990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service Note: The organization may have to use a copy of this return to satisfy state reporting requirements.

A	For th	ne 1998 calendar	year, OR tax year period begi	nning Sept.	1,	, 1998, and endi	ng Augu	st 1, ,1999
В	Check		C Name of organization Nati	onal Cente	er on	1		identification number
	Change	of address label or	Philanthropy an	d The Law			13 39	
	Initial re	turn print or type.	Number and street (or P.O. box in D'Agostino Hall	mail is not delivered to	to street a	address Room/suite	E Telephone	
4	Final re	turn See Specific			, , ,	u be.	(212)	998-6272
1		d also for tions.	New York, NY 1				F Check ▶	if exemption application is pending
			Exempt under section 501(c)(3) ∢ (inser	t numbe	r) OR ▶ □ section	4947(a)(1) n	onexempt charitable trust
			empt organizations and 4947(a)					
			for affiliates?			I If either box in exemption num	nber (GEN)	"Yes," enter four-digit group Cash
(c)	Is this	a separate return fi	led by an organization covered by a	group ruling? TYes	₩ No	Other (spe		- Nocioai
(Check	here ▶ ☐ if the c	organization's gross receipts are norm	nally not more than \$2	5,000. Th	e organization need no	ot file a return	with the IRS; but if it received
			e mail, it should file a return without		THE RESERVE THE PERSON NAMED IN	The same of the sa		-
100	NAME OF TAXABLE PARTY.		used by organizations with gro			WHEN THE PARTY OF		
Pa	art I	Revenue, Ex	cpenses, and Changes in	Net Assets or I	Fund E	Balances (See S	pecific Inst	ructions on page 13.)
	1	Contributions,	gifts, grants, and similar ame	ounts received:				
	а	Direct public si	upportStatement	.1	1a	\$87,816		
	b	Indirect public	support		1b			
	C	Government co	ontributions (grants)		1c			
	d	Total (add lines	1a through 1c) (attach sched	ule of contributors)				
		(cash \$ 87,8	316 noncash \$) .			1d	87,816
	2	Program service	e revenue including governmen	nt fees and contract	cts (fron	n Part VII, line 93)	2	
	3	Membership di	ues and assessments				3	
	4		ings and temporary cash inv				4	
	5	Dividends and	interest from securities .				5	6,802
	6a	Gross rents .			6a			
	b		penses		6b			
	С	Net rental inco	me or (loss) (subtract line 6b	from line 6a) .			6c	
une	7	Other investme	ent income (describe >		0)	7	
Revenue	8a	Gross amount	from sale of assets other	(A) Securities		(B) Other		
Ä				157,493	8a			
	b	Less: cost or oth	ner basis and sales expenses,	(46,456)	8b			
	c	Gain or (loss) (a	attach schedule)	111,037	8c			
	d	Net gain or (los:	s) (combine line 8c, columns (A) and (B))			8d	111,037
	9	Special events	and activities (attach sched	ule)				
	а	Gross revenue	(not including \$	of				T 18
			eported on line 1a)		9a			
	b	Less: direct ex	penses other than fundraising	g expenses .	9b			
	c	Net income or	(loss) from special events (si	ubtract line 9b fro	m line !	9a)	9c	
	10a	Gross sales of	inventory, less returns and a	llowances	10a	2010 12 1 12 12 12		
	b	Less: cost of g	goods sold		10b			
	c		oss) from sales of inventory (atta				10c	
	11	Other revenue	(from Part VII, line 103) .				11	832
	12	Total revenue	(add lines 1d, 2, 3, 4, 5, 6c, 7,	8d, 9c, 10c, and	11)		12	206,487
	13	Program service	ces (from line 44, column (B))				13	578,936
Expenses	14		and general (from line 44, col				14	38,345
per	15						15	33,552
Ě	16		ffiliates (attach schedule) .				16	
	17	Total expense	s (add lines 16 and 44, colu	mn (A)) , , ,			17	650,833
ets	18	Excess or (defi	icit) for the year (subtract line	e 17 from line 12)			18	(444,346)
455	19		fund balances at beginning of				19	4,351,831
Net Assets	20		in net assets or fund balance				20	-0-
Z	21	Net assets or fu	und balances at end of year (c	ombine lines 18, 1	9, and 2	20)	21	3,907,485

