIALS FOR THEIR TEACHING THE STAFF ALSO PARTICIPATES IN MEETINGS OF VARIOUS PROFESSIONAL ASSOCIATIONS, DELIVERING PAPERS AND ORGANIZING PANELS FOR RAC RESEARCHERS THERE ARE SEVERAL PUBLIC OUTREACH INITIATIVES OF THE RESEARCH AND EDUCATION PROGRAM THE RAC OCCASIONALLY INVITES MEMBERS OF LOCAL HISTORICAL SOCIETIES TO TOUR THE ARCHIVES IT ORGANIZES EXHIBITS AND PRESENTATIONS ABOUT ARCHIVAL HOLDINGS FOR BOARD AND STAFF MEMBERS OF DONOR ORGANIZATIONS THE RESEARCH AND EDUCATION STAFF ALSO WORKS WITH OTHER POCANTICO-BASED ORGANIZATIONS ON PUBLIC PROGRAMS, SHOWING FILMS AND ORGANIZING EXHIBITIONS AND LECTURES FOR THE LOCAL COMMUNITY

TY 2015 Investments - Other Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ENDOWMENT FUNDS	AT COST	103,987,647	103,987,647

**TY 2015 Land, Etc.
Schedule****Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDING AND EQUIPMENT	17,010,992	3,857,594	13,153,398	13,153,398
LAND	4,838,000	0	4,838,000	4,838,000

TY 2015 Legal Fees Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	7,194	0	0	0

TY 2015 Other Assets Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
EXHIBITION AND ARCHIVAL ART	2,646,980	2,646,980	2,646,980

TY 2015 Other Decreases Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Description	Amount
NET UNREALIZED LOSSES ON INVESTMENTS	7,231,778

TY 2015 Other Expenses Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	2,154	0	0	1,830
COMPUTER, SOFTWARE & LICENSING	47,763	0	0	43,865
DIGITIZATION AND MICROFILMING	145,847	0	0	346,317
MEMBERSHIPS	22,607	0	0	20,299
POSTAGE AND SUPPLIES	137,829	0	0	126,757

TY 2015 Other Income Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
COPY SERVICE FOR RESEARCH	24,822		0

TY 2015 Other Liabilities Schedule

Name: ROCKEFELLER ARCHIVE CENTER

EIN: 20-8030810

Description	Beginning of Year - Book Value	End of Year - Book Value
DUE TO UNIVERSITY FOR INVESTMENT SERVICE	948	640

TY 2015 Other Professional Fees Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	523,526	523,526	523,526	0
ADVISORY & PROFESSIONAL SUPPORT	118,431	0	0	22,126

TY 2015 Taxes Schedule**Name:** ROCKEFELLER ARCHIVE CENTER**EIN:** 20-8030810

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	113,000	0	113,000	0
TAX PENALTY	4,126	0	0	0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2015
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Name of the organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810
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Organization type (check one)

Filers of: Form 990 or 990-EZ Form 990-PF	Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 501(c)(3) exempt private foundation ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation
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Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

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

Name of organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810
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Part I **Contributors** (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	\$ 	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

Name of organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810
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Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization ROCKEFELLER ARCHIVE CENTER	Employer identification number 20-8030810
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	--		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	--		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	--		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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Additional Data

Software ID:
Software Version:
EIN: 20-8030810
Name: ROCKEFELLER ARCHIVE CENTER

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	ACLS 633 THIRD AVENUE 8TH FLOOR NEW YORK, NY 10017	\$ 12,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
<u>2</u>	ABBY AND GEORGE O'NEILL 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	\$ 34,595	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
<u>3</u>	DAVID ROCKEFELLER 30 ROCKEFELLER PLAZA ROOM 5600 NEW YORK, NY 10112	\$ 51,892	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
<u>4</u>	THE FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	\$ 276,901	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
<u>5</u>	MEMORIAL SLOAN-KETTERING CANCER CEN 1275 YORK AVENUE NEW YORK, NY 10021	\$ 29,260	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
<u>6</u>	THE NEAR EAST FOUNDATION 1275 YORK AVENUE NEW YORK, NY 10021	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ROCKEFELLER BROTHERS FUND 475 RIVERSIDE DRIVE SUITE 900 NEW YORK, NY 10115	\$ 120,700	Person ☒ Payroll ☐ Noncash (Complete Part II for noncash contribution)
8	THE ROCKEFELLER FOUNDATION 420 FIFTH AVENUE NEW YORK, NY 10018	\$ 76,088	Person ☒ Payroll ☐ Noncash (Complete Part II for noncash contribution)
9	THE ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEW YORK, NY 10065	\$ 500,000	Person ☒ Payroll ☐ Noncash (Complete Part II for noncash contribution)
10	RUSSELL SAGE FOUNDATION 112 EAST 64TH STREET NEW YORK, NY 10065	\$ 10,000	Person ☒ Payroll ☐ Noncash (Complete Part II for noncash contribution)
11	SOCIAL SCIENCE RESEARCH COUNCIL ONE PIERREPOINT PLAZA 15TH FL BROOKLYN, NY 11201	\$ 51,667	Person ☒ Payroll ☐ Noncash (Complete Part II for noncash contribution)
12	THE COMMONWEALTH FUND ONE EAST 75TH STREET NEW YORK, NY 10021	\$ 85,000	Person ☒ Payroll ☐ Noncash (Complete Part II for noncash contribution)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	THE JOHN HARTFORD FOUNDATION 55 EAST 59TH STREET NEW YORK, NY 10022	\$ 100,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)
14	NATIONAL COMMITTEE ON UNITED STATES 71 WEST 23RD STREET NEW YORK, NY 10010	\$ 163,750	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution)