Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

A F	or the	\pm 2022 calendar year, or tax year beginning $$ JUL $1,$ 2022 $$ and end	ding J	<u>UN 30, 2023</u>	
	heck if pplicable	PURCHASE COLLEGE FOUNDATION, INC.		D Employer identifi	cation number
	Addres	C/O SUNY PURCHASE			
	Name change	Doing business as		23-70666	16
	Initial return Final return/	735 ANDERSON HILL ROAD	om/suite	E Telephone numbe 914-251-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	39,573,350.
	Ameno			H(a) Is this a group re	eturn
	Application	F Name and address of principal officer: SUELLEN MCAVUL FELLOSC	0	for subordinates	? Yes X No
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
1.1	ax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions
J١	Vebsit	e: N/A		H(c) Group exemption	n number
KF	orm of	organization; X Corporation Trust Association Other	L Year o	of formation: 1969	M State of legal domicile: NY
Pa	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: $\ { t THE \ \ FO}$	UNDA	TION WAS IN	CORPORATED
Governance	:	UNDER THE NOT-FOR-PROFIT LAWS OF THE STATE	OF N	EW YORK FOR	THE
rna	2	Check this box if the organization discontinued its operations or disposed	of more	than 25% of its net as:	sets.
o ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	18
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	17
8	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	0
Æ	6	Total number of volunteers (estimate if necessary)		6	18
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
_		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)		2,278,857.	1,627,506.
Š	9	Program service revenue (Part VIII, line 2g)		300,057.	265,840.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		8,244,677.	1,327,953.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	l	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,823,591.	3,221,299.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,779,038.	2,299,228.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ý	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,193,866.	1,100,504.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ē	b ·	Total fundraising expenses (Part IX, column (D), line 25) 224,304			
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,059,335.	2,586,729.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,032,239.	5,986,461.
	19	Revenue less expenses. Subtract line 18 from line 12		5,791,352.	-2,765,162.
Net Assets or			Beg	jinning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		93,577,892.	96,828,921.
ASS	21	Total liabilities (Part X, line 26)		11,432,497.	11,345,788.
ESE.	22	Net assets or fund balances. Subtract line 21 from line 20		82,145,395.	85,483,133.
Pa	art II	Signature Block			
Und	er pena	lti es of pægisnyod dle clare that I have examined this return, including accompanying schedules and	ıd statemei	nts, and to the best of my	/ knowledge and belief, it is
true,	correc	t, and complete. Deplaration of preparer (other than officer) is based on all information of which I	preparer l	has any knowledge / / 24	
		2 Switch Petuso		03/07/24	
Sigi		Signature of officer		Date	
Her	е	SUELLEN MCAVOY PELUSO, BOARD CHAIR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		ate Check Check	PTIN
Paid		ARIEL F RUIZ ARIEL F RUIZ	0	3/05/24 self-employ	
Prep	arer	Firm's name BONADIO & CO., LLP		Firm's EIN 1	6-1131146
Use	Only	Firm's address 6 WEMBLEY CT			
		ALBANY, NY 12205		Phone no. (5	
May	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No

Pai	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.
2	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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	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
 4а	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,395,385. including grants of \$) (Revenue \$)
44	THE FOUNDATION PROVIDED RESOURCES IN ORDER TO ATTRACT AND RETAIN
	EXCEPTIONAL FACULTY, AID IN CURRICULUM ENHANCEMENT AND SUPPORT PUBLIC
	LECTURES WHICH PROVIDE OPPORTUNITIES FOR STUDENTS AND LOCAL COMMUNITY
	MEMBERS ALIKE TO INTERACT WITH EXPERTS IN VARIOUS DISCIPLINES.
4b	(Code:) (Expenses \$ 2,299,228. including grants of \$2,299,228.) (Revenue \$)
	INSTITUTIONAL SCHOLARSHIPS ARE AWARDED BY THE COLLEGE USING FUNDS FROM
	THE PURCHASE COLLEGE FOUNDATION, AS WELL AS OTHER SOURCES. FOUNDATION
	FUNDS COME FROM THE GENEROUS CONTRIBUTIONS OF DONORS TO THE FOUNDATION.
	THESE DONORS ARE INDIVIDUALS, FAMILIES, FOUNDATIONS AND CORORATIONS.
	DURING THE 2022-2023 ACADEMIC YEAR, 854 STUDENTS WERE RECIPIENTS OF SCHOLARSHIPS FROM THE PURCHASE COLLEGE FOUNDATION.
	SCHOLARSHIPS FROM THE PURCHASE COLLEGE FOUNDATION.
4c	(Code:) (Expenses \$ 700,739 • including grants of \$) (Revenue \$ 29,228 • _)
	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.)
4 -	(Expenses \$ 880,467. including grants of \$) (Revenue \$ 236,612.) Total program service expenses 5,275,819.
4e	Total program service expenses 5, 275, 819. Form 990 (2022)
	Form 999 (2022)

Part IV Checklist of Required Schedules

			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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
·	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_V
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		37	
	If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, 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,			
	Part VI	11a		X
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	X	
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		X
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		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	•	12a	Х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b	•	10h		\ x
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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	ا ا		x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			٦,
	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,		77	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	
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> X</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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х
			~	