Pai					equired for section 501(c (See Specific Instructions	
	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)					
	(cash \$ noncash \$)	22				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule),	24				
25	Compensation of officers, directors, etc	25	210 216	270 560	05 165	00.000
26	Other salaries and wages	26	318,316	270,569	25,465	22,282
27	Pension plan contributions	27	0.0.055	60 755		
28	Other employee benefits	28	82,065	69,755	6,565	5,745
29	Payroll taxes	29				
30	Professional fundraising fees ,	30				
31	Accounting fees	31			-	
32	Legal fees	32	1 (25	1 201	120	111
33	Supplies	33	1,625	1,381	130	114
34	Telephone	34	5,397	4,587	432	378
35	Postage and shipping	35	1,515 53,807	1,288	4,305	106 3,766
36	Occupancy	37	33,007	43,730	4,303	3,700
37	Equipment rental and maintenance	38				
38	Printing and publications	39	20 210	20 210		
39	Travel	40	38,218 13,007	38,218 13,007		
40	Conferences, conventions, and meetings	41	13,007	15,007		
41	Interest	42				
42	Depreciation, depletion, etc. (attach schedule)	43a	136,883	134,395	1,327	1,161
43	Other expenses (itemize): aS.tmt2	43b	130,003	134,333	1,541	1,101
Ь		43c				
C		43d				
d		43e				
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	650 022	578,936	20.245	33,552
educ If "Ye (iii) t	orting of Joint Costs.—Did you report in coluncational campaign and fundraising solicitation? es," enter (i) the aggregate amount of these joint contend amount allocated to Management and general \$ till Statement of Program Service Acc	sts \$; (ii) the	e amount allocated	▶ I to Program services I to Fundraising \$	
_			0 01	- 1 1		Program Service
All o	It is the organization's primary exempt purpose's rganizations must describe their exempt purpose ients served, publications issued, etc. Discuss ac nizations and 4947(a)(1) nonexempt charitable trust	achievem hievemer	ents in a clear an	d concise manner leasurable. (Section	. State the number on 501(c)(3) and (4)	Expenses (Required for 501(c) 3) and (4) orgs., and 4947(a) (b) trusts, but cohonal for others.)
a	Support.of.National.Center	on P	hilanthrop	oyandThe	Law	
		Grants a	and allocations	\$	·····)	\$578,936
b						
13		Grants a	and allocations	\$	·····)	
c .						

- 19	(Grants a	nd allocations	S)	
d .						
3						
15	(Grants a	nd allocations	S)	
e (Other program services (attach schedule)	Grants a	nd allocations	\$)	41
f T	otal of Program Service Expenses (should ed	ual line	44, column (B), P	rogram services)		578,936

