	_		Return of Organization Exempt Fro	m Inco	ome Tax	OMB No. 1545-0047
Forr	n g	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod			2020
		••	Do not enter social security numbers on this form as it			Open to Public
Depa Interr	rtment al Reve	of the Treasury enue Service	► Go to www.irs.gov/Form990 for instructions and the	-	-	Inspection
AF	or th	e 2020 calenda	ar year, or tax year beginning $JUL \ 1$, $\ 2020$ and ending	ng JUN	30, 2021	
	heck if		organization	D	Employer identifi	cation number
а	pplicab	PURC	HASE COLLEGE FOUNDATION, INC.			
	Addr	ge C/O	SUNY PURCHASE			
	Name Name	ge Doing bu	usiness as		23-70666	16
	Initia	Number	and street (or P.O. box if mail is not delivered to street address) Roon	m/suite E	Telephone numbe	
	Final		ANDERSON HILL ROAD		914-251-	
	termi ated	City or to	own, state or province, country, and ZIP or foreign postal code	G	Gross receipts \$	239,729,206.
	Amer returr	PURC	HASE, NY 10577	H(a	 Is this a group re 	
	Appli dion pend		nd address of principal officer: LUCILLE WERLINICH		for subordinates	
	-	SAME .	AS C ABOVE		Are all subordinates in	Included? Yes No
			X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions
		ite:►N/A) Group exemptio	
			X Corporation Trust Association Other ▶ I	L Year of for	mation: 1969 N	A State of legal domicile: NY
Pa	art I	Summary				
é	1		e the organization's mission or most significant activities:			
anc			HE NOT-FOR-PROFIT LAWS OF THE STATE (
Governance	2	Check this bo				sets.
Š	3		ing members of the governing body (Part VI, line 1a)			16
	4		ependent voting members of the governing body (Part VI, line 1b)			0
ties	5		of individuals employed in calendar year 2020 (Part V, line 2a)			17
Activities &	6		of volunteers (estimate if necessary)		_	0.
Ac			d business revenue from Part VIII, column (C), line 12 business taxable income from Form 990-T, Part I, line 11			0.
		Net unrelated	business taxable income from Form 990-1, Part I, line 11		Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)	1	,385,211.	2,097,359.
Jue	9		ce revenue (Part VIII, line 2g)	1	,597,159.	188,698.
Revenue	10	•	come (Part VIII, column (A), lines 3, 4, and 7d)		,195,695.	13,455,211.
Å	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5	,178,065.	15,741,268.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	2	,006,769.	1,692,146.
	14		o or for members (Part IX, column (A), line 4)		0.	0.
ŷ	15	•	compensation, employee benefits (Part IX, column (A), lines 5-10)	1	,919,491.	1,419,647.
Jse	16a		undraising fees (Part IX, column (A), line 11e)		0.	0.
Expense	b		ng expenses (Part IX, column (D), line 25)			
ŵ	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		,460,475.	1,764,831.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		,386,735.	4,876,624.
	19	Revenue less	expenses. Subtract line 18 from line 12	2	<u>,208,670.</u>	10,864,644.
Net Assets or Fund Balances				Beginni	ng of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)	. 80	,455,472.	108,902,427.
t As	21		(Part X, line 26)		,959,096.	14,562,071.
ING	22		fund balances. Subtract line 21 from line 20	77	,496,376.	94,340,356.
	art II	Signature				
			declare that I have examined this return, including accompanying schedules and s		-	knowledge and belief, it is
true,	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which pr	reparer has a	ny knowledge.	

Sign	Signature of officer		Date	
Here	LUCILLE WERLINICH, BOA	RD CHAIR		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	ARIEL F AMMIRATO	ARIEL F AMMIRATO	02/22/22	
Preparer	Firm's name 🕨 BONADIO & CO., L	LP	Firm'	s EIN ▶ 16-1131146
Use Only	Firm's address 🖕 6 WEMBLEY CT			
	ALBANY, NY 12205		Phon	eno.(518) 464-4080
May the If	RS discuss this return with the preparer shown abo	ove? See instructions		X Yes No
032001 12-2	3-20 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2020)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2020) C/O SUNY PURCHASE 23-7066616 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE FOUNDATION WAS INCORPORATED UNDER THE NOT-FOR-PROFIT LAWS OF THE
	STATE OF NEW YORK FOR THE PROMOTION OF LITERATURE, HISTORY, VISUAL AND
	PERFORMING ARTS, SCIENCE AND OTHER DEPARTMENTS OF EDUCATION AT THE
	STATE UNIVERSITY OF NEW YORK AT PURCHASE.
	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
	(Code:) (Expenses \$ 816,705. including grants of \$) (Revenue \$ 12,349.
	THE PERFORMING ARTS CENTER, A FOUR THEATER COMPLEX AT PURCHASE COLLEGE
	IS THE MAJOR PROFESSIONAL, NOT-FOR-PROFIT ARTS PRESENTER IN
	SOUTHEASTERN NEW YORK-SOUTHWESTERN CONNECTICUT REGION. PRESENTATIONS
	INCLUDE PROFESSIONAL ARTISTS, SPECIAL PROGRAMS FOR K-12, VARIOUS
	SPECIAL EVENTS AND PRESENTATIONS BY PURCHASE COLLEGE CONSERVATORIES OF
	MUSIC, DANCE AND THEATRE. WHILE THE PAC HAS BEEN CLOSED TO THE PUBLIC
	SINCE MARCH 2020 DUE TO THE COVID-19 PANDEMIC, THE PAC CONTINUES TO
	OPERATE AS A SAFE LEARNING SPACE FOR PURCHASE COLLEGE STUDENTS AND A
	RESOURCE FOR EDUCATORS WHILE PRESENTING A BROAD RANGE OF VIRTUAL
	PROGRAMMING FOR THE COMMUNITY THAT INSPIRES, ENGAGES, AND SPARKS
	CRITICAL CONVERSATIONS.
	FUNDS COME FROM THE GENEROUS CONTRIBUTIONS OF DONORS TO THE FOUNDATION. THESE DONORS ARE INDIVIDUALS, FAMILIES, FOUNDATIONS AND CORORATIONS. DURING THE 2020-2021 ACADEMIC YEAR, APPROXIMATELY 69.8% OF THE STUDENTS RECEIVED FINANCIAL AID.
4c	(Code:) (Expenses \$ 554,176. including grants of \$) (Revenue \$ 8,012.
	THE NEUBERGER MUSEUM OF ART IS THE PREMIER MUSEUM OF MODERN, CONTEMPORARY AND AFRICAN ART IN WESTCHESTER AND FAIRFIELD COUNTIES. A
	TEACHING MUSEUM, THE NEUBERGER PROMOTES THE APPRECIATION AND ENJOYMENT
	OF THE VISUAL ARTS AS INSEPARABLE FROM AN UNDERSTANDING OF THEIR PLACE
	IN CULTURAL AND INTELLECTUAL HISTORY AND THEIR RELEVANCE TO
	CONTEMPORARY SOCIAL LIFE. AS AN INTERGRAL PART OF PURCHASE COLLEGE AND
	A VITAL CENTER OF THE COMMUNITY ENGAGEMENT, THE NEUBERGER SUPPORTS
	LIFELONG LEARNING BY TAKING A CRITICAL, INTERDISCIPLINARY APPROACH TO
	ITS COLLECTIONS, EXHIBITIONS, AND PUBLIC PROGRAMS. APPROXIMATELY
	16,900 VISITORS ATTEND THE MUSEUM EACH YEAR.
4d	Other program services (Describe on Schedule O.)
4d	(Expenses \$ 1,328,143. including grants of \$) (Revenue \$)
	(Expenses \$ 1,328,143. including grants of \$) (Revenue \$)

PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	•		v
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
-	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		х
~	similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
0	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			<u></u>
8		8		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	0		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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		<u> </u>
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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	
32003	12-23-20	⊦orm	33N	(2020)

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Form 990 (2020)

Part IV Checklist of Required Schedules

Pa	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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	0.51		v
~~	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	0		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
-	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a	"Yes, " complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
U	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			1
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 143			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С				
	(gambling) winnings to prize winners?	1c	Х	

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Form 990 (2020)

C/O SUNY PURCHASE

Form 990 (2020)

Form	990 (2020) C/O SUNY PURCHASE 23-7066	616	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			-
			Yes	No
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 <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	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?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	40-		
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>		
	Note: See the instructions for additional information the organization must report on Schedule O.			
a	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	44-		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>^</u>
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		x
	excess parachute payment(s) during the year?	15		
40	If "Yes," see instructions and file Form 4720, Schedule N.	40		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2020)

PURCHASE COLLEGE FOUNDATION, INC. C/O SIINV DIRCHASE

	990 (2020) C/O SUNY PURCHASE 23-7066		P	age 6
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	'No" re	spons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a17			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 16			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			37
	of officers, directors, trustees, or key employees to a management company or other person?	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 7-	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		
7a		7a		x
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>1a</u>		- 23
b		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10		
a	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	X	
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 on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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? The organization's CEO, Executive Director, or top management official	15a		х
	Other officers or key employees of the organization	15a 15b		X
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY , PA , WA , AK , ME , MA , MI , MN , NH	, NJ,	OH,	SC
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3))	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			

SARA	H JAMES -	- 914	-251-60)45	5 .	•			0
735	ANDERSON	HILL	ROAD,	ΡÜ	JRCHA	SE, N	JY 10)577	/-1400
032006 12-23-20	SI	EE SC	HEDULE	0	FOR	FULL	LIST	OF	STATES

14490222 784124 PUR009001

2020.05080 PURCHASE COLLEGE FOUNDATI PUR00901

Form **990** (2020)

PURCHASE COLLEGE FOUNDATION, INC.		
Form 990 (2020) C/O SUNY PURCHASE	23-7066616	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	pensated	
Employees, and Independent Contractors		
Check if Schedule O contains a response or note to any line in this Part VII		
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	h or within the organization's	tax year.
• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regar Enter -0- in columns (D), (E), and (F) if no compensation was paid.	dless of amount of compensa	ation.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, 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.

See instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	itior more	ו than o	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pei	rson i	is both pr/trus	n an	compensation	compensation	amount of
	week					i/irus	lee)	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or c	stee			Isated		(W-2/1099-MISC)	(00-2/1099-00130)	organization
	organizations	truste	al trus		yee	mper				and related
	below	idual	In stitutional trustee	er	Key employee	Highest compensated employee	ler			organizations
	line)	Indiv	Instit	Officer	Key (High	Former			
(1) LUCILLE WERLINICH	1.00									
CHAIR		Х		Х				0.	0.	0.
(2) DAVID FLEISHER	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(3) MICHELLE C. IFILL	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(4) CLIFFORD ARONSON	1.00									
TRUSTEE		Х						0.	0.	0.
(5) UMRAN BEBA	1.00									
TRUSTEE		Х						0.	0.	0.
(6) VICKI GILLESPIE	1.00									
TRUSTEE		Х						0.	0.	0.
(7) RUTH HINERFELD	1.00									
TRUSTEE		Х						0.	0.	0.
(8) WILLIAM KLINGENSTEIN	1.00									
SECRETARY		Х		Х				0.	0.	0.
(9) RICHARD A. MUSKUS, JR.	1.00									
TRUSTEE		Х						0.	0.	0.
(10) GERI PELL	1.00									
TRUSTEE		Х						0.	0.	0.
(11) SUELLEN PELUSO	1.00									
TRUSTEE		Х						0.	0.	0.
(12) JOHN RAMBERG	1.00									
TRUSTEE		Х						0.	0.	0.
(13) JUDITH A. RIGGS	1.00									
TREASURER		Х		Х				0.	0.	0.
(14) DEBRA ROTH	1.00									
TRUSTEE		Х						0.	0.	0.
(15) PETER J. WISE	1.00									
TRUSTEE		Х						0.	0.	0.
(16) GERHARD SEEBACHER	1.00									
TRUSTEE		Х						0.	0.	0.
(17) MILLY PENA	1.00									
EX-OFFICIO		Х						0.	0.	0.

PURCH	IASE	COLLEGE	FOUNDATION,	INC
α / α	VIATI	DIIDCUACI	7	

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23-7066616 Page 8

	90 (2020) C/O SUNY	PURCHAS	E							23-7066	5616	Pa	ge 8
Part	VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
	(A) Name and title	(B) Average hours per week	box	not ch , unles cer an	s per	ition more rson is	than c s both	an	(D) Reportable compensation from	(E) Reportable compensation from related	an	(F) stimated nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org and	pensati om the anizatic d relate anizatio	on ed
(18) I EX-OFI	PEG LUY	15.00	х						0.	0.			0.
	PAUL ZUKOWSKY	1.00	Δ						0.	0.0			0.
EX-OFI			х						0.	0.			0.
(20) I TRUSTI	DONNA FRITHSEN BE	15.00	x						0.	0.			0.
(21) \$	SANJAY SANTHANAM	3.00											
TRUSTI	3E		Х						0.	0.	,		0.
	Subtotal								0.	0.			0.
	otal from continuation sheets to Part VI otal (add lines 1b and 1c)								0.	0.			0.
2 T	otal number of individuals (including but n) wh	o re	eceived more than \$100,	000 of reportable			0
												Yes	No
	Nid the organization list any former officer, ne 1a? <i>If</i> "Yes," complete Schedule J for s			•	•	•		•	• • •		3		Х
4 F	or any individual listed on line 1a, is the sund related organizations greater than \$150	im of reportabl	e co	mpe	nsat	tion	and	oth	ner compensation from the	ne organization	4		x
5 [id any person listed on line 1a receive or a	accrue compen	sati	on fr	om a	any	unre	elate	ed organization or individ	lual for services			
	endered to the organization? <i>If</i> "Yes," com on B. Independent Contractors	plete Schedule	e J fo	or su	ich r	oers	on .				5		Х
1 (Complete this table for your five highest co		•							, ,	ation fro)m	
t	he organization. Report compensation for t (A)					ith c	or wi	thin	(B)		(0		
	Name and business	address	NC	ONE	<u>.</u>			-	Description of s	ervices	Compe	isation	
	otal number of independent contractors (in 100,000 of compensation from the organized or 100,000 or 100,00	•	ot lin	nited	l to t	thos C		ted	above) who received mo	ore than			

PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE

			2020) C/O SUNY PURC	HASE			23-7066	616 Page 9
Pa	rt \	/111						
			Check if Schedule O contains a response	or note to any lin		(D)	(0)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ς, ω	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	-		Membership dues 1b					
, G			Fundraising events 1c					
àifts ar A			Related organizations 1d					
s, G mili			Government grants (contributions) 1e					
ion: Si			All other contributions, gifts, grants, and					
but			similar amounts not included above 1f	2,097,359.				
d O I		g	Noncash contributions included in lines 1a-1f					
an Co		h	Total. Add lines 1a-1f	►	2,097,359.			
				Business Code				
e	2	а	OTHER INCOME	900099	188,698.	188,698.		
e		b						
enu		С						
ran Sev		d						
Program Service Revenue		е						
Ч		f	All other program service revenue		100.000			
		g	Total. Add lines 2a-2f		188,698.			
	3		Investment income (including dividends, intere		1 745 559			1 745 559
	4		other similar amounts) Income from investment of tax-exempt bond p		1,745,558.			1,745,558.
	4 5							
	5		Royalties	(ii) Personal				
	6	а						
	0		Gross rents					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7		Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 235,697,591.					
		b	Less: cost or other basis					
en			and sales expenses					
evenue		с	Gain or (loss)	,				
Re		d	Net gain or (loss)	►	11,709,653.			11,709,653.
Other R	8	а	Gross income from fundraising events (not including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a	1				
		b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events	>				
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a					
			Less: direct expenses 9b					
			Net income or (loss) from gaming activities	····· ►				
	10	а	Gross sales of inventory, less returns					
		L	and allowances 10a Less: cost of goods sold 10b					
			J					
		C	Net income or (loss) from sales of inventory	Business Code				
sno	11	а						
neo	• •	b						
ella 3vei		c						
Miscellaneous Revenue			All other revenue					
Σ			Total. Add lines 11a-11d					
	12		Total revenue. See instructions		15,741,268.	188,698.	٥.	13,455,211.
03200	9 12	-23-						Form 990 (2020)

PURCHASE COLLEGE FOUNDATION, INC. Form 990 (2020) C/O SUNY PURCHASE Part IX Statement of Functional Expenses

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Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, (A) (B) (C) 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service expenses Management and general expenses 1 Grants and other assistance to domestic organizations Image: Construction of the	(D) Fundraising expenses
Do not include amounts reported on lines 6b, Total expenses Program service Management and 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service Management and	Fundraising
1 Grants and other assistance to domestic organizations	
and domestic governments. See Part IV, line 21	
2 Grants and other assistance to domestic	
individuals. See Part IV, line 22	
3 Grants and other assistance to foreign	
organizations, foreign governments, and foreign	
individuals. See Part IV, lines 15 and 16	
4 Benefits paid to or for members	
5 Compensation of current officers, directors,	
trustees, and key employees	
6 Compensation not included above to disqualified	
persons (as defined under section 4958(f)(1)) and	
persons described in section 4958(c)(3)(B) 1,415,647. 1,415,647. 7 Other salaries and wages 1,415,647. 1,415,647.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	
9 Other employee benefits 4,000. 4,000. 10 Payroll taxes	
11 Fees for services (nonemployees):	
a Management	
b Legal 39,940. 39,940.	
c Accounting 64,928. 64,928.	
d Lobbying	
e Professional fundraising services. See Part IV, line 17	
f Investment management fees 140,830. 140,830.	
g Other. (If line 11g amount exceeds 10% of line 25,	
column (A) amount, list line 11g expenses on Sch 0.) 436,854. 375,384.	61,470.
12 Advertising and promotion	
13 Office expenses 356,406. 201,999. 119,408.	34,999.
14 Information technology	
15 Royalties	
16 Occupancy	
17 Travel 16,282. 16,282.	
18 Payments of travel or entertainment expenses	
for any federal, state, or local public officials	
19 Conferences, conventions, and meetings	
20 Interest	
21 Payments to affiliates	
22 Depreciation, depletion, and amortization 48,804. 23 Insurance 48,804.	
23 Insurance 40,004. 40,004. 24 Other expenses. Itemize expenses not covered 40,004.	
above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)	
amount, list line 24e expenses on Schedule 0.) a PROGRAM ACTIVITIES AND 522,148. 514,482. 2,660.	5,006.
	5,000.
c REPAIRS AND MAINTENANCE 36,122. 36,122.	5,091.
	11,122.
	<u> </u>
e All other expenses	117,688.
26 Joint costs. Complete this line only if the organization	,000.
reported in column (B) joint costs from a combined	
educational campaign and fundraising solicitation.	
Check here Life following SOP 98-2 (ASC 958-720)	

032010 12-23-20

Form 990 (2020)

PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE

	990 (2020) C/O SUNY PURCH	IGE FOUNDATION, IN IASE		23-	7066616 Page 11
Pa	tΧ	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	4	Oach and interest because		2,495,864.	4	3,506,965.
	1			997,378.	1 2	847,378.
	2	Savings and temporary cash investments		386,780.	2	910,246.
	3	Pledges and grants receivable, net		30,216.	3 4	9,695.
	4	Accounts receivable, net		50,210.	4	9,095.
	5	Loans and other receivables from any current of				
		trustee, key employee, creator or founder, subs			-	
	~	controlled entity or family member of any of the			5	
	6	Loans and other receivables from other disquali		~		
	-	under section 4958(f)(1)), and persons described			6	
ets	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		29,021.	8 9	14,012.
	9			29,021.	9	14,012.
	10a	Land, buildings, and equipment: cost or other	10-			
		basis. Complete Part VI of Schedule D				
		Less: accumulated depreciation		49,813,803.	10c	12 118 110
	11	Investments - publicly traded securities	26,596,704.	11	<u>42,418,410.</u> 61,182,282.	
	12	Investments - other securities. See Part IV, line		20,590,704.	12	01,102,202.
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets	105,706.	14	13,439.	
	15	Other assets. See Part IV, line 11		80,455,472.	15	108,902,427.
	16	Total assets. Add lines 1 through 15 (must equ		530,246.	16	162,118.
	17	Accounts payable and accrued expenses	550,240.	17	102,110.	
	18	Grants payable		129,659.	18	99,510.
	19 00	Deferred revenue		129,039.	19	<u> </u>
	20 21	Tax-exempt bond liabilities			20 21	
		Escrow or custodial account liability. Complete			21	
ies	22	Loans and other payables to any current or form				
Liabilities		trustee, key employee, creator or founder, subs			00	
Lial	00	controlled entity or family member of any of the Secured mortgages and notes payable to unrela			22 23	
	23 24	Unsecured notes and loans payable to unrelated			23 24	
	24 25	Other liabilities (including federal income tax, pa			24	
	25	parties, and other liabilities not included on lines				
			, ,	2,299,191.	25	14,300,443.
	26	Total liabilities. Add lines 17 through 25		2,959,096.	25 26	14,562,071.
	20	Organizations that follow FASB ASC 958, che	ock bere N	2755576560	20	11/002/0/10
Se		and complete lines 27, 28, 32, and 33.				
nce	27			6,455,846.	27	8.122.103.
3ala	28		71,040,530.	28	8,122,103. 86,218,253.	
Б	20	Organizations that do not follow FASB ASC 9	58 check here		20	,,
Fur		and complete lines 29 through 33.				
P	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building, or ed			30	
Ass	31	Retained earnings, endowment, accumulated in			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		77,496,376.	32	94,340,356.
Z	33			80,455,472.	33	108,902,427.
						Form 990 (2020)

