### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Department of the Treasury Internal Revenue Service

<u>A</u> F	or th	e 200 <u>9</u>	cale	ndar year, or tax year beginning 01/01, 2009, and ending	06	5/30 <b>, 2</b> 0	009	
Во	heck if ap			C Name of organization HARVARD CLUB OF NEW YORK FOUNDATION	D Employer identific	cation num	nber	
	Addre		use IRS label or	Doing Business As	13-611742	1		
	7 ·		print or	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone number	er		
	┥	return	type. See	35 WEST 44TH STREET	(212) 840-6	5600		
$\vdash$	Termi		Specific	City or town, state or country, and ZIP + 4	1-1-1-1			
$\vdash$	Amen	1,	instruc- tions	NEW YORK, NY 10036	G Gross receipts \$		71	303.
$\vdash$	return Applic			ime and address of principal officer THOMAS H. MATTOX	H(a) Is this a group retu	um for	<del></del>	
_	pendi	ing			affiliates?	<b></b> -	Yes	X No
			- 1	EST 44TH STREET NEW YORK, NY 10036	H(b) Are all affiliates inc		Yes	No
<u>L</u>		empt stat		X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527	If "No," attach a list	t (see instru	ctions)	
<u></u>	Websi	te: ▶ N	1/A		H(c) Group exemption n			
K	Form o	of organiz	zation	X Corporation Trust Association Other ► L Year of forma	ition 1954 M State	of legal do	micile	NY_
Pa	Till	Sum	тагу					
Governance	2	TO F MEMB SCHO Check	OSTE ERS LARS this bo	be the organization's mission or most significant activities  CR SCIENTIFIC, LITERARY AND EDUCATIONAL INTERESTS A  OF THE HARVARD CLUB OF NEW YORK CITY AND TO PROVID  SHIPS FOR STUDENTS AT HARVARD UNIVERSITY.  If the organization discontinued its operations or disposed of more than 25%	DE 6 of its net assets	·		
•ඒ ග	3	Numbe	r of vo	oting members of the governing body (Part VI, line 1a)	3			11
Activities	4	Numbe	rofin	dependent voting members of the governing body (Part VI, line 1b)	4			11
₹				of employees (Part V, line 2a)	5			0
Ä	6	Total no	umber	of volunteers (estimate if necessary)	6			0
	7 a	Total gr	ross u	nrelated business revenue from Part VIII, column (C), line 12	7a			0.
	b	Net unr	elated	business taxable income from Form 990-T, line 34	7ь			0.
				RECEIVED	Prior Year	Cur	rent Ye	ar
Revenue	8	Contrib	utions	and grants (Part VIII, line 1h)	760,948.		65,	696.
	9	Program	m serv	nce revenue (Part VIII, line 2g)	0.			0.
94	10	_		2000 (Don) (III and	210,712.		8.	607.
ď				e (Part VIII) column (A) lines 5 6d 8c 9c 10c and 11c)	0.			0.
					971,660.		7.1	303.
	13	Create	ond o	- add lines 8 through 11 (must equal Rart VIII), column (A), line 12)	245,000.			
	13	Grants	and s	imilar amounts paid (Part IX, column (A), lines 13)			- 63,	444.
	14	Benefit	s paid	to or for members (Part IX, column (A), line 4)	0.			<u> </u>
98	15	Salarie	s, othe	er compensation, employee benefits (Part IX, column (A), lines 5-10)	0.		0.	
Expenses	16a	Profess	sional	fundraising fees (Part IX, column (A), line 11e)	0.			
쭚	Ь			sing expenses, Part IX, column (D), line 25) ▶				
_	17			es (Part IX, column (A), lines 11a-11d, 11f-24f)	54,221.			819.
	18	Total ex	xpense	es Add lines 13-17 (must equal Part IX, column (A), line 25)	299,221.		100,	263.
	19	Revenu	re less	expenses Subtract line 18 from line 12	672,439.		-25,	960.
Net Assets or Fund Balances					Beginning of Year	Enc	d of Yea	ar
sets	20	Total as	ssets (	Part X, line 16)	2,955,808.	3,	227,	528.
Ass	21	Total ha	abilitie	s (Part X, line 26)	150,000.		225,	000.
Ž,Š	22	Net ass	sets or	fund balances Subtract line 21 from line 20.	2,805,808.	3,	002,	
	rt II			e Block	<del></del>	<u>·</u>		
	ign ere	and be	ignatur ype or	es of perjury, i declare that i have examined this return, including accompanying schedules an is true, correct, and complete Declaration of preparer (other than officer) is based on all information of officer.  The first control of the control o	Date  Preparer's (see instru	parer has	any kno	wledge
Prep	oarer's	<del></del>		S. F. Sycc	<del>,                                    </del>	11.656	5500	
Use	Only	I if self-e	mploye	d) <u> </u>	<del> </del>	34-656		
	, th = 11	address	•		Phone no  2	212-77		. —
				s return with the preparer shown above? (see instructions)			es X	
ror	riva	LY MCI 8	anu Pa	ipelwolk neulicilon Act notice, see the separate instructions.*		For	m 990	(2009)

	orm 990 (2009)	13-6117421	Page 2
	Part   Statement of Program Service Accomplishments		
•	Briefly describe the organization's mission ATTACHMENT 2		
,			
:	Did the organization undertake any significant program se the prior Form 990 or 990-EZ?	ervices during the year which were not listed on	Yes X No
	If "Yes," describe these new services on Schedule O.  B Did the organization cease conducting, or make significant		
	4		Yes X No
1	Describe the exempt purpose achievements for each of the of Section 501(c)(3) and 501(c)(4) organizations and section 49 allocations to others, the total expenses, and revenue, if any,	947(a)(1) trusts are required to report the amount of grai	
la	14a (Code. ) (Expenses \$ 83,444. Including SCHOLARSHIPS TO STUDENTS ATTENDING HARV.		)
-			
4b	4b (Code) (Expenses \$including	grants of \$) (Revenue \$	)
<u>.</u>	Ic (Code) (Expenses \$ including g	rearts of \$ \\/Percenue \$	
. •		) (Nevende \$	, ,
	4d Other program services. (Describe in Schedule O )		
	(Expenses \$ Including grants of \$	) (Revenue \$	
	te Total program service expenses ► 83, 444.	) (Interestine \$	

rail	Checklist of Required Schedules		T	<del></del>
•	to the expensation described in postum E04/5//2) or 4047/5//4) (ather them a secret foundation) 2 (6 m/s II)		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		١,,	
_	complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>x</u>	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		١.,
	candidates for public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			ļ
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part N	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes," complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		**	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		j	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			[
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_ X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_ X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

Part	IV Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to question 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II .	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part N	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part N	28c	_	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			١
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	١	х	
	III, IV, and V, line 1	34	^	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	١		v
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			v
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			v
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		х	
	19? Note. All Form 990 filers are required to complete Schedule O			(2022)
		rom	990	(2009)

rai	Statements Regarding Other IRS Fillings and Tax Compliance			
•			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			'
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			ļ
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			<del>                                     </del>
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		x
h	If "Yes," enter the name of the foreign country: ▶	70		<del>  ^</del>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts.			
<b>5</b> a		F -		,i
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		$\frac{x}{x}$
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		<del>  ^</del> -
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
٠.	Prohibited Tax Shelter Transaction?	5c		⊢—
бa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		.,
	organization solicit any contributions that were not tax deductible?	_6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u> </u>
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ļ
	and services provided to the payor?	7 a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			!
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
~	amounts due or received from them )			l
12=	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	ıza		
	12b	<u></u>		

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

Section A. Governing Body and Management

Seci	ion A. Governing Body and Management			
			Yes	No
а	Enter the number of voting members of the governing body			
1b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			.,
	any other officer, director, trustee, or key employee?	2_		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3_		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6_	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
<u>Reve</u>	enue Code.)			
		,	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	Х	
11A	Desribe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure	, , , ,		
17	List the states with which a copy of this Form 990 is required to be filed ▶ NY,			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3):			
10	available for public inspection. Indicate how you make these available. Check all that apply.	o oray)		
	Own website Another's website X Upon request			
10				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter-	est		
20	policy, and financial statements available to the public.	_		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► SCOTT GRODNICK 35 WEST 44TH STREET NEW YORK, NY 10036	ie		
	212-840-6600			
JSA			200	<del></del>