Balance Sheets (See Specific Instructions on page 20.) Part IV

Note:	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
45	Cash—non-interest-bearing	837,648	45	767,668
46	Savings and temporary cash investments		46	
47a	Accounts receivable			
b	Less: allowance for doubtful accounts	NONE	47c	NONE
48a	Pledges receivable			
b	Less: allowance for doubtful accounts 48b	3,214,219	48c	2,546,246
49	Grants receivable	330003000000000000000000000000000000000	49	
50	Receivables from officers, directors, trustees, and key employees			
	(attach schedule)		50	
51a	Other notes and loans receivable (attach			
	schedule)			
b b	Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
	Prepaid expenses and deferred charges		53	
54	Investments—securities (attach schedule) . See Stmt. 4 .	310,128	54	603,321
55a	Investments—land, buildings, and			
000	equipment: basis			
b	Less: accumulated depreciation (attach			
-	schedule),		55c	
56	Investments—other (attach schedule)		56	
100000000	Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach			
-	schedule),		57c	
58	Other assets (describe >)		58	
59	Total assets (add lines 45 through 58) (must equal line 74)	4 261 005	59	3,917,235
		10,164	60	9,750
60	Accounts payable and accrued expenses	10,104	61	3,773
61	Grants payable		62	
62	Deferred revenue			
63	Loans from officers, directors, trustees, and key employees (attach		63	
63 64a	schedule).		64a	
	Tax-exempt bond liabilities (attach schedule) Mortgages and other notes payable (attach schedule)		64b	
1000	Other lightities (describe		65	
	Other liabilities (describe		- 00	
00				
66	Total liabilities (add lines 60 through 65)	10,164	66	9,750
66	anizations that follow SFAS 117, check here > X and complete lines	10,164		9,75
66 Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74.			9,750
66 Orga	anizations that follow SFAS 117, check here ► 🗓 and complete lines 67 through 69 and lines 73 and 74. Unrestricted	766,662	67	885,333
66 Orga	anizations that follow SFAS 117, check here ► X and complete lines 67 through 69 and lines 73 and 74. Unrestricted	766,662 3,327,669	67 68	885,333 2,764,652
66 Orga	anizations that follow SFAS 117, check here X and complete lines 67 through 69 and lines 73 and 74. Unrestricted	766,662	67	885,333 2,764,652
66 Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted	766,662 3,327,669	67 68 69	885,333 2,764,652
66 Orga 67 68 69 Orga Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted	766,662 3,327,669	67 68 69	885,333 2,764,652
66 Orga 67 68 69 Orga Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted	766,662 3,327,669	67 68 69 70	885,333 2,764,652
66 Orga 67 68 69 Orga Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted. Temporarily restricted Permanently restricted anizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund.	766,662 3,327,669	67 68 69 70 71	885,333 2,764,652
66 Orga 67 68 69 Orga Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted. Temporarily restricted Permanently restricted anizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund. Retained earnings, endowment, accumulated income, or other funds	766,662 3,327,669	67 68 69 70	885,333 2,764,652
66 Orga 67 68 69 Orga Orga	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted. Temporarily restricted Permanently restricted anizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund. Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances (add lines 67 through 69 OR lines	766,662 3,327,669	67 68 69 70 71	885,333 2,764,652
66 Organic Space of Control of Co	anizations that follow SFAS 117, check here ▶ ☒ and complete lines 67 through 69 and lines 73 and 74. Unrestricted. Temporarily restricted Permanently restricted anizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund. Retained earnings, endowment, accumulated income, or other funds	766,662 3,327,669	67 68 69 70 71	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Par	t IV-A	Reconciliation of Revenu Financial Statements with Return (See Specific Instru	Revenue	per	F	Reconciliation of inancial States Return		per	
(2) (3) (4) c d (1) (2)	per audite Amounts line 12, F Net unrea on investr Donated and use of Recoverie year gran Other (sp Add amounts Form 990 Investment not includ 6b, Form 9 Other (sp Add amo Total reve (line c plu	nue, gains, and other support of financial statements. In included on line a but not on orm 990: Ilized gains ments Services of facilities services of facilities services of secify): Sunts on lines (1) through (4) Included on line 12, but not on line a: t expenses led on line 1990 Services statements Services of the services services of prior the secify):	a 206	5,487 5,487	a Total expandited firb Amounts on line 17 (1) Donated and use of 20 Prior year at reported or Form 990. (3) Losses repline 20, Form 990. (4) Other (specific additional amounts of Form 990. (1) Investment not include 6b, Form 990. (2) Other (specific additional amounts of Include 6b, Form 990. Add amounts of Form 990. (1) Investment not include 6b, Form 990. Add amounts of Total expecific according to the control of the control o	penses and lonancial statement included on line. Form 990: services facilities \$ djustments in line 20,	rough (4) a but not rough (4) 17, a:	a b c d d e	650,833 650,833
=	Ins	(A) Name and address		(B) Title a	and average hours per devoted to position	(C) Compensation (If not paid, enter	(D) Contributions employee benefit pla deterred compensal	ns.8 a	(E) Expense account and other allowances
S:	tateme	nt 5		As ne	eeded	NONE	NONE		NONE
	*********					92 23 4990000			
75	organizatio	ficer, director, trustee, or key en on and all related organizations, o attach schedule—see Specific	of which mor	e than \$10	0,000 was provided	of more than \$100 by the related org	0,000 from you anizations?	· [Yes 🗓 No

Pal	Other Information (See Specific Instructions on page 23.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity .	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.		HIII.	
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?.	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/	A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	ennin.	X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common	dillille	dille	
	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	mm
b	If "Yes," enter the name of the organization ▶ New York University			
	and check whether it is exempt OR nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the			
	instructions for line 81	Milli	HIIII	allille
	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	00-		
	or at substantially less than fair rental value?	82a	dillille	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount			
	as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.). 82b N/A			
020		83a	A STATE	HIHI
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83b	X	-
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	84a	Α_	17
	Did the organization solicit any contributions or gifts that were not tax deductible?	1111111	IIIIII	MA
D	If "Yes." did the organization include with every solicitation an express statement that such contributions or citis were not tax deductible?	84b	AT /	A
85	or gifts were not tax deductible?	85a	-	A
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	-	A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization		dille	Willin.
	received a waiver for proxy tax owed for the prior year.			
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) . 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?,	85g	N/	Α
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable		N/	А
	estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	/	
86	501(c)(7) organizations.—Enter: a Initiation fees and capital contributions included on			
	line 12			
b	Gross receipts, included on line 12, for public use of club facilities,			
	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.)	Milli	HHH	dillilli
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	00		7.7
	partnership? If "Yes," complete Part IX	88	anna	X
89a	501(c)(3) organizations.—Enter: Amount of fax imposed on the organization during the year under:			
	section 4911 ► NONE ; section 4912 ► NONE ; section 4955 ► NONE	UHHHA	anan	HHH
D	501(c)(3) and 501(c)(4) organizations.—Did the organization engage in any section 4958 excess benefit transaction during the year? If "Yes," attach a statement explaining each transaction	89b	24	Х
		030		Λ
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958,	NO	IF.	
d	Enter: Amount of tax on line 89c. above, reimbursed by the organization,	NO		
	List the states with which a copy of this return is filed >	-	Name and Address of the Owner, where	
b	Number of employees employed in the pay period that includes March 12, 1998 (See instructions.)	90b		
91	The books are in care of ▶ National Center-Philanthropy Telephone no. ▶ (212)9			
12350	Located at ▶ 110 West 3rd Street, Room 206A & Day 10012		- a.t.	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year 92		3 600	