Form 990 (2020)

PURCHASE	COLLEGE	FOUNDATION,	INC.
C/O SUNY	PURCHASE	3	

	990 (2020) C/O SUNY PURCHASE	23-7	0666	16	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,			
2	Total expenses (must equal Part IX, column (A), line 25)	2		876		
3	Revenue less expenses. Subtract line 2 from line 1	3	10,			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	77,			
5	Net unrealized gains (losses) on investments	5	5,	979	, 33	36.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
_	column (B))	10	94,	340	, 35	56.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X
				`	/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- 1			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	-				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit				
	Act and OMB Circular A-133?		L	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2020)

SCHEDULE A					Duhli	ic Cha	rity Status ar		slia Qu	innort		OMB No. 1545-0047
(For	m 99	0 or 990-EZ)					nization is a section 50					2020
					mpiere		47(a)(1) nonexempt ch			or a section		Ζυζυ
		f the Treasury nue Service					Attach to Form 990 or	Form 990-	EZ.			Open to Public
							v/Form990 for instruct			nformation.		Inspection
Nam	e of t	the organizati	on				GE FOUNDATIO	N, ING				identification number
Par	41	Peacon	for D		SUNY Sonity	PURCH	ASE (All organizations must		-:			3-7066616
										ee instruction	IS.	
	organ		-			-	For lines 1 through 12, o	•		• • • • • • •		
1							on of churches describe			1)(A)(I).		
2					-		(Attach Schedule E (For			::)		
3		-			-	-	anization described in s njunction with a hospita			-	Viii) Entor	the hospital's name
4		city, and state		organiza	ation ope		njunction with a nospita	l described	Section			the hospital's hame,
5				erated fo	or the ber	nefit of a co	llege or university owne	d or operat	ed by a go	overnmental u	nit describe	ed in
0		section 170	•					a or operat	ou by u ge			
6							nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X			-		-	ntial part of its support				ne general i	public described in
		section 170(•			0			0	
8		•			•		(1)(A)(vi). (Complete Pa	rt II.)				
9		An agricultura	al rese	earch org	anizatior	n described	in section 170(b)(1)(A)	(ix) operate	ed in conju	unction with a	land-grant	college
		or university of	or a n	on-land-g	rant coll	ege of agric	ulture (see instructions)	Enter the	name, city	, and state of	the college	eor
		university:										
10		An organizati	on tha	at norma	lly receiv	es (1) more	than 33 1/3% of its sup	port from c	ontributior	ns, membersh	ip fees, an	d gross receipts from
		activities rela	ted to	its exem	npt functi	ions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
							(less section 511 tax) fr	om busines	sses acqui	red by the ore	anization a	after June 30, 1975.
		See section	•		-	-						
11		-		-	-		ively to test for public sa	•				_
12		-		-	-		ively for the benefit of, t	-			•	
					-		ed in section 509(a)(1)					Sheck the box in
		7	-				f supporting organization				-	aivina
а						-	upervised, or controlled gularly appoint or elect	•	-			
				-		-	ections A and B.	a majonty c				apporting
b		¬ ~			-		or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hay	vina
						-	anization vested in the s			•		-
			-		-		Sections A and C.	•				
с] Type III fur	nction	ally inte	grated.	A supportin	g organization operated	in connec	tion with, a	and functiona	ly integrate	ed with,
		its supporte	ed org	anizatior	n(s) (see i	instructions). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III no	n-fun	ctionally	integra	ted. A supp	porting organization ope	rated in co	nnection v	vith its suppo	ted organiz	zation(s)
		that is not f	unctio	onally int	egrated.	The organiz	zation generally must sa	tisfy a distr	ibution red	quirement and	I an attentiv	veness
	_	requiremen	t (see	instructi	ons). Yo	ou must cor	nplete Part IV, Section	s A and D,	and Part	۷.		
е							written determination fro			Туре I, Туре	II, Type III	
_							nally integrated support	ing organiz	ation.			[]
		er the number	•	•	0							
g		i) Name of supp		ormation		he supporte i) EIN	ed organization(s). (iii) Type of organization	(iv) Is the org	anization listed	(v) Amount o	f monetarv	(vi) Amount of other
		organization			•		(described on lines 1-10	Yes	ing document? No	support (see ii		support (see instructions)
							above (see instructions))					
_												
Tota	<u> </u>											<u> </u>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

PURCHASE COLLEGE FOUNDATION, INC. Schedule A (Form 990 or 990 EZ) 2020 C/O SUNY PURCHASE

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3678128.	3995455.	3860662.	1385211.	2097359.	15016815.
2	Tax revenues levied for the organ-						
	ization'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	863,584.	966,330.	1150713.	1069592.	1022006.	
4	Total. Add lines 1 through 3	4541712.	4961785.	5011375.	2454803.	3119365.	20089040.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2082223.
6	Public support. Subtract line 5 from line 4.						18006817.
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	4541712.	4961785.	5011375.	2454803.	3119365.	20089040.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1744720.	1205420.	1272708.	1220665.	1745558.	7189071.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						27278111.
12	Gross receipts from related activities,	etc. (see instructio	ins)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, 1	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stor						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	66.01 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	<u>60.63</u> %
16a	33 1/3% support test - 2020. If the c	organization did no	t check the box or	n line 13, and line ⁻	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				▶ X
b	33 1/3% support test - 2019. If the c	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ation			
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization						
b	0 10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, cheo	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	<u>oox on line 13, 16a</u>	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s >
						edule A (Form 990	