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)	_		(0	-			(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director	Institutional trustee	hec Officer	™ Key employee	Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
THOMAS H. MATTOX	2 00	T								
PRESIDENT	3.00	Х		Х			<u> </u>	0.	0	0
YASMIN MOSSAVAR-RAHMANI VICE PRESIDENT	3.00	x		х				0.	0.	. 0.
TRUDA C. JEWETT										
SECRETARY	3.00	Х	$\sqcup$	Х				0.	0.	0
MICHAEL D. ROBINSON TREASURER	3.00	x		х				0.	0	. 0.
MICHAEL G. YAMIN		<b></b>								
DIRECTOR	3.00	х						0.	0.	. 0
JOAN MORTHLAND HUTCHINS DIRECTOR	3.00	х						0.	0.	. 0
E. THEODORE LEWIS		<del></del>		-			<u> </u>			
DIRECTOR	3.00	Х						0.	0	. 0
JOHN L. CASSIS DIRECTOR	3.00	x						0.	0.	. 0
TANYA RYK FRIEDMAN										
DIRECTOR	3.00	Х					L	0.	0	0
KAREN H. KIM DIRECTOR	3.00	x						0.	0	0
JOHN J. MOON										
DIRECTOR	3.00	Х						0.	0.	0
							-			

13-6117421

Part VII Section A. Officers, Directors, Tru	stees, Ke	y Em	plo	ye	es,	and I	lig	hest Compensat	ed Employe	es (co	ntınue	d)
· (A)	(B)			•	C)			(D)	(E)			(F)
Name and title	Average hours per week	ndividual trustee	Institutional trustee	Officer	Key employee	a Highest compensated amployee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensati from relate organizatior (W-2/1099-Mi	on d is	am- comp fro orga and	imated ount of other sensation om the inization related nizations
											_	
											_	
										1	_	
									_		_	
									<u> </u>			
1b Total							<b>&gt;</b>			0.		0
2 Total number of individuals (including but not reportable compensation from the organization		hose I		d al	bov	e) who	о ге	eceived more than	\$100,000 in			
								-				Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedul	er, directo	or or	tru	iste	e, I	key e	emp	oloyee, or highest	t compensate	ed	3	x
4 For any individual listed on line 1a, is the												
the organization and related organizations individual	greater th	an \$	150	00,0	0?	If "Y	es,	" complete Sched			4	X
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	e or accr complete S	ue co Sched	ule .	ens J fo	satio r su	on fro <i>ch pei</i>	om rsoi	any unrelated o	rganization f	or •	5	X
Section B. Independent Contractors						_						
Complete this table for your five highest compensation from the organization	compensat	ed in	dep	eno	dent	cont	trac	ctors that received	d more than	\$100	0,000	of
(A) (B) Name and business address Description of services						vices	Co	(C) mpens	ation			
NONE							F					
							‡					
							+					
Total number of independent contractors (in more than \$100,000 in compensation from the compensation from	icluding bu	ut not	l lin	nite	d to	thos	se I	listed above) who	received			
104									<u> </u>		F	990 (2000

Pai	rt VIII	Statement of Revenue		13-6117421		1 age 0
•			(A) , Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts its	1a	Federated campaigns 1a				
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b				
fts, am	c	Fundraising events 1c				
igi ja	d	Related organizations 1d 15,826.				1
sin	e	Government grants (contributions) 1e				1
but	f	All other contributions, gifts, grants,				
d of	_ ا	and similar amounts not included above				į į
ပို့ န	9   h	Noncash contributions included in lines 1a-1f \$  Total. Add lines 1a-1f	65,696.			İ
Jue		Business Code				
ever	2a					
DŽ.	ь					
Ž	c					
Se	d					<del></del>
Гап	e					
Program Service Revenue	f g	All other program service revenue	0.			
	3	Investment income (including dividends, interest, and				
		other similar amounts)	162			162
	4	Income from investment of tax-exempt bond proceeds ▶	0.			
	5	Royalties · · · · · · · · · · · · · · · · · · ·	0.			
		(ı) Real (ıı) Personal		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		L. C.
	6a	Gross Rents				;
	b	Less rental expenses				Li
	c	Rental income or (loss)		teral merekanan manan se		
	4	Net rental income or (loss)	0			
	7 a	Gross amount from sales of				
	ь	assets other than inventory  Less: cost or other basis				
	"	and sales expenses				ŧ
	ء ا	Gain or (loss)				E
	d	Net gain or (loss)	8,445.			8,445
e	8a	Gross income from fundraising				1
en en		events (not including \$				
Š		of contributions reported on line 1c)				. with
er_	١.	See Part IV, line 18				<b>*</b>
Other Revenue	b c	Less direct expenses				<del> </del>
J	l	Gross income from gaming activities See Part IV, line 19				
	ь	Less direct expenses b				
	С	Net income or (loss) from gaming activities ▶	0			
	10a	Gross sales of inventory, less returns and allowances				;
	b	Less cost of goods sold b				
	<u> </u>	Net income or (loss) from sales of inventory	0			<u> </u>
	<b>_</b>	Miscellaneous Revenue Business Code				<del> </del>
	11a					
	b					<del> </del>
	d	All other revenue				<del> </del>
	_	Total. Add lines 11a-11d	0.			,
	12	Total Revenue. See instructions · · · · ·	74,303			8,607.