Enter are	oss amounts unless otherwise	Unrelated b	pecific Instruc usiness income		ion 512, 513, or 514	(E)
indicated		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function income
а	gram dervice revertee.					
b						
c						
d		_				
е	NO 10.00 To Table					
	dicare/Medicaid payments					
	es and contracts from government agenci			-		
	mbership dues and assessments .					
	rest on savings and temporary cash investmen idends and interest from securities			14	6,802	
	rental income or (loss) from real estate:			7/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	0,002	
	ot-financed property					
b not	debt-financed property					
8 Net	rental income or (loss) from personal propert	y				
9 Oth	ner investment income			18	111,037	
	or (loss) from sales of assets other than invento					
	income or (loss) from special events .					
	ess profit or (loss) from sales of inventory					
3 Oth	er revenue: a	_		0.1	000	
	Misc. Income	_		01	832	
c		_				
d		_				
e	otal (add columns (B), (D), and (E))				118,671	
•	of the organization's exempt purposes (ot Not Applicable	ter than by providing				
art IX	Information Regarding Taxable Su	ıbsidiaries (Com	plete this Par	t if the "Yes"	box on line 88	B is checked.)
Name	address, and employer identification	bsidiaries (Compercentage of ownership interest	plete this Pari Nature business a	of	box on line 88 Total income	3 is checked.) End-of-year assets
Name	and employer identification imber of corporation or partnership	Percentage of	Nature	of	Total	End-of-year
Name nu	and employer identification imber of corporation or partnership	Percentage of ownership interest	Nature	of	Total	End-of-year
Name nu	and employer identification imber of corporation or partnership	Percentage of ownership interest	Nature	of	Total	End-of-year
Name nu	address, and employer identification imber of corporation or partnership	Percentage of ownership interest % % %	Nature business a	of ctivities	Total income	End-of-year assets
Name N/A	Under penalties of perjury, I declare that I have exa and belief, it is true, correct, and complete. Declar (See General Instruction Up on page 12.)	Percentage of pwnership interest % % % % mined this return include	Nature business at man officer) is base	of ctivities	Total income	End-of-year assets
Name N/A N/A lease ign ere	Under penalties of perjury, I declare that I have exa and belief, it is true, correct, and complete. Declar (See General Instruction Un on page 12.) Signature of officer Preparer's	Percentage of pwnership interest % % % % mined this return include	Nature business at mag accompanying stran officer) is base LOCO To Daje	chedules and state don all information per print name Check if	Total income ements, and to the bin of which preparer and little Preparer's S	End-of-year assets est of my knowledge has any knowledge. +IVE. DYE
Name N/A lease ign ere	Under penalties of perjury, I declare that I have exa and belief, it is true, correct, and complete. Declar (See General Instruction Up on page 12.) Signature of officer Preparer's signature	Percentage of ownership interest % % % % mined this return, includation of preparer jother Date	Nature business at the property of the propert	chedules and state don all information of the control of the contr	Total income ements, and to the bin of which preparer and little Preparer's S	End-of-year assets est of my knowledge has any knowledge.
nu	Under penalties of perjury, I declare that I have exa and belief, it is true, correct, and complete. Declar (See General Instruction Un on page 12.) Signature of officer Preparer's	Percentage of pwnership interest % % % % mined this return include	Nature business at mag accompanying stran officer) is base LOCO To Daje	chedules and state of on all information of the company of the com	Total income aments, and to the bin of which preparer And little Preparer's S Autorities	End-of-year assets est of my knowledge has any knowledge. J-100 DV6

SCHEDULE A (Form 990)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

Department of the Treasury Internal Revenue Service See separate instructions.

Must be completed by the above organizations and attached to their Form 990 or 990-EZ.

1998

OMB No. 1545-0047

Name of the organization Employer identification number National Center on Philanthropy and The Law 13 3954405 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions on page 1. List each one. If there are none, enter "None.") (d) Contributions to (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation imployee benefit plans & account and other than \$50,000 per week devoted to position deterred compensation allowances NONE Total number of other employees paid over NONE \$50,000 . Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions on page 1. List each one (whether individuals or firms). If there are none, enter "None,") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for NONE

