

Return of Organization Exempt From Income Tax

EXTENSION ATTACHED

OMB No. 1545-0047

1996

This Form is
Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceUnder section 501(c) of the Internal Revenue Code (except black lung benefit
trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

Note: The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 1996 calendar year, OR tax year period beginning 09/01, 1996, and ending 08/31, 1997

B Check if: ☐ Change of address ☒ Initial return ☐ Final return ☐ Amended return (required also for State reporting)	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number
		NATIONAL CENTER ON PHILANTHROPY AND THE LAW		13-3954405
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite D'AGOSTINO HALL 206A		E State registration number N/A
		City, town, or post office, state, and ZIP + 4 NEW YORK, NY 10012		F Check ☐ if exemption application is pending

G Type of organization ☒ Exempt under section 501(c) (3) (insert number) OR ☐ section 4947(a)(1) nonexempt charitable trust

Note: Section 501(c)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

H (a) Is this a group return filed for affiliates? ☐ Yes ☒ No(b) If "Yes," enter the number of affiliates for which this return is filed: ☐ If either box in H is checked "Yes," enter four-digit group exemption number (GEN) ☐(c) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ NoK Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if it received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 9.)

1 Contributions, gifts, grants, and similar amounts received: STMT		1a	3,152,065.	1b	2,255,451.	1c		1d	5,407,516.
a Direct public support									
b Indirect public support									
c Government contributions (grants)									
d Total (add lines 1a through 1c) (attach schedule of contributors)									
(cash \$ 5,407,516 noncash \$)									
2 Program service revenue including government fees and contracts (from Part VII, line 93)								2	
3 Membership dues and assessments								3	
4 Interest on savings and temporary cash investments								4	
5 Dividends and interest from securities								5	17,985.
6 a Gross rents		6a							
b Less: rental expenses		6b							
c Net rental income or (loss) (subtract line 6b from line 6a)								6c	
7 Other investment income (describe)								7	
8 a Gross amount from sale of assets other than inventory		(A) Securities	334,373.	8a	(B) Other				
b Less: cost or other basis and sales expenses			285,018.	8b					
c Gain or (loss) (attach schedule)			49,355.	8c					
d Net gain or (loss) (combine line 8c, columns (A) and (B))								8d	49,355.
9 Special events and activities (attach schedule)									
a Gross revenue (not including \$ of contributions reported on line 1a)		9a							
b Less: direct expenses other than fundraising expenses		9b							
c Net income or (loss) from special events (subtract line 9b from line 9a)								9c	
10 a Gross sales of inventory, less returns and allowances		10a							
b Less: cost of goods sold		10b							
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)								10c	
11 Other revenue (from Part VII, line 103)								11	391.
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)								12	5,475,247.
13 Program services (from line 44, column (B))								13	573,415.
14 Management and general (from line 44, column (C))								14	38,657.
15 Fundraising (from line 44, column (D))								15	32,215.
16 Payments to affiliates (attach schedule)								16	
17 Total expenses (add lines 13 and 14, column (A))								17	644,287.
18 Excess or (deficit) for the year (subtract line 17 from line 12)								18	4,830,960.
19 Net assets or fund balances at beginning of year (from line 73, column (A))								19	NONE
20 Other changes in net assets or fund balances (attach explanation)								20	
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)								21	4,830,960.

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

SCANNED OCT 28 '98

Revenue

Expenses

Net Assets

RECEIVED
SEP - 2 1998
OGDEN, UT
IRS-060

16

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 13.)

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)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	NONE	NONE	NONE	NONE
26	Other salaries and wages	350,552.	301,475.	28,044.	21,033.
27	Pension plan contributions				
28	Other employee benefits	84,184.	72,398.	6,735.	5,051.
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees	1,323.	1,323.	NONE	NONE
32	Legal fees				
33	Supplies	3,763.	3,270.	191.	302.
34	Telephone	8,689.	7,552.	441.	696.
35	Postage and shipping	1,474.	1,281.	75.	118.
36	Occupancy	50,719.	44,083.	2,571.	4,065.
37	Equipment rental and maintenance	7,778.	6,761.	394.	623.
38	Printing and publications	62,282.	62,282.		
39	Travel	30,610.	30,610.	NONE	NONE
40	Conferences, conventions, and meetings	13,153.	13,153.	NONE	NONE
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)				
43	Other expenses (itemize): a STMT 2	29,760.	29,227.	206.	327.
b					
c					
d					
e					
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)(D), carry these totals to lines 13-15	644,287.	573,415.	38,657.	32,215.