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 2.1	0.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	83,444.	83,444.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	0			
	U.S. See Part IV, lines 15 and 16	0.			
4 5	Benefits paid to or for members	0.			
3	trustees, and key employees	0.			
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$ ) and	_			
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	0.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0.			
9	Other employee benefits	0.	- <del></del>		
10	Payroll taxes	0.		<del></del>	<del></del>
11	Fees for services (non-employees)				<del></del>
а	Management	0.			
	Legal	0.			
С	Accounting	16,819.		16,819.	
d	Lobbying	0.			
e	Professional fundraising services See Part IV, line 17	0.			<del></del>
f	Investment management fees	0.			
9 12	Other	0.			<del></del>
13	Office expenses	0.	<del></del>		
14	Information technology	0.			
15	Royalties	Ö.			
16	Occupancy	0.			
17	Travel	0.			
18	Payments of travel or entertainment expenses	0.			
19	for any federal, state, or local public officials Conferences, conventions, and meetings	0.			
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance ,	0.			
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
а					
b					
C					
d					
е				-	
	All other expenses	100,263.	83,444.	16,819.	
25 26	Total functional expenses. Add lines 1 through 24f  Joint Costs. Check here ▶ If following	100,203.	03, 114.	10,019.	
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
JSA	fundraising solicitation			<u>-</u>	

PAGE 10

Pa	rt X	Balance Sheet			
_	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	34,397.	1	33,477.
	2	Savings and temporary cash investments	75,853.	2	90,067.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of		!	
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
w		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or 10a		' I	
		other basis. Complete Part VI of Schedule D			
	ь	Less accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11	2,740,082.	12	2,962,763.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	105,476.	15	141,221.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,955,808.	16	3,227,528.
	17	Accounts payable and accrued expenses	0.	17	0.
	18	Grants payable	150,000.	18	225,000.
	19	Deferred revenue		19	<u> </u>
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
ap		employees, highest compensated employees, and disqualified			
		persons. Complete Part II of Schedule L	<u></u>	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
_	26	Total liabilities. Add lines 17 through 25	150,000.	26	225,000.
ses		Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			
au	27	Unrestricted net assets	2,397,349.	27	2,117,129.
Bal	28	Temporarily restricted net assets	205,234.	28	682,174.
5	29	Permanently restricted net assets	203,225.	29	203,225.
or Fund Baland		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<del></del>
ĕ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se	33	Total net assets or fund balances	2,805,808.	33	3,002,528.
	34	Total liabilities and net assets/fund balances	2,955,808.	34	3,227,528.

### **SCHEDULE A** (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

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

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

OMB No 1545-0047 Open to Public

Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number HARVARD CLUB OF NEW YORK FOUNDATION 13-6117421 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) Х An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type II c Type III - Functionally integrated Type IIi - Other d [ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations, described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes and (iii) below, the governing body of the supported organization? 11q(ı) (ii) A family member of a person described in (i) above? . . . . . . 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (i) Name of supported (iv) is the organization (ii) EIN (iii) Type of organization (v) Did you notify (vi) is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? US? Yes Nο Yes No Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Total