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Part II

Schedule A (Form 990 or 990 EZ) 2020 C/O SUNY PURCHASE

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support			_	<u>.</u>				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2	2020	(f) Total	
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-								
	iness under section 513								
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its 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								
7a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
c	Add lines 7a and 7b								-
	Public support. (Subtract line 7c from line 6.)								-
	ction B. Total Support		•	L.	•		I		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2	2020	(f) Total	
	Amounts from line 6								
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								
b	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
c	Add lines 10a and 10b								
	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 (Explain in Part VI.)								
13	Total support. (Add lines 9, 10c, 11, and 12.)								
14	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) o	rganizatio	n,	
	check this box and stop here	<u></u>		<u></u>	-]
Sec	ction C. Computation of Public	c Support Per	rcentage						
15	Public support percentage for 2020 (li	ne 8, column (f), (divided by line 13,	column (f))		15		(%
16	Public support percentage from 2019	Schedule A, Part	III, line 15			16		(%
Sec	ction D. Computation of Inves	tment Incom	e Percentage						
17	Investment income percentage for 20	20 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17		(%
18	Investment income percentage from 2					18		(%
19a	33 1/3% support tests - 2020. If the					3 1/3%, a	Ind line 17	' is not	
	more than 33 1/3%, check this box an]
b	33 1/3% support tests - 2019. If the						3 1/3%, ai	nd	
	line 18 is not more than 33 1/3%, che]
20	Private foundation. If the organizatio]
	23 01-25-21		,	. ,				or 990-EZ) 202	20

Schedule A (Form 990 or 990-EZ) 2020 C/O SUNY PURCHASE

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disgualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

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3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990-EZ) 2020

1

2

Yes No

Schedule A (Form 990 or 990-EZ) 2020 C/O SUNY PURCHASE 23-7066616 Page 5 Supporting Organizations (continued) Part IV Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described in line 11a above? 11b c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Part VI</u> 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed 1 the supported organization(s) Section D. All Type III Supporting Organizations <u>No</u> Yes Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 1 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 2 the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a 3 significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 3 supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

1 Che	ck the box next to the method th	t the organization used t	o satisfy the Integral Part	Test during the year	(see instructions).
-------	----------------------------------	---------------------------	-----------------------------	----------------------	---------------------

a ____ The organization satisfied the Activities Test. Complete line 2 below.

b		The organization	is the parent	of each of i	ts supported	organizations.	Complete line 3 below	w.
---	--	------------------	---------------	--------------	--------------	----------------	-----------------------	----

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions)).

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

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Schedule A (Form 990 or 990-EZ) 2020

No

Yes

2a

2b

3a

3b

14490222 784124 PUR009001

2020.05080 PURCHASE COLLEGE FOUNDATI PUR00901

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Schedule A (Form 990 or 990-EZ) 2020 C/O SUNY PURCHASE Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions.
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2020

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	dule A (Form 990 or 990-EZ) 2020 C/O SUNY PURC	HASE	ninotiono		3-7066616 Page 7
Par	51 5 6	a)(5) Supporting Orga	nizations (continu	ied)	•
	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer			1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		•	
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.	a arganization is reasonaive		7	
8	Distributions to attentive supported organizations to which th	le organization is responsive		•	
	(provide details in Part VI). See instructions.			8 9	
9	Distributable amount for 2020 from Section C, line 6			9 10	
10	Line 8 amount divided by line 9 amount	(i)	(ii)	10	(iii)
Secti	on E - Distribution Allocations (see instructions)	() Excess Distributions	Underdistribution Pre-2020	IS	Distributable Amount for 2020
_1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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		PURCHAS	E COLLEGE	FOUNDATION,	INC.	
Schedule A	(Form 990 or 990-EZ) 2020	C/O SUN	Y PURCHAS	E		23-7066616 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1,	nation. Prov 2, 3b, 3c, 4b, 4 ines 2 and 3; P	ide the explanatio 4c, 5a, 6, 9a, 9b, 9 art IV, Section E, I	ns required by Part II, lir)c, 11a, 11b, and 11c; P ines 1c, 2a, 2b, 3a, and	art IV, Section B, lines 3b; Part V, line 1; Part	or 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,

Schedule A (Form 990 or 990-EZ) 2020

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60	SCHEDULE D Supplemental Financial Statements				OMB No.	1545-004	47				
	n 990)			anization answered				2020			
(FOI)	1 990)		V, line 6, 7, 8, 9, 1Ŏ	, 11a, 11b, 11c, 11d,	, 11e, 11f, 12a, or 1			Open to Public			
	ment of the Treasury	N Co to w		Attach to Form 990.		nation		Open Inspe		lic	
-	Revenue Service			90 for instructions a OUNDATION,		nation.	Employer	•			
Nam	e of the organizatio	C/O SUNY		CONDATION,	INC.			identificat 3-7066		nber	
Par	t I Organiza	tions Maintaining		d Funds or Othe	r Similar Funds	or Ac					
1 41		answered "Yes" on Fe					oounto.	Complete II	uie		
	organization	Tanswered fes off F	onn 990, Fan IV, III	(a) Donor ad	vised funds		b) Funds and	d other acc	ounts		
	T . i	-1 - f				- ·	b ji unus an		Junto		
1		d of year									
2		contributions to (durin									
3		grants from (during ye									
4		end of year									
5	-	n inform all donors and		-						٦	
-		n's property, subject to						Yes		No	
6		n inform all grantees, c									
	• •	oses and not for the be					•	—		٦	
Par	impermissible priva		<u> </u>	· · · ·				Yes		No	
		ation Easements.				Part IV,	line 7.				
1		ervation easements he	, ,	· · · ·							
		of land for public use (for example, recrea	tion or education)	Preservation o				ea		
		f natural habitat			Preservation of	of a certi	fied historic :	structure			
		of open space									
2	•	through 2d if the organ	ization held a quali	fied conservation con	tribution in the form	of a cor					
	day of the tax year.						Held	at the End of	the Tax	Year	
а	Total number of co	nservation easements					2a				
b	•	icted by conservation e					2b				
С		ation easements on a					2c				
d		ation easements inclue	., .								
		al Register					2d				
3	Number of conserv	ation easements modi	fied, transferred, rel	eased, extinguished,	or terminated by the	e organiz	zation during	the tax			
	year 🕨										
4		vhere property subject				-					
5	Does the organizat	ion have a written polic	cy regarding the per	riodic monitoring, insp	pection, handling of					_	
	violations, and enfo	prcement of the conser	vation easements it	t holds?				Yes		No	
6	Staff and volunteer	hours devoted to mor	nitoring, inspecting,	handling of violations	s, and enforcing con	servatio	n easements	s during the	year		
	▶										
7	Amount of expense	es incurred in monitorir	ng, inspecting, hand	lling of violations, and	d enforcing conserva	ation eas	sements duri	ng the year			
	▶\$										
8		ation easement report					.,		_	_	
	and section 170(h)	(4)(B)(ii)?						Yes		No	
9	In Part XIII, describ	e how the organization	reports conservation	on easements in its re	evenue and expense	e statem	ent and				
	balance sheet, and	include, if applicable,	the text of the footr	note to the organization	on's financial statem	nents tha	at describes	the			
	organization's acco	ounting for conservatio	n easements.				· · · · · · · · · · · · · · · · · · ·				
Par		tions Maintaining			reasures, or O	ther 5	imilar Ass	sets.			
		the organization answ									
1 a	U U	elected, as permitted u		•				orks			
		asures, or other similar	-				ice of public				
		Part XIII the text of the									
b	-	elected, as permitted u									
		ures, or other similar as		exhibition, education	n, or research in furt	herance	of public se	rvice,			
	-	ng amounts relating to									
		ded on Form 990, Part	VIII, line 1				► \$				
	.,	d in Form 990, Part X					▶ \$				
2	U U	received or held works	-			al gain, p	provide				
	-	ints required to be repo		-							
а		on Form 990, Part VIII,									
		Form 990, Part X									
	-	eduction Act Notice, s	ee the Instructions	s for Form 990.			Sche	dule D (For	m 990)	2020	
032051	12-01-20										