Pa	rt I	Statements About Activities		Yes	No
1	at	uring the year, has the organization attempted to influence national, state, or local legislation, including any tempt to influence public opinion on a legislative matter or referendum?	1		X
	or	"Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$			
2	of	its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable ganization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal eneficiary:			
a	Sa	alle, exchange, or leasing of property?	2a	annan	X
b	Le	nding of money or other extension of credit?	2b		X
C	Fu	rnishing of goods, services, or facilities?	2c		X
d	Pa	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
e	Tra	ansfer of any part of its income or assets?	2e		X
~		the answer to any question is "Yes," attach a detailed statement explaining the transactions.	E.C		44
3			3		X
	Do	bes the organization make grants for scholarships, fellowships, student loans, etc.?	4a		X
b	Att	tach a statement to explain how the organization determines that individuals or organizations receiving grants loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions on page 2.)	48		
Pa			A		2000
The	orga	anization is not a private foundation because it is: (Please check only ONE applicable box.)			
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	\Box	A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)			
7	\vdash	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	님	A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9	_	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hosp and state ▶			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)		1000	
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	e gene	eral pu	ublic
11b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12		An organization that normally receives: (1) more than 331/2% of its support from contributions, membership receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more its support from gross investment income and unrelated business taxable income (less section 511 tax) from bus by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV	e than	331/3	% 0
13	X	An organization that is not controlled by any disqualified persons (other than foundation managers) and support described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(3).)	orts org	ganiza: (a)(2).	tions (See
		Provide the following information about the supported organizations. (See instructions on page 4.)		100	
		(a) Name(s) of supported organization(s) (b) Line from	numbe above		
		New York University 06	T	38	
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions on page 4			

	N/A Support Schedule (Complete only if you Note: You may use the worksheet in the ins						
Cale	lendar year (or fiscal year beginning in) . > (a	1997	(b) 1996	(c) 1995	(d) 19	94	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)						
16	Membership fees received ,						
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose						
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975						
19	Net income from unrelated business activities not included in line 18 ,						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
22	Other income. Attach a schedule. Do not						
	include gain or (loss) from sale of capital assets						12
23							
24	Line 23 minus line 17						
25	Enter 1% of line 23						
С	Organizations described on lines 10 or 11: a En b Attach a list (which is not open to public inspection) s person (other than a governmental unit or publicly supp 1997 exceeded the amount shown in line 26a. Enter to c Total support for section 509(a)(1) test: Enter line 24. d Add: Amounts from column (e) for lines: 18	howing the corted org the sum of column (e	e name of and an anization) whose of all these excess	policable rount contributed to total gifts for 1994 amounts.	through	26b 26c	
			26b			26d 26e	
f	f Public support percentage (line 26e (numerator) di	vided by	line 26c (denomi	nator))		26f	%
27 b	Organizations described on line 12: a For amore person," attach a list to show the name of, and total a of such amounts for each year: (1997)	from a no	Not Appli (1995) ondisqualified pers the amount on lin duals.) After comp	ear from, each "discable son, attach a list to e 25 for the year o	(1994) . show the or (2) \$5,000 between	e name	e of, and amount
	(1997)						
С	c Add: Amounts from column (e) for lines: 15 20					27c	
d	d Add: Line 27a total and lin					27d	
е	e Public support (line 27c total minus line 27d total). ,			* 18.000000000000000000000000000000000000		27e	
f	f Total support for section 509(a)(2) test: Enter amount	on line 23	3. column (e) .	. ▶ 27f		HIIII	
g h						27g 27h	% %
28	Unusual Grants: For an organization described in lift attach a list (which is not open to public inspection) for grant, and a brief description of the nature of the grant	or each ye	ear showing the n	ame of the contrib	utor, the	date an	d amount of the