Sched	lule A (Form 990 or 990-EZ) 2009			13	-6117421		Page <b>2</b>
Par	Support Schedule for Or (Complete only if you check	ganizations D ked the box or	escribed in S	Sections 170( 8 of Part I.)	b)(1)(A)(iv) aı	nd 170(b)(1)(	A)(vi)
Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f)  Public support. Subtract line 5 from line 4						
	tion B. Total Support	L	I	L		l	<u> </u>
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here	· · · · · · · · · · · ·	<u></u>	nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2009 (li	ne 6, column (f	) divided by line	11, column (f))	• • • • • • •	14	<u>%</u>
	Public support percentage from 2008					15	<u> </u>
16a	331/3% support test - 2009. If the o						
h	this box and stop here. The organization 331/3% support test - 2008. If the organization is support test - 2008.						
	check this box and <b>stop here</b> . The org						
17a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me						
	Part IV how the organization meets						
	organization			_	-	-	
b	10%-facts-and-circumstances test -						
	15 is 10% or more, and if the orga	anization meets	s the "facts-an	d-circumstances	" test, check t	his box and st	top here.
	Explain in Part IV how the organization						-
	supported organization						▶ 🔲
18	Private foundation. If the organization	on did not chec	k a box on lin	e 13, 16a, 16t	o, 17a, or 17b,	check this box	and see
	instructions	<u> </u>	<u></u>				990 or 990-EZ) 2009

### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if	you checked	the box on I	ine 9 of Part I.)
-------------------	-------------	--------------	-------------------

Sec	tion A. Public Support						
	alendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include						
	any "unusual grants ")	222,722	383,226	221,867	760,948	65,696	1,654,459.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an	_					
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's		-				
	benefit and either paid to or expended on						
	ıts behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	222,722	383,226.	221,867	760,948	65,696	1,654,459.
	Amounts included on lines 1, 2, and 3						
• -	received from disqualified persons	23,209	172,190.	25,638	485,426.	15,826	722,289.
b	Amounts included on lines 2 and 3			<del></del>			
	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	\$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b	23,209	172,190.	25,638	485,426	15,826	722,289.
8	Public support (Subtract line 7c from		· · · · · · · · · · · · · · · · · · ·			.,	
	line 6)						932,170
Sec	tion B. Total Support		-				
C	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	222,722	383,226	221,867	760,948.	65,696	1,654,459
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources	92,440	38,334	130,741	187,540.	162	449,217
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	İ					
С	Add lines 10a and 10b	92,440	38,334	130,741	187,540.	162	449,217
11	Net income from unrelated business					'	
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or						_
	loss from the sale of capital assets			i			
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	315,162	421,560	352,608	948,488.	65,858	2,103,676.
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	s a section 501(	c)(3)
	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8	, column (f) dıvıde	ed by line 13, colur	nn (f))		15	44.31%
16	Public support percentage from 2008 Sche	edule A, Part III, lin	ne 15	<u></u>	<u>.</u>	16	45.58%
Sec	tion D. Computation of Investmen	nt Income Per	centage				
17	Investment income percentage for 2009 (II	ne 10c, column (	f) divided by line 1	3, column (f))		17	21.35%
18	Investment income percentage from 2008					18	22.74%
19a	33 1/3% support tests - 2009. If the o					e than 331/3%, a	and line
	17 is not more than 33 1/3%, check the						
b	33 1/3% support tests - 2008. If the org	anization did not	check a box on	line 14 or line 19	9a, and line 16 is	more than 331/3	3 %, and
	line 18 is not more than 331/3%, check	this box and st	op here The org	ganization qualific	es as a publicly	supported organi	zation 🕨 🔲
20	Private foundation. If the organization				· · · · · · · · · · · · · · · · · · ·		

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

HAF	RVARD CLUB OF NEW YORK FOUNDATION		13-6117421
Pa	Organizations Maintaining Donor Adv the organization answered "Yes" to Fo	rised Funds or Other Similar Funds rm 990, Part IV, line 6.	or Accounts. Complete if
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	advisors in writing that the assets held in	donor advised
-	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a		
_	used only for charitable purposes and not for the t		
	purpose conferring impermissible private benefit?		
Pai	til Conservation Easements. Complete it	f the organization answered "Yes" to	Form 990 Part IV line 7
1	Purpose(s) of conservation easements held by the		10 000, 1 0
•	Preservation of land for public use (e.g., recre	· · · · · · · · · · · · · · · · · · ·	n of an historically important land area
	Protection of natural habitat		n of a certified historic structure
	Preservation of open space	1 Teservation	to a certified historic structure
2	Complete lines 2a through 2d if the organization h	eld a gualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year	a qualifica conservation contribution	THE TOTAL OF A CONSELVATION
	,,,,,		Held at the End of the Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easement		
c	Number of conservation easements on a certified		
d	Number of conservation easements included in (c		
3	Number of conservation easements modified, tran	•	
	the tax year ▶	and the state of t	mated by the organization during
1	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy regard		
	violations, and enforcement of the conservation ea		
5	Staff and volunteer hours devoted to monitoring, ii		
	<b>&gt;</b>	and the same of th	accomenia acrang and year
7	Amount of expenses incurred in monitoring, inspec	cting, and enforcing conservation easem	nents during the year
	<b>▶</b> \$	<b>3</b> ,	<b>g. ,</b> .
В	Does each conservation easement reported on lin	ne 2(d) above satisfy the requirements of	section
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?		
9	In Part XIV, describe how the organization reports		
	balance sheet, and include, if applicable, the text		•
	the organization's accounting for conservation eas	sements	
Pa	rt III Organizations Maintaining Collections	s of Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.	
1 a	If the organization elected, as permitted under S	SFAS 116, not to report in its revenue	statement and balance sheet works of
	art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its f	eld for public exhibition, education, or re	esearch in furtherance of public service
b	•		
D	If the organization elected, as permitted under S historical treasures, or other similar assets held provide the following amounts relating to these ite	for public exhibition, education, or res	search in furtherance of public service
	(i) Revenues included in Form 990, Part VIII, line	1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a		
	following amounts required to be reported under S		gain, provide the
а	Revenues included in Form 990, Part VIII, line 1.		<b>⊳</b> \$
b	Assets included in Form 990, Part X		·
			· · · · · · · · · · · · · · · · · · ·