		E COLLEGE I	FOUNDATION	, INC.		00 70	C C C 1 (-	•
		Y PURCHASE		Oth -		23-70	-		age Z
Par	t III Organizations Maintaining C						s (contin	ued)	
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records	s, check any of the f	ollowing that make s	significar	t use of its			
а	Public exhibition	d	I oan or exc	hange program					
b	Scholarly research	e							
c	Preservation for future generations	-							
4	Provide a description of the organization's co	lections and explain	how they further th	e organization's exe	mot our	oose in Part	XIII		
5	During the year, did the organization solicit or						/		
•	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang								
	reported an amount on Form 990, Par					00,1 01117,	1110 0, 01		
	Is the organization an agent, trustee, custodia		iary for contribution	s or other assets not	include	4			
	on Form 990, Part X?						Yes	X	No
h	If "Yes," explain the arrangement in Part XIII a								
			lowing table.				Amount		
c	Beginning balance				10		7 inouni		
	Additions during the year								
	Distributions during the year								
f	Ending balance				11				
	Did the organization include an amount on Fo						Yes	X	No
	If "Yes," explain the arrangement in Part XIII.				• • • •	····· └─]
Par									
		(a) Current year	(b) Prior year	(c) Two years back		e years back	(e) Four	vears	hack
10	Beginning of year balance	74,412,640.	77,949,084.	75,248,119.		,592,831.		111,	
	Contributions	1,564,999.	565,797.	2,393,272.		,025,782.		030,	
		18,385,836.	-406,578.	3,995,497.		,487,722.		456,	
	Net investment earnings, gains, and losses	1,692,146.	2,006,769.	2,211,403.		<u>,107,722.</u> ,101,737.		767,	
	Grants or scholarships	1,052,140.	2,000,705.	2,211,403.		,101,737.		,,,	<u> </u>
е	Other expenditures for facilities	2,461,425.	1,688,894.	1,476,383.	1	,756,479.	2	237,	528
	and programs	2,401,423.	1,000,094.	1,470,303.	-	,130,413.	<u></u> ,	237,	520.
	Administrative expenses	90,209,904.	74 412 640	77,949,084.	75	,248,119.	67	502	021
	End of year balance				75	,240,119.	07,	592,	031.
2	Provide the estimated percentage of the curr)) held as:					
	Board designated or quasi-endowment	8.9700	_%						
	Permanent endowment $\blacktriangleright \frac{49.3180}{41.7120}$	%							
с	· · · · · · · · · · · · · · · · · · ·	%							
	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should								
3a	Are there endowment funds not in the posses	ssion of the organiza	tion that are held ar	nd administered for t	he orgar	ization	г		
	by:							Yes	No
	(i) Unrelated organizations						3a(i)		<u>X</u>
	(ii) Related organizations								X
b	If "Yes" on line 3a(ii), are the related organization						3b		
4	Describe in Part XIII the intended uses of the		wment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered								
	Description of property	(a) Cost or o basis (investr			Accumul epreciati		(d) Bool	c value	e
19	Land				- 17. 50.00				
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								0.
l otal	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part)	<u>x, column (B), line 1</u>	UC.)		💌 📘	D / C	000	
						Schedule	D (Form	990)	2020

PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE

Part VII	Investments -	Other Se	curities.
Schedule D	(Form 990) 2020	C/0	SUNY

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENTS HELD FOR GIFT		
(B) ANNUITIES	13,439.	END-OF-YEAR MARKET VALUE
(C) VANGUARD ULTRA	7,085,541.	END-OF-YEAR MARKET VALUE
(D) VANGUARD LARGE CAP	13,853,284.	END-OF-YEAR MARKET VALUE
(E) HRDNG LVNR INTERNATIONAL		
(F) EQUITY	8,671,150.	END-OF-YEAR MARKET VALUE
(G) HRTFRD SCH INTERNATIONAL		
(H) MU/C	8,624,294.	END-OF-YEAR MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	61,182,282.	
Part VIII Investments - Program Related.		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes"	Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.							
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value						
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)								

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	•
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 2	5.
1. (a) Description of liability	(b) Book value

(1) Federal income taxes	
(2) DUE TO STATE UNIVERSITY OF NEW	
(3) YORK	952,510.
(4) GIFT ANNUITY PAYABLE	7,938.
(5) INVESTMENTS HELD FOR OTHERS (PCA	
(6) AND FRIENDS)	12,996,137.
(7) DUE TO FRIENDS OF NEUBERGER MUSEUM	
(8) OF ART	343,858.
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	14,300,443.
2. Liability for upcortain tay positions. In Part XIII, provide the tayt of the featnets to the organization's financial statements t	hat reports the