Private School Questionnaire (See instructions on page 4.) Part V

other gover Does the of brochures, programs, a Has the org the period of that makes If "Yes," ple Does the or a Records ind b Records do basis? C Copies of a with student d Copies of al If you answe Does the or a Students' rig b Admissions c Employment d Scholarships e Educational f Use of facility g Athletic prog	reganization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, ming instrument, or in a resolution of its governing body? organization include a statement of its racially nondiscriminatory policy toward students in all its catalogues, and other written communications with the public dealing with student admissions, and scholarships? anization publicized its racially nondiscriminatory policy through newspaper or broadcast media during of solicitation for students, or during the registration period if it has no solicitation program, in a way the policy known to all parts of the general community it serves? ease describe; if "No," please explain. (If you need more space, attach a separate statement.)	Yes 29 30 31
other gover Does the of brochures, programs, a Has the org the period of that makes If "Yes," ple Does the or a Records ind b Records do basis? C Copies of a with student d Copies of al If you answe Does the or a Students' rig b Admissions c Employment d Scholarships e Educational f Use of facility g Athletic prog	ring instrument, or in a resolution of its governing body? organization include a statement of its racially nondiscriminatory policy toward students in all its catalogues, and other written communications with the public dealing with student admissions, and scholarships? anization publicized its racially nondiscriminatory policy through newspaper or broadcast media during of solicitation for students, or during the registration period if it has no solicitation program, in a way the policy known to all parts of the general community it serves? ease describe; if "No," please explain. (If you need more space, attach a separate statement.)	30
Does the or brochures, programs, a Has the org. the period of that makes if "Yes," ple had been basis?	organization include a statement of its racially nondiscriminatory policy toward students in all its catalogues, and other written communications with the public dealing with student admissions, and scholarships? anization publicized its racially nondiscriminatory policy through newspaper or broadcast media during of solicitation for students, or during the registration period if it has no solicitation program, in a way the policy known to all parts of the general community it serves? ease describe; if "No," please explain. (If you need more space, attach a separate statement.)	
Has the orgathe period of that makes of "Yes," ple that makes of the period of that makes of the period of the per	anization publicized its racially nondiscriminatory policy through newspaper or broadcast media during of solicitation for students, or during the registration period if it has no solicitation program, in a way the policy known to all parts of the general community it serves?.	
the period of that makes If "Yes," ple If "Y	of solicitation for students, or during the registration period if it has no solicitation program, in a way the policy known to all parts of the general community it serves?, ease describe; if "No," please explain. (If you need more space, attach a separate statement.)	31
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Does the or a Records and b Records does basis?		
a Records ind b Records do c Copies of a c With student d Copies of al lif you answer Does the or a Students' rig b Admissions c Employment d Scholarships d Scholarships d Educational f Use of facility g Athletic prog	rganization maintain the following:	
Does the or Students' right Admissions Employment Scholarships Educational Use of facility Athletic program Other extractions		32a
basis?	cumenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	02.0
c Copies of a with student decopies of all If you answer the or a Students' right Admissions be Employment decopies of facility at the control of the contro	IS 4 차이들의 발생님은 1.0 가는	32b
with student d Copies of al If you answe Does the or a Students' rig b Admissions c Employment d Scholarships e Educational f Use of facility g Athletic prog	all catalogues, brochures, announcements, and other written communications to the public dealing	
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Does the or Students' right Admissions Employment Scholarships Educational Use of facility Athletic program Other extraction		32d
Does the order of Students' right of Admissions of Employment of Scholarships of Educational of Use of facility Athletic program Other extractions of the Education of Contraction of Cont		
Does the order Students' right Admissions Employment Scholarships Educational Use of facility Athletic program Other extraction	ered "No" to any of the above, please explain. [If you need more space, attach a separate statement.]	
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d Scholarships e Educational f Use of facili g Athletic prog	t of faculty or administrative staff?	33c
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Athletic prog		
h Other extrac	ties?	33f
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	grams?	33g
	To product on anticities 2	33h
If you answe	curricular activities?	3311
	ered "Yes" to any of the above, please explain, (If you need more space, attach a separate statement.)	
	166 To any of the above, please explain, (if you need thore space, attach a separate statement.)	
107 S 2011 C C C C C C C C C C C C C C C C C C		
a Does the or		34a
	ganization receive any financial aid or assistance from a governmental agency?	
		34b
If you answe	anization's right to such aid ever been revoked or suspended?	
Does the org		PATTITION TO BE