	<u>.</u>								
Sched	lule D <sub>4</sub> (Form 990) 2009				13-6	5117421			Page 2
Par	t III Organizations Maintaini	ng Collection	ns of Art, Histo	rical	Treasures, o	Other Similar	Assets (conti	nued)	
3	Using the organization's acquisition collection items (check all that appli		nd other records	s, ched	ck any of the fo	llowing that are a	significant use	of its	
а	Public exhibition	• • • • • • • • • • • • • • • • • • • •	d [	٦ :	Loan or exchai	nge programs			
b	Scholarly research		e		Other	.go programme			
c	Preservation for future get	nerations	, F						
4	Provide a description of the organiz		ions and explain	how t	hev further the	organization's ex	emnt nurnose	ın	
•	Part XIV		iono ana explain	11044 1	ney further the	organization's ex	empt purpose		
5	During the year, did the organization	n solicit or rec	eive donations d	of art	historical treas	ures or other simi	lar		
•	assets to be sold to raise funds rath							res [	No
Par		rrangements	. Complete if t	he or	ganızation an				
	Is the organization an agent, trusted included on Form 990, Part X?							res [	No
b	If "Yes," explain the arrangement in	Part XIV and	complete the following	lowing	table	·			
						A	\mount		
	Beginning balance				<u> </u>				
	Additions during the year								
	Distributions during the year								
	Ending balance						<del></del>		
	Did the organization include an ame		990, Part X, line	21?	· · · · · · · · ·		۱ 🗀 ۰۰۰۰	es [	No
	if "Yes," explain the arrangement in				V n	000 5 104 11	-10		
Par	t V Endowment Funds. Com								
1a	Beginning of year balance	(a) Current Yea	<del></del>		(c) Two years b	ack (d) Three ye	ars back (e)	rour yea	ars back
	Contributions	2,740,08				<del></del>			
	Net investment earnings, gains,	<del></del>	475,	, 000	:				
·	and losses								
А	Grants or scholarships	222,68							
	Other expenditures for facilities .		150,	,000					
E	and programs								
•	Administrative expenses		+						
,	End of year balance								
2		2,962,76			<u> </u>				
a	Provide the estimated percentage of Board designated or quasi-endowm	-		•					
b	Permanent endowment	%	76						
		<del></del> ′°							
		,	f Ab	-44	b-l-l	d a d d f	- Al		
Ja	Are there endowment funds not in	the possessio	n or the organiza	ation t	nat are neid ar	ia administered for	tne	<u></u>	1
	organization by						<u> </u>	Ye	
	(i) unrelated organizations						3a		_
<b>.</b>	(ii) related organizations							(ii)	Х
_	If "Yes" to 3a(ii), are the related org					• • • • • • • • • • • • • • • • • • • •	3	b	l
4	Describe in Part XIV the intended u					line 10			
Par			<del></del>	T					
	Description of investment	(a)	Cost or other basis (investment)		) Cost or other basis (other)	(c) Accumulated depreciation	( <b>d</b> ) Boo	ık value	