Reporting of Joint Costs. - Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 16.)What is the organization's primary exempt purpose? **SEE STATEMENT 3**

All organizations must describe their exempt purpose achievements. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)	
a	SUPPORT OF THE NATIONAL CENTER ON PHILANTHROPY AND THE LAW ACTIVITIES
	(Grants and allocations \$) 573,415.
b	
	(Grants and allocations \$)
c	
	(Grants and allocations \$)
d	
	(Grants and allocations \$)
e	Other program services (attach schedule) (Grants and allocations \$)
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) 573,415.

Part IV Balance Sheets (See Specific Instructions on page 16.)

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	NONE	45	878,166.
46	Savings and temporary cash investments		46	
47a	Accounts receivable	NONE		
b	Less: allowance for doubtful accounts	NONE	47c	NONE
48a	Pledges receivable			
b	Less: allowance for doubtful accounts		48c	
49	Grants receivable	NONE	49	3,636,658.
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less: allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges		53	
54	Investments - securities (attach schedule) SEE STATEMENT, 4.	NONE	54	329,486.
55a	Investments - land, buildings, and equipment: basis			
b	Less: accumulated depreciation (attach schedule)		55c	
56	Investments - other (attach schedule)		56	
57a	Land, buildings, and equipment: basis			
b	Less: accumulated depreciation (attach schedule)		57c	
58	Other assets (describe)		58	
59	Total assets (add lines 45 through 58) (must equal line 74)	NONE	59	4,844,310.
60	Accounts payable and accrued expenses	NONE	60	13,350.
61	Grants payable		61	
62	Deferred revenue		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe)		65	
66	Total liabilities (add lines 60 through 65)	NONE	66	13,350.
Organizations that follow SFAS 117, check here ☒ and complete lines 67 through 69 and lines 73 and 74.				
67	Unrestricted	NONE	67	258,283.
68	Temporarily restricted	NONE	68	4,317,677.
69	Permanently restricted	NONE	69	255,000.
Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74.				
70	Capital stock, trust principal, or current funds		70	
71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds		72	
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	NONE	73	4,830,960.
74	Total liabilities and net assets/fund balances (add lines 66 and 73)	NONE	74	4,844,310.

Part VI Other Information (See Specific Instructions on page 19.)

		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? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78 a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78 b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association or with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80 a	X
b	If "Yes," enter the name of the organization <u>NEW YORK UNIVERSITY</u> and check whether it is ☒ exempt OR ☐ nonexempt.		
81 a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81 a	NONE
b	Did the organization file Form 1120-POL for this year?	81 b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82 a	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.)	82 b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83 a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84 a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b	N/A
85	Section 501 (c)(4), (5), or (6) organizations. - a Were substantially all dues nondeductible by members?	85 a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85 b	N/A
c	Dues, assessments, and similar amounts from members	85 c	N/A
d	Section 162(e) lobbying and political expenditures	85 d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85 e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85 f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85 g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N/A
86	501(c)(7) organizations.-Enter: a Initiation fees and capital contributions included on line 12	86 a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86 b	N/A
87	501(c)(12) organizations.-Enter: a Gross income from members or shareholders	87 a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87 b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations.-Enter: Amount of tax paid during the year under: section 4911 <u>NONE</u> ; section 4912 <u>NONE</u> ; section 4955 <u>NONE</u>		
b	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	89 b	X
c	Enter: Amount of tax paid by the organization managers or disqualified persons during the year under section 4958		NONE
d	Enter: Amount of tax in 89c, above, reimbursed by the organization		NONE
90	List the states with which a copy of this return is filed <u></u>		
91	The books are in care of <u>NATL CTR-PHILANTHROPY&THE LAW</u> Telephone no. <u></u> Located at <u>110 W. 3RD STREET, RM 206A</u> ZIP + 4 <u>10012</u>		
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	N/A

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount		
93 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
94 Membership dues and assessments . . .						
95 Interest on savings and temporary cash investments .						
96 Dividends and interest from securities . .			14	17,985.		
97 Net rental income or (loss) from real estate:						
a debt-financed property						
b not debt-financed property						
98 Net rental income or (loss) from personal property						
99 Other investment income						
100 Gain or (loss) from sales of assets other than inventory			18	49,355.		
101 Net income or (loss) from special events						
102 Gross profit or (loss) from sales inventory						
103 Other revenue: a						
b MISCELLANEOUS INCOME			01	391.		
c _____						
d _____						
e _____						
104 Subtotal (add columns (B), (D), and (E)). .				67,731.		
105 Total (add line 104, columns (B), (D), and (E))						67,731.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 23.)

[illegible]

Name, address, and employer identification number of corporation or partnership	Percentage of ownership interest	Nature of business activities	Total income	End-of-year assets
	%			
	%			
	%			
	%			

Signature of officer Jill S. Manning Date 8/21/98 Type or print name and title Jill Manning
Executive Director

Preparer's Signature		Date	7/2/98	Check if	Preparer's SSN
Firm's name (or yours if self-employed) and address	KPMG PEAT MARWICK, LLP 345 PARK AVENUE NEW YORK, NY				

**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

See separate instructions.