	Lobbying Expenditures by E					12000
Chi	(To be completed ONLY by an eck here ▶ a ☐ if the organization belongs			1 Form 5/68)	Not	Applicabl
	eck here ▶ b ☐ if you checked "a" above a		- 120	lv		
	Limits on Lobby	ing Expenditure	es		(a) Affiliated group totals	(b) To be completed for ALL electing
_	(The term "expenditures" me	ans amounts paid	or incurred.)		8000000	organizations
36	Total lobbying expenditures to influence publi	c opinion (grassroo	ots lobbying) .	36		
37	Total lobbying expenditures to influence a leg		4. 46.	37		
38	Total lobbying expenditures (add lines 36 and			38		
39	Other exempt purpose expenditures			39	-	
40	Total exempt purpose expenditures (add lines			40		
41	Lobbying nontaxable amount. Enter the amou		775			
		obbying nontaxable		,		
	Not over \$500,000					
	Over \$500,000 but not over \$1,000,000 \$100,0 Over \$1,000,000 but not over \$1,500,000 \$175,0				Annumannum (summiniminimin.
	Over \$1,500,000 but not over \$17,000,000 .\$225,0					
	Over \$17,000,000 \$1,000					
42	Grassroots nontaxable amount (enter 25% of				, annument of the same of the	www.
43	Subtract line 42 from line 36. Enter -0- if line					
44	Subtract line 41 from line 38. Enter -0- if line					
	Caution: If there is an amount on either line 4	3 or line 44, you m	nust file Form 472	0.		
	See the ma	tructions for lines			ear Averaging Pe	riod
	Calendar year (or fiscal year beginning in) ▶	- Common			ear Averaging Pe (d) 1995	(e)
45	Calendar year (or	Lobi	bying Expenditur	es During 4-Ye	(d)	(e)
	Calendar year (or fiscal year beginning in) ▶	(a) 1998	bying Expenditur	es During 4-Ye	(d)	(e)
46	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount,	(a) 1998	bying Expenditur	es During 4-Ye	(d)	(e)
45 46 47 48	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount, Lobbying ceiling amount (150% of line 45(e)).	(a) 1998	bying Expenditur	es During 4-Ye	(d)	(e)
46 47	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount, Lobbying ceiling amount (150% of line 45(e)). Total lobbying expenditures	(a) 1998	bying Expenditur	es During 4-Ye	(d)	(e)
46 47 48	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount, Lobbying ceiling amount (150% of line 45(e)). Total lobbying expenditures	(a) 1998	bying Expenditur	es During 4-Ye	(d)	(e)
46 47 48 49	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount, Lobbying ceiling amount (150% of line 45(e)). Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures	(a) 1998	(b) 1997	es During 4-Ye	(d)	(e)
46 47 48 49	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount, Lobbying ceiling amount (150% of line 45(e)). Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
46 47 48 49 50	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount	(a) 1998 cting Public Chations that did n	(b) 1997	res During 4-Ye (c) 1996 art VI-A) (See	(d) 1995	(e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount	(a) 1998 cting Public Chations that did nuence national, sta	narities	res During 4-Ye (c) 1996 art VI-A) (See ation, including a	(d) 1995	(e) Total
46 47 48 49 50 Pa	Calendar year (or fiscal year beginning in) ▶ Lobbying nontaxable amount	Lobbi (a) 1998 cting Public Chations that did no uence national, sta	narities	res During 4-Ye (c) 1996 art VI-A) (See ation, including a	(d) 1995	(e) Total
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Par	t VII		n Regarding Tra ganizations	ansfers To and Transact	ons and Relati	onships Wit	th Nonc	harita	ble	
51				r indirectly engage in any of the organizations) or in sections.					d in s	ection
a				to a noncharitable exempt or					Yes	No
	(i) Ca	a la						51a(i)		Х
	(iii) Oti	her assets					8 8 8	a(ii)		Х
b		ansactions:			155 OF 15 15 15 15			A CONTRACTOR		Х
	(i) Sa	les of assets to	a noncharitable e	xempt organization		2222	0.89	b(i)		7.2
				ritable exempt organization .				b(ii)		Х
			or equipment .			v + 9 8		b(iii)		Х
		imbursement ar						b(iv)		Х
	(v) Lo	ans or loan gua	rantees					b(v)		Х
	(vi) Per	rformance of se	ervices or member	ship or fundraising solicitation	s			b(vi)		X
c				ists, other assets, or paid emp				С	- 1	Х
d	goods, o	other assets, or	services given by th	complete the following schedule ne reporting organization. If the n column (d) the value of the go	organization receive	d less than fair	market va			the
(a	0.000	(b)		(c)	88 NOV 1928	(d)				
Line	no. A	mount involved	Name of non	chantable exempt organization	Description of tr	ansfers, transacti	ons, and st	naring arr	angeme	ents
										_
_										
					- Local control					
			-	2020 2 00000000000000000000000000000000						
	describe	ed in section 50	ectly or indirectly 11(c) of the Code (following schedule	affiliated with, or related to, on the other than section 501(c)(3)) on the other than section 501(c)(3).	one or more tax-e r in section 527?	xempt organiz	ations . ►	☐ Yes	XI	No
		(a)		(b)	1/2	(c)		7700000		
		Name of organiza	alion	Type of organization		Description of	relationship)		
					4					
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				100	-					
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					1					
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					1					
	500				2					
_										

FORM 990, PART 1 - LIST OF CONTRIBUTORS

NAME AND ADDRESS

ANONYMOUS CONTRIBUTORS

DATE

DIRECT PUBLIC SUPPORT

87,816

87,816

TOTAL CONTRIBUTION AMOUNTS

STATEMENT 1

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM	PROGRAM MANAGEMENT SERVICES AND GENERAL FUNDRAISING	FUNDRAISING	
HONOBABIUM	5,000	5,000	NONE	NONE	
PROFESSIONAL SERVICES	24,550	24,550	NONE	NONE	
COMPUTER SERVICES	5,464	4,644	437	382	
BOOKS AND PERIODICALS	37,587	37,587	NONE	NONE	
LIBRARY SERVICES	13,360	13,360	NONE	NONE	
STIPENDS	39,800	39,800	NONE	NONE	
OVERHEAD APPLIED	4,950	4,208	396	347	
EQUIPMENT	6,172	5,246	494	432	
TOTALS	136,883	134,395	1,327	1,161	

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE CENTER OPERATES FOR CHARITABLE AND EDUCATIONAL PURPOSES, INCLUDING THE PROMOTION, ENCOURAGEMENT, AND SPONSORSHIP OF STUDY, RESEARCH AND OTHER EDUCATIONAL ACTIVITIES IN THE AREA OF PHILANTHROPY AND THE LAW. THE CENTER CONDUCTS OR SUPPORTS ACTIVITIES FOR THE BENEFIT OF, PERFORMS THE FUNCTIONS OF, OR CARRIES OUT THE PURPOSES OF NEW YORK UNIVERSITY.