Schedule D (Form 990) 2009

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).). . . . . . ▶

Part VII Investments - Other Securities. See Fo	orm 990, Part X, line	e 12.	
(a) Description of security or category     (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
Financial derivatives			
Closely-held equity interests	2,962,763.	FMV	
Total (Column (b) must equal Form 990, Part X, col (B) line 12 )	2,962,763.		
Part VIII Investments - Program Related. See F			
(a) Description of investment type	(b) Book value	(c) Method of valuation  Cost or end-of-year marke	n. t value
			<del></del>
Part IX Other Assets. See Form 990, Part X, li	no 15		
	Description		(b) Book value
			(-)
· · · · · · · · · · · · · · · · · · ·			
			<del></del>
	···		<del></del>
Part X Other Liabilities. See Form 990, Part X		· · · · · · · · · · · · · · · · · · ·	<del></del>
1. (a) Description of liability	(b) Amount	•	
Federal income taxes	(b) Amount		
			I
Total (Column (b) must equal Form 990, Part X, col (B) line 25)			

2. FIN 48 Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedul	e D <sub>a</sub> (Form 990) 2009 13-6117421		Page 4
Part 2	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemen	nts	
1	Total revenue (Form 990, Part Viii, column (A), line 12)		74,303.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	100,263.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	B	-25,960.
4	Net unrealized gains (losses) on investments		222,680.
5	Donated services and use of facilities	5	
6	Investment expenses	<u> </u>	
7	Prior period adjustments	<u> </u>	
8	Other (Describe in Part XIV )	<u> </u>	
9	Total adjustments (net). Add lines 4 through 8		222,680.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		196,720.
Part .		" -	
1	Total revenue, gains, and other support per audited financial statements	1	296,983.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
a	Net unrealized gains on investments	1 1	
b	Donated services and use of facilities	4	
	Recoveries of prior year grants	4	
d	Other (Describe in Part XIV.)	┦ <u>.</u> │	222 600
	Add lines 2a through 2d	2e	222,680. 74,303.
3	Subtract line 2e from line 1	3	74,303.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b		
a b	Other (Describe in Part XIV.)	-{	
		4c	
5	Add lines 4a and 4b		74,303.
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu		, 1, 303.
1	Total expanses and leases per guided financial statements	1	100,263.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	-	
	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	1	
С	Other losses 2c	1	
d	Other (Describe in Part XIV )	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	100,263.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)	]	
С	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	100,263.
Part 2	XIV Supplemental Information		
and 2b	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part ; Part V, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also rt to provide any additional information		
SCHE	DULE D, PART V, LINE 4		
HARV	ARD CLUB OF NEW YORK FOUNDATION'S ENDOWMENT FUND IS TO BE USED FOR		
SCHO:	LARSHIPS TO HARVARD UNIVERSITY STUDENTS.		
	·		

Part XIV Supplemental Information (continued)

# SCHEDULE I (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service	ŏ	Complete if the	organization	n answered "Yes" to F ► Attach to Form 990.	the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	line 21 or 22.		Open to Public Inspection
Name of the organization							Employer identification number	n number
HARVARD CLUB OF	OF NEW YORK FOUNDATION	ATION					13-6117421	
Part   General Inf	General Information on Grants and Assistance	ınd Assistan	eo					
1 Does the organiza	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	substantiate	the amount of	the grants or assist	tance, the grantees'	eligibility for the grants		[
the selection criter	the selection criteria used to award the grants or assis	ants or assistar	tance?					X Yes No
2 Describe in Part IN	Describe in Part IV the organization's procedures for		onitoring the u	ğ	the United States.		1	
Part II Grants and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to	Governme	nts and Orga	nizations in the U	nited States. Com	plete if the organiza	ation answered "Ye	s" to
Form 990, Part IV and	Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	ny recipient 90) if additior	nt that received more ional space is needed	d more than \$5,000 needed	00. Check this box ii	f no one recipient r	eceived more than	\$5,000. Use
1 (a) Name and addi	(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash gran	(d) Amount of cash grant (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
								ų.
		-						
2 Enter total number 3 Enter total number	Enter total number of section 501(c)(3) and governm Enter total number of other organizations	d government	ent organizations					
For Privacy Act and P	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	t Notice, see	the Instructio	ns for Form 990.			Schec	Schedule I (Form 990) 2009
JSA								

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PAGE 24

Schedule I	Schedule I (Form 990) 2009	Page 2
Part III	Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	
	Use Part IV and Schedule 1-1 (Form 990) if additional space is needed.	