Part IV 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	X	
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		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%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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			37
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	28a		х
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		
ŭ	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> X</u>
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		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ایما		77
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai		_ 55		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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O22) C/O SUNY PURCHASE

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
За	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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
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			v
	any contributions that were not tax deductible as charitable contributions?	6a		X
р	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?	7-		Х
a		7a 7b		Λ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.5		
С	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
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.			
а	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:			
а	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			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	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. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	ISa		
b	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			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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Form **990** (2022)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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			
	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 17			
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			
	of officers, directors, trustees, or key employees to a management company or other person?	3		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	Did the organization have members or stockholders?	6		<u>x</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
	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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This Section B requests information about policies not required by the internal nevenue code.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
b		10b		
110	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	Ha	-25	
		12a	х	
_	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X	
b		120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	х	
40	on Schedule O how this was done	12c	X	
	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	^	
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?	45-		X
	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		<u> </u>
46	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	taxable entity during the year?	16a		_ <u>X</u> _
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			
C	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure	37 T	OTT	~~
	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			
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) a	availat	ole
	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			
	SARAH JAMES - 914-251-6045			
	735 ANDERSON HILL ROAD, PURCHASE, NY 10577-1400			
232006	12-13-22 SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2022)

Form 990 (2022) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **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 or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) 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 the instructions for the order in which to list the persons above.

X Check this box if neither the organization ne	or any related	orga	nizat	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Posi		<mark>າ</mark> than d	nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week		er an	a a a	recto	r/trus	iee)	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			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	Institutional trustee		yee	mper		1099-NEC)	1000 (120)	and related
	below	idual	tution	er	Key employee	est co loyee	ıer	<u> </u>		organizations
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	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) SUELLEN PELUSO	1.00								_	_
VICE CHAIR	1 22	Х		Х				0.	0.	0.
(4) CLIFFORD ARONSON	1.00									
TRUSTEE	1 00	Х						0.	0.	0.
(5) UMRAN BEBA	1.00	l								•
TRUSTEE	1 00	Х						0.	0.	0.
(6) JAMES DUBIN	1.00	l								•
TRUSTEE	1 00	Х						0.	0.	0.
(7) SEBNEM ERIM	1.00	,,								0
TRUSTEE	1 00	Х						0.	0.	0.
(8) MICHAEL FONSECA	1.00	٠,							_	•
TRUSTEE	1 00	Х						0.	0.	0.
(9) VICKI GILLESPIE	1.00	v							0	0
TRUSTEE (10) WILLIAM KLINGENSTEIN	1.00	Х						0.	0.	0.
SECRETARY	1.00	Х		х				0.	0.	0.
(11) RICHARD A. MUSKUS, JR.	1.00	Δ		Δ				0.	0.	<u> </u>
TRUSTEE	1.00	Х						0.	0.	0.
(12) GERI PELL	1.00	25						•	.	
TRUSTEE	1.00	х						0.	0.	0.
(13) JOHN RAMBERG	1.00							•		
TRUSTEE		х						0.	0.	0.
(14) JUDITH A. RIGGS	1.00								•	
TREASURER		х		х				0.	0.	0.
(15) DEBRA ROTH	1.00									
TRUSTEE		Х						0.	0.	0.
(16) GERHARD SEEBACHER	1.00									
TRUSTEE		Х						0.	0.	0.
(17) PETER J. WISE	1.00									
TRUSTEE		Х						0.	0.	0.

232007 12-13-22

Form **990** (2022)

	PURCHAS	<u>, Ľ</u>							23-7066	ото	P	age o
Part VII Section A. Officers, Directors, Tre	ustees, Key Emp	oloy	ees,	and	l Hi	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average	(do		Pos		l than d	one	Reportable	Reportable	Est	timate	∍d
	hours per	box,	, unle	ss per	rson i	s both	n an	compensation	compensation	l	ount	of
	week		l ai		liecto	i / ii us	(66)	from	from related	l	other	
	(list any hours for	director						the organization	organizations (W-2/1099-MISC/		pensa om the	
	related	eord	tee			sated		(W-2/1099-MISC/	1099-NEC)	l	anizati	
	organizations	Individual trustee or	al trustee		99/	m pen		1099-NEC)	1000 NEO)	ı -	d relate	
	below	dualt	ution	_	l old m	st co	-ia	1		l	nizatio	
	line)	Indivi	Institutional t	Officer	Key employee	Highest compensated employee	Former					
(18) MILAGROS PENA	3.00											
EX-OFFICIO	1	Х						0.	0.			0.
(19) AMANDA WALKER	15.00	ا ا										_
EX-OFFICIO (NON-VOTING)	1 00	Х						0.	0.			0.
(20) PAUL ZUKOWSKY	1.00											^
EX-OFFICIO (NON-VOTING)		X	_					0.	0.			0.
		1										
4b Cubbatal								0.	0.			0.
1b Subtotal c Total from continuation sheets to Part								0.	0.			0.
d Total (add lines 1b and 1c)								0.	0.			0.
Total number of individuals (including but								-				
compensation from the organization						,		,				0
											Yes	No
3 Did the organization list any former office	er, director, truste	ee, k	еу е	empl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for	