OMB No. 1545-0047

1996

Department of the Treasury
Internal Revenue Service

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

Name of the organization

NATIONAL CENTER ON PHILANTHROPY AND THE LAW

Employer identification number

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.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

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

► **NONE**

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 professional services

► **NONE**

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990) 1996

Part III Statements About Activities

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?		X
If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____		
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:		
a Sales, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
If the answer to any question is "Yes," attach a detailed statement explaining the transactions.		
3 Does the organization make grants for scholarships, fellowships, student loans, etc.?	3	X
4 Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions on page 2.)		

Part IV Reason for Non-Private Foundation Status (See instructions on pages 2 through 4.)The organization 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** ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 4.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ 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 hospital's name, city, and state ► _____
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** ☒ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations 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)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions on page 4.)

(a) Name(s) of supported organization(s)	(b) Line number from above
NEW YORK UNIVERSITY	06

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions on page 4.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. **NOT APPLICABLE**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 1995	(b) 1994	(c) 1993	(d) 1992	(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					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24 NOT APPLICABLE.	26a	
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1992 through 1995 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts	26b	
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c	
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____	26d	
e Public support (line 26c minus line 26d total)	26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	%

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list to show the name of, and total amounts received in each year for each "disqualified person." Enter the sum of such amounts for each year: (1995) _____ (1994) _____ (1993) _____ (1992) _____ NOT APPLICABLE		
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (1995) _____ (1994) _____ (1993) _____ (1992) _____		
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	27c	
d Add: Line 27a total _____ and line 27b total _____	27d	
e Public support (line 27c total minus line 27d total)	27e	
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e).	27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1992 through 1995, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions on page 4.)		
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Part V Private School Questionnaire (See instructions on page 4.)(To be completed **ONLY** by schools that checked the box on line 6 in Part IV)**NOT APPLICABLE**

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; If "No," please explain. (If you need more space, attach a separate statement.)		
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "NO," attach an explanation		

JSA

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions on page 6.)(To be completed **ONLY** by an eligible organization that filed Form 5768)**NOT APPLICABLE**Check here ☐ **a** if the organization belongs to an affiliated group.Check here ☐ **b** if you checked "a" above and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) . . .	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying) . . .	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is -			
Not over \$500,000 20% of the amount on line 40			
Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000	41		
Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000			
Over \$1,500,000 but not over \$17,000,000 . \$225,000 plus 5% of the excess over \$1,500,000			
Over \$17,000,000 \$1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: if there is an amount on either line 43 or line 44, file Form 4720.**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 8.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 1996	(b) 1995	(c) 1994	(d) 1993	(e) Total
Lobbying nontaxable amount					
45					
Lobbying ceiling amount (150% of line 45(e))					
46					
47 Total lobbying expenditures					
Grassroots nontaxable amount					
48					
Grassroots ceiling amount (150% of line 48(e))					
49					
Grassroots lobbying expenditures					
50					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions on page 8.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
HONORARIUM	5,000.	5,000.	NONE	NONE
REPAIRS AND MAINTENANCE	2,119.	1,842.	107.	170.
LIBRARY SERVICES	13,360.	13,360.	NONE	NONE
STIPENDS	5,500.	5,500.	NONE	NONE
AWARDS	450.	450.	NONE	NONE
MESSENGER	1,953.	1,697.	99.	157.
MEMBERSHIPS	1,378.	1,378.	NONE	NONE
TOTALS	29,760.	29,227.	206.	327.

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
FORM 990, PART IV - INVESTMENTS - SECURITIES

13-3954405

DESCRIPTION

ENDING
BOOK VALUE

MUTUAL FUNDS

329,486.

TOTALS

329,486.

STATEMENT 4

NATIONAL CENTER ON PHILANTHROPY AND THE LAW
FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

13-3954405

Mr. John E. Craig, Jr.
Executive Vice President & Treasurer
The Commonwealth Fund
One East 75th Street
New York, NY 10021
(212) 606-3832

Professor Harvey P. Dale
New York University School of Law
D'Agostino Hall, Rm. 206A
110 W. Third Street
New York, NY 10012
(212) 998-6161

Professor Harvey J. Goldschmid
Columbia University School of Law
435 West 116th Street
New York, NY 10027
(212) 854-2654

Martin Lipton, Esq.
Wachtell, Lipton, Rosen & Katz
51 West 52nd Street, 31st Floor
New York, NY 10019
(212) 371-9200

S. Andrew Schaffer, Esq.
Senior Vice President and General Counsel
New York University
Office of Legal Counsel
70 Washington Square South
New York, NY 10012
(212) 998-2244

Professor John G. Simon
Yale Law School
127 Wall Street
New Haven, CT 06520
(203) 432-2698

Form 2758

(Rev. May 1995)

Department of the Treasury
Internal Revenue ServiceApplication for Extension of Time to File
Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148

▶ File a separate application for each return.