:	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSH1	SCHOLARSHIPS TO HARVARD UNIVERSITY STUDENTS	20	83,444			
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	te this part to	provide the info	ormation required	d in Part I, line 2, and any	other additional information.

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# SCHEDULE O (Form 990)

### **Supplemental Information to Form 990**

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

▶ Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HARVARD CLUB OF NEW YORK FOUNDATION

Employer identification number 13-6117421

ATTACHMENT 1

FORM 990, PART VI, QUESTION 6

BOARD OF MANAGERS OF THE HARVARD CLUB OF NEW YORK CITY

FORM 990, PART VI, QUESTION 7A

BOARD OF MANAGERS OF THE HARVARD CLUB OF NEW YORK CITY

FORM 990, PART VI, QUESTION 11A

A DRAFT OF THE FEDERAL FORM 990 RETURN IS SENT TO BOARD MEMBERS FOR REVIEW.

FORM 990, PART VI, QUESTION 12C

THE CFO MAKES A REPORT TO THE BOARD YEARLY. ANY CONFLICTS ARE THEN RESOLVED BY THE BOARD.

FORM 990, PART VI, QUESTION 19

THE GOVERNING DOCUMENTS AND THE FEDERAL FORM 990 ARE AVAILABLE UPON REQUEST AT THE FOUNDATION OFFICES.

ATTACHMENT 2

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO FOSTER SCIENTIFIC, LITERARY AND EDUCATIONAL INTERESTS AMONG
MEMBERS OF THE HARVARD CLUB OF NEW YORK CITY, TO PROVIDE SCHOLARSHIPS
FOR STUDENTS AT HARVARD UNIVERSITY AND OTHERWISE TO ADVANCE THE

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Schedule O (Form 990) 2009

Page 2

Name of the organization

HARVARD CLUB OF NEW YORK FOUNDATION

Employer identification number 13-6117421

ATTACHMENT 2 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

INTERESTS AND PROMOTE THE WELFARE OF HARVARD UNIVERSITY.

# SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

Employer identification number

13-6117421

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

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

HARVARD CLUB OF NEW YORK FOUNDATION

Name of the organization Department of the Treasury

Part I

Internal Revenue Service

(f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (e) End-of-year assets (d) Total income (c)
Legal domicile (state
or foreign country) (b) Primary activity (a)Name, address, and EIN of disregarded entity Part II

(f) Direct controlling entity N/A (e)
Public chanty status
(if section 501(c)(3)) (d) Exempt Code section 501(C)(7) (c)
Legal domicile (state
or foreign country) ΝY SOCIAL CLUB (b) Primary activity 13-0827620 10036 L N N (a)
Name, address, and EIN of related organization NEW YORK, HARVARD CLUB OF NEW YORK CITY 35 WEST 44TH STREET WEST

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Schedule R (Form 990) 2009

(j) General or managing partner? Yes No Schedule R (Form 990) 2009 (h) Percentage ownership (I)
Code V-UBI
amount in box 20 of
Schedule K-1
(Form 1065) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (g) Share of end-of-year assets Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) (h) Disproportorale elecatora? ŝ Yes (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp,
or trust) (f) Share of total income (d)
Direct controlling
entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (c)
Legal domicile
(state or
foreign country) (d) Direct controlling entity (b) Primary activity (c)
Legal
domicile
(state or
foreign (b) Primary activity (a)Name, address, and EIN of related organization (a)
Name, address, and EIN of related organization Part III Part IV

× ŝ Schedule R (Form 990) 2009 Yes × Amount involved If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. E <del>a</del> **1** 79 <u>+</u> = 무 10 **1**p 19 Purchase of assets from other organization(s)............... Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.) (b)
Transaction type (a-r) During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity................... Performance of services or membership or fundraising solicitations for other organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. (a)
Name of other organization Other transfer of cash or property from other organization(s) Part V E c ٥ م م σ **Б**... <u>.\_ ×</u> \_ σ . 3 **1** Ξ ପ୍ର ଉ 9 7

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# Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.) Part VI

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

	3		. 69		6)	(0)	É
(e) Name, address, and EIN of entity	(v) Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3)	Share of end-of-year assets	Disproportionate	Code V-UBI amount in box 20 of Schedule K-1	General or managing partner?
			Yes No		Yes No	(Form 1065)	Yes No
							-
			-				<u> </u>
					-		
						Schedule R (Form 990) 2009	990) 2009