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

032053 12-01-20

SEE PART XIII FOR CONTINUATIONS

Schedule D (Form 990) 2020 C/O SUNY PURCHASE 23-7066616 Page Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 22,601,780 1 Total revenue, gains, and other support per audited financial statements 1 22,601,780 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a 5,979,336. 2b 2 Net unrealized gains (losses) on investments 2c 2d 2 7,001,342 3 Subtract line 2e from line 1 2 3 15,600,438 15,600,438 4 Amounts included on Form 990, Part VIII, line 7b 4a 140,830. 4c 140,830 b Other (Describe in Part XIII.) 4b 4c 140,830 140,830
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830. b Other (Describe in Part XIII.) c Add lines 4a and 4b
1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Amounts included on Form 990, Part VIII, line 7b d Ata 14a 140,830. b Other (Describe in Part XIII.) c Add lines 4a and 4b
a Net unrealized gains (losses) on investments 2a 5,979,336. b Donated services and use of facilities 2b 1,022,006. c Recoveries of prior year grants 2c 2d d Other (Describe in Part XIII.) 2d 2e 7,001,342 e Add lines 2a through 2d 2e 7,001,342 3 Subtract line 2e from line 1 3 15,600,438 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 4a 140,830. b Other (Describe in Part XIII.) 4b 4c 140,830
b Donated services and use of facilities 2b 1,022,006. c Recoveries of prior year grants 2c 2d d Other (Describe in Part XIII.) 2d 2e 7,001,342 e Add lines 2a through 2d 2e 7,001,342 3 Subtract line 2e from line 1 3 15,600,438 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 4a 140,830. a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830. b Other (Describe in Part XIII.) 4b 4c 140,830 c Add lines 4a and 4b 4c 140,830
b Donated services and use of facilities 2b 1,022,006. c Recoveries of prior year grants 2c 2c d Other (Describe in Part XIII.) 2d 2d e Add lines 2a through 2d 2e 7,001,342 3 Subtract line 2e from line 1 3 15,600,438 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 4a 140,830. a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830. b Other (Describe in Part XIII.) 4b 4c 140,830
c Recoveries of prior year grants 2c 2d d Other (Describe in Part XIII.) 2d 2e 7,001,342 e Add lines 2a through 2d 2e 7,001,342 3 Subtract line 2e from line 1 3 15,600,438 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 4a 140,830. a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830. b Other (Describe in Part XIII.) 4b 4c 140,830 c Add lines 4a and 4b 4c 140,830 140,830
e Add lines 2a through 2d 2e 7,001,342 3 Subtract line 2e from line 1 3 15,600,438 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a 140,830. a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830. b Other (Describe in Part XIII.) 4b 4c 140,830 c Add lines 4a and 4b 4c 140,830
 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b
 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830. b Other (Describe in Part XIII.) 4b 4c 140,830 c Add lines 4a and 4b 4c 140,830
b Other (Describe in Part XIII.) 4b 4c 140,830 c Add lines 4a and 4b 4c 140,830
c Add lines 4a and 4b
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 15,741,268
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.
1 Total expenses and losses per audited financial statements 1 5,757,800
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:
a Donated services and use of facilities
b Prior year adjustments
c Other losses
d Other (Describe in Part XIII.)
e Add lines 2a through 2d 2e 1,022,006 3 Subtract line 2e from line 1 3 4,735,794
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 140,830.
b Other (Describe in Part XIII.)
c Add lines 4a and 4b
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 4,876,624 Part XIII Supplemental Information.

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

PART V, LINE 4

THE ENDOWMENT FUNDS ARE DESIGNATED TO PROVIDE LONG TERM SUPPORT F	THE	RT FOI	OR '.	TH
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PROGRAMS OF SUNY PURCHASE COLLEGE. THE FUNDS ARE USED TO SUPPORT

SCHOLARSHIPS AND CAMPUS PROGRAMS.

032054 12-01-20

Schedule D (Form 990) 2020

Schedule	D (Form	990)

C/O SUNY PURCHASE Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
HEDGE FUNDS	22,934,574.	FMV

Schedule D (Form 990)

032421 04-01-20

SCHEDULE I		G	arants and Oth	er Assistan	ce to Organ	izations.		OMB No. 1545-004	7
(Form 990)		Go	vernments, an ete if the organization	d Individual	ls in the Ŭni	ted States		2020]
Department of the Treasury Internal Revenue Service		P		Attach to For s.gov/Form990 for	m 990.			Open to Publi Inspection	с
Name of the organizat	ion PURCHASE C/O SUNY		OUNDATION,	INC.				Employer identification num 23-70666	
Part I General II	nformation on Grants a	nd Assistance							
1 Does the organiz	zation maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	tance, and the selecti		
criteria used to a	award the grants or assis	stance?						X Yes	No
2 Describe in Part	IV the organization's pro	ocedures for monite	oring the use of grant	funds in the United	d States.				
	d Other Assistance to					anization answered "Y	es" on Form 990, Par	t IV, line 21, for any	
	hat received more than S		•			(f) Method of		T	
	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
2 Enter total numb	per of section 501(c)(3) a	I nd government orc	l nanizations listed in the	l e line 1 table	1	I	1	▶	
	per of other organization							······	
	Reduction Act Notice							Schedule I (Form 990) 2	2020

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

Part III

C/O SUNY PURCHASE Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS ARE GIVEN TO STUDENTS BASED ON NEED,					
ACADEMIC PERFORMANCE AND ARTISTIC ACHIEVEMENTS.	565	1,692,146.	٥.		
	1			1	1

95% OF INSTITUTIONAL SCHOLARSHIPS ARE APPLIED DIRECTLY TO STUDENT

ACCOUNTS BY THE PURCHASE COLLEGE OFFICE OF STUDENT SERVICES. THE

REMAINDER ARE AWARDED DIRECTLY TO CURRENT STUDENTS OF THE COLLEGE FOR

EDUCATIONAL RELATED EXPENDITURES WHICH HELP TO ENRICH STUDENTS' COLLEGE

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

EXPERIENCES AND SUPPORT THEIR ABILITY TO COMPLETE THEIR DEGREE.

Part IV

PART I, LINE 2

23-7066616

Page 2

SCHEDULE O	Suppleme	ntal Informa	tion to F	orm 990 or 9	90-EZ	OMB No. 1545-0047
(Form 990 or 990-EZ) Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ. Name of the organization PURCHASE COLLEGE FOUNDATION, INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROMOTION AND SUPPORT OF PURCHASE COLLEGE, STATE UNIVERSITY OF					2020 Open to Public	
	PURCHASE	COLLEGE FOU				Inspection r identification number 066616
FORM 990, PART	<u>, I, LINE 1,</u>	DESCRIPTIO	N OF ORG	ANIZATION MI	ISSION:	
						IEW
	-					ILY
DISTINGUISHED	LIBERAL ART	S AND SCIEN	CES PROG	RAMS. THE LA	ARGEST PR	OGRAMS
ARE IN VISUAL	ARTS, MUSIC	, LIBERAL S	TUDIES,	PSYCHOLOGY,	DANCE, E	IOLOGY,
JOURNALISM ANI	NEW MEDIA.					
FORM 990, PART	S III, LINE	4B, PROGRAM	SERVICE	ACCOMPLISH	IENTS:	

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES

EXPENSES \$ 1,328,143. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) 202003221111-20-20

Schedule O (Form 990 or 9	90-EZ) 2020				Page 2
Name of the organization	PURCHASE	COLLEGE	FOUNDATION,	INC.	Employer identification number
	C/O SUNY	PURCHASE	3		23-7066616

FORM 990, PART VI, SECTION B, LINE 11B:

PRIOR TO FILING FORM 990, IT IS PROVIDED ELECTRONICALLY TO THE MEMBERS OF THE BOARD OF DIRECTORS FOR THEIR PERSONAL REVIEW AND QUESTIONING. SUBSEQUENTLY, AND PRIOR TO THE FILING OF THE PURCHASE COLLEGE FOUNDATION FORM 990, THE COMBINED AUDIT COMMITTEE WILL CONDUCT A REVIEW OF ALL FORMS 990 WITH THE AUDITORS AND TAX PREPARERS PRESENT AND PARTICIPATING WITH MANAGEMENT IN THE PRESENTATION OF THESE FILINGS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY PROVIDES FOR ANNUAL WRITTEN ACKNOWLEDGEMENT BY EACH TRUSTEE OR OFFICER THAT EACH HAS READ AND IS FAMILIAR WITH THE CONFLICT-OF-INTEREST POLICY AND AS TO WHETHER OR NOT THE TRUSTEE OR OFFICER HAS A CONFLICT OF INTEREST. IF A CONFLICT EXISTS, THE COMPLETE DETAILS OF THE CONFLICT ARE TO BE DESCRIBED IN WRITING AND SUBMITTED TO THE BOARD CHAIR OR THE PRESIDENT. THE BOARD CHAIR OR PRESIDENT SHALL REFER THE ISSUE TO THE EXECUTIVE COMMITTEE, OR OTHER BOARD COMMITTEE (THE 'BODY') HAVING DECISION-MAKING AUTHORITY OVER THE SUBSTANTIVE MATTER IN QUESTION.

THE TRUSTEE OR OFFICER WHO DISCLOSES A DIRECT OR INDIRECT FINANCIAL INTEREST IN A PROPOSED OR EXISTING CONTRACT, TRANSACTION OR ARRANGEMENT MAY MAKE A PRESENTATION AND RESPOND TO QUESTIONS BY THE BODY, BUT AFTER SUCH PRESENTATION, HE OR SHEE SHALL LEAVE THE MEETING DURING THE DISCSSION OF, AND VOTE ON, THE CONTRACT, TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE CONFLICT OF INTEREST.

EACH YEAR AT THE BOARD OF TRUSTEE'S ANNUAL MEETING, THE CONFLICT OF
INTEREST POLICY IS DISTRIBUTED AND WRITTEN ACKNOWLEDGMENTS SUBMITTED.
032212 11-20-20 Schedule O (Form 990 or 990-EZ) 2020

14490222 784124 PUR009001

2020.05080 PURCHASE COLLEGE FOUNDATI PUR00901

Schedule O (Form 990 or 99	90-EZ) 2020		Page 2
Name of the organization	PURCHASE COLLEGE C/O SUNY PURCHAS		Employer identification number 23-7066616
DURING THE COU	JRSE OF THE YEAR,	FINANCIAL RESULTS AND	TRANSACTIONS ARE

REVIEWED FOR REASONABLENESS AND APPROPRIATENESS, INCLUDING WITH REGARD TO

ANY POTENTIAL FOR THERE BEING A CONFLICT.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

NY, PA, WA, AK, ME, MA, MI, MN, NH, NJ, OH, SC, CO, CA, HI, MD, NV, ND, UT, WI

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION AS

REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE BY POSTING IT ON

GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WEBSITES. IN ADDITION, THE

FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, ARTICLES OF

INCORPORATION AND BY-LAWS ARE ALSO AVAILABLE UPON WRITTEN REQUEST AT 735

ANDERSON HILL ROAD, PURCHASE, NY 10577.

FORM 990, PART XII, LINE 2C:

THERE IS ONE AUDIT COMMITTEE FOR PURCHASE COLLEGE FOUNDATION AND

FRIENDS OF THE NEUBERGER MUSEUM. EACH OF THE RELATED ORGANIZATIONS'

BOARD IS REPRESENTED ON THIS COMMITTEE.

Schedule O (Form 990 or 990-EZ) 2020

032212 11-20-20

SCHEDULE R (Form 990)	► Comp	Related Organization	ns and Unrelated Pa ed "Yes" on Form 990, Part IV, Attach to Form 990.	r tnerships line 33, 34, 35b, 3	6, or 37.	-	OMB No. 154	0
Department of the Treasury Internal Revenue Service	,	Go to www.irs.gov/Form99		Open to P Inspect	ublic			
Name of the organiz		GE FOUNDATION, IN		nployer identification number 23-7066616				
Part I Identifica	ation of Disregarded Entities. Comple	te if the organization answered "Y	es" on Form 990, Part IV, line 3	3.				
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity			ssets Dire	(f) ect controllin entity	g	
		-						
	ation of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organizati	ion answered "Yes" on Form 990	D, Part IV, line 34, t	pecause it had one or	more related tax	exempt	
(a) Name, address, and EIN of related organization		(b) Primary activity				(f) Direct controllir entity	g cont	g) 512(b)(13) rolled tity?
	E FOUNDATION HOUSING CORP - ANDERSON HILL ROAD,	RESIDENTIAL HOUSING	NEW YORK	501(C)(3)	501(c)(3))		Yes	No X
PURCHASE HOUSIN	G CORPORATION II - 82-1262347 LL ROAD							
PURCHASE, NY 1	0577	RESIDENTIAL HOUSING	NEW YORK	501(C)(3)	LINE 10			X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020 C/O SUNY PURCHASE

23-7066616 Page 2

Part III 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.

	r an	, jour									
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?		Genera manag partn	^{ll or} Percentage ^{jing} ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
											<u> </u>
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr ent	(i) ction b)(13) rolled tity?	
		country)				400010		Yes	No	
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Schedule R (Form 990) 2020 C/O SUNY PURCHASE

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					
1	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?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X	
	Gift, grant, or capital contribution to related organization(s)	1b		X	
	Gift, grant, or capital contribution from related organization(s)	1c	X		
	Loans or loan guarantees to or for related organization(s)	1d	X		
	Loans or loan guarantees by related organization(s)	1e		X	
f	Dividends from related organization(s)	1f		X	
g		1g		X	
h	Purchase of assets from related organization(s)	1h		X	
i	Exchange of assets with related organization(s)	1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X	
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X	
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X	
	Sharing of paid employees with related organization(s)	10		X	
р	Reimbursement paid to related organization(s) for expenses	1p		X	
	Reimbursement paid by related organization(s) for expenses	1q		X	
r	Other transfer of cash or property to related organization(s)	1r		X	
s	Other transfer of cash or property from related organization(s)	1s	X		
2	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.				

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
<u>(2)</u>			
<u>(</u> 3)			
<u>(4)</u>			
(5)			
(6)			

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

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

(0)	<u> </u>	F	(d)	1-	、	(f)	(a)		•	(1)	(i)	(14)
(a)	(b)	(c)	(d)	Are a partners 501(c orgs	all	(f)	(g) Share of		ר) החסיי-	(i) Code V UBI	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c	s sec.)(3)	Share of total	end-of-year	tio	opor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin	
of entity		country)	excluded from tax under	orgs		income	assets		tions?	of Schedule K-1	partner?	
		country)	sections 512-514)	Yes	No	Income	asseis	Yes	No	(Form 1065)	Yes No	·
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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

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