Please type or
print. File the
original and
one copy by
the due date
for filing your
return. (See
instructions on
the next page.)

Name

The National Center on Philanthropy and the Law

Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)

c/o Professor Jill Manny, Executive Director, D'Agostino Hall, 110 W. 3rd St., Rm 206A
City, town or post office, state, and ZIP code. For a foreign address, see instructions.
New York, NY 10012

Employer identification number

13-3954405

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trust must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

1) request an extension of time until July 15, 1998

☐ Form 706-GS(D)	☐ Form 990-T (401(a) or 408(a) trust)	☐ Form 1120-ND (4951 taxes)	☐ Form 8612
☐ Form 706-GS(T)	☐ Form 990-T (trust other than above)	☐ Form 3520-A	☐ Form 8613
☒ Form 990 or 990-EZ	☐ Form 1041 (estate) (see instructions)	☐ Form 4720	☐ Form 8725
☐ Form 990-BL	☐ Form 1041-A	☐ Form 5227	☐ Form 8804
☐ Form 990-PF	☐ Form 1042	☐ Form 6069	☐ Form 8831

If the organization does not have an office or place of business in the United States, check this box

2a For calendar year 19, or other tax year beginning September 1, 1996 and ending August 31, 1997

b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period3 Has an extension of time to file been previously granted for this tax year? ☒ Yes ☐ No

4 State in detail why you need the extension Additional time is necessary in order for us to prepare an accurate tax return.

5a If this form is for Form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions ... \$

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit ... \$

c Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD coupon if required. See instructions ... \$ 0.00

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature

Title C.P.A., As Authorized Agent

Date

4/10/98

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant-To Be Completed by the IRS

- ☐ We HAVE approved your application. Please attach this form to your return.
- ☐ We HAVENOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.
- ☐ We HAVENOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- ☐ We cannot consider your application because it was filed after the due date of the return for which an extension was requested.
- ☐ Other:

Director

By:

Date

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Please
Type
or
Print

Name

KPMG Peat Marwick, L.L.P. Attention: Dan Romano

Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)

345 Park Avenue, 28th Floor

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

New York, N.Y. 10154

For Paperwork Reduction Act Notice, see the next page

04/10/1998 02:44 PM

Form 2758 (Rev. 5-95)

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Form 2758

(Rev. May 1995)

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

OMB No. 1545-0148

Department of the Treasury
Internal Revenue Service

File a separate application for each return.

Please type or
print. File the
original and
one copy by
the due date
for filing your
return. (See
instructions on
the next page.)

Name

Employer identification number

The National Center on Philanthropy and the Law

13-3954405

Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)

c/o Pro. Jill Manny, Executive Director, D'Agostino Hall, 110 W.3rd Street, Rm.206A

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

New York, NY 10012

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trust must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

1 I request an extension of time until April 15, 1998

to file (check only one):

☐ Form 706-GS(D)☐ Form 990-T

(401(a) or 408(a) trust)

☐ Form 1120-ND

(4961 taxes)

☐ Form 8612☐ Form 706-GS(T)☐ Form 990-T

(trust other than above)

☐ Form 3520-A☐ Form 8613☒ Form 990 or 990-EZ☐ Form 1041

(estate) (see instructions)

☐ Form 4720☐ Form 8725☐ Form 990-BL☐ Form 1041-A☐ Form 5227☐ Form 8804☐ Form 990-PF☐ Form 1042☐ Form 6069☐ Form 8831

If the organization does not have an office or place of business in the United States, check this box

2a For calendar year 1996, or other tax year beginning September 1, 1996 and ending August 31, 1997

b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period3 Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

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5a If this form is for Form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720,

6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions

\$

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and

estimated tax payments made. Include any prior year overpayment allowed as a credit

\$

c Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD

coupon if required. See instructions

\$

0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature

Title CPA, As authorized agent

Date

1/12/98

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant - To Be Completed by the IRS

- ☐ We HAVE approved your application. Please attach this form to your return.
- ☐ We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.
- ☐ We HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- ☐ We cannot consider your application because it was filed after the due date of the return for which an extension was requested.
- ☐ Other:

Director

By:

EXTENSION APPROVED TO

Date

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Please
Type
or
Print

Name

KPMG Peat Marwick, LLP - Attention: Dan Romano

Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)

345 Park Avenue, 28th Floor

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

New York, N.Y. 10154

DEBORAH S. DECKER, DIRECTOR
ODEN SERVICE CENTER

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Form 2758 (Rev. 5-95)