NATIONAL CENTER ON PHILANTHROPY AND THE LAW	13-3954405	STATEMENT 4
FROM 990 , PART IV - INVESTMENTS - SECURITIES		
DESCRIPTION		ENDING BOOK VALUE
MUTUAL FUNDS		603,321
TOTALS		603,321

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

Mr. John E. Craig, Jr. Executive Vice President & Treasurer The Commonwealth Fund One East 75th Street New York, N.Y. 10021

Professor Harvey P. Dale New York University School of Law D'Agostino Hall, Room 206A 110 West Third Street New York, N.Y. 10012

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S. Andrew Schaffer, Esq.
Senior Vice President and General Council
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Office of the Legal Council
70 Washington Square South
New York, N.Y. 10012

Professor John G. Simon Yale Law School 127 Wall Street P.O. Box 208215 Yale Station New Haven, CT. 06520

Jill S. Manny New York University School of Law D'Agostino Hall, Room 206B 110 West 3rd Street New York N.Y. 10012

Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

Please type or				dication for each				
	Name			10000 NOO	10000 0000	w 200	Employe	r identification numb
print. File the	The	National	Center on Ph	ilanthro	py and Th	ne Law	13	3954405
original and one copy by the due	Number, s	treet, and room or su	ite no. (or P.O. box no. if m	all is not delivered	to street address)			33.
date for filing your return. See	c/o	Prof. Jil	1 Manny, Exe	cutive D	irector,	D'Agost	ino	Hall
instructions on back,	City, town	or post office, state,	and ZIP code. For a foreign	address, see inst	ructions.			
	110	West 3rd	Street, Room	206A, N	lew York,	NY 100	12	
Note: Corporate trusts mu:	income i	ax return filers m	nust use Form 7004 i est an extension of tin	to request an	extension of time	e to file. Par	tnership	s, REMICs, and
1 I request a	n extensio	on of time until	April 15, 200		file (check only			
☐ Form 70	06-GS(D)	Part of the last o	990-T (sec. 401(a) or 40		Form 1120-NI	A STATE OF THE STA	lanua	П
☐ Form 70			990-T (trust other than a		Form 3520-A	J (Sec. 4351 L	aves)	Form 8612
X Form 99			1041 (estate) (see instru		Form 4720			
☐ Form 99			1041-A	Odoria)	Form 5227			☐ Form 8725
Form 99	0-PF	Form			Form 6069			
If the organ	nization de		office or place of bus			ack this hav		☐ Form 8831
2a For calend	ar vear	or other	tax year beginning	Sept. 1.	1998 and	ending At	aust	31 199
b If this tax y	year is for	less than 12 mor	nths, check reason:	Initial return	Final return	Change.	in acco	unting period
3 Has an ext	tension of	time to file been	previously granted for	r this tax year	7	_ Onlarige	in acce	☐ Yes ☒ No
4 State in de	tail why y	ou need the exte	previously granted for ension Addition	nal time	is neces	sary ir	ord	ler to
prepar	e an	accurate t	ax return.	·····			••••••	
5a If this form	is for Form	706-GS(D), 706-	GS(T), 990-BL, 990-PF	, 990-T, 1041 (estate), 1042, 11	20-ND, 4720,	••••••	•••••
6069, 8612,	8613, 872	5, 8804, or 8831, e	nter the tentative tax, le	ss any nonrefun	dable credits. See	instructions.	\$	
o ii this form	is for For	m 990-PF, 990-T	. 1041 (estate), 1042,	or 8804, ente	r any refundable	credits and		
c Balance d	ue Subtra	ents made. Includ	de any prior year over ne 5a. Include your p	payment allow	ed as a credit	· . · <u>· ·</u> ·	\$	
C Dalance u	ue. Subtra	ict line 30 from li	ne sa include vour n					
coupon if r	required. S	see instructions	no our moduce your p					-0-
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Coupon if r	equired. S	see instructions	Signature a	nd Verificati	on		\$	
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Coupon if r	equired. S	are that I have examinand that I am authors	Signature a ned this form, including acced to prepare this form.	and Verification	on ules and statements	, and to the bes	\$	
Under penalties of p	perjury, I dec nd complete;	are that I have examinand that I am authors	Signature a ned this form, including acced to prepare this form.	and Verification	on utes and statements	, and to the bes	S at of my ka	nowledge and belie
Under penalties of p	perjury, I dec nd complete;	are that I have examinand that I am authors	Signature a ned this form, including acced to prepare this form.	and Verification	on utes and statements	, and to the bes	S at of my ka	nowledge and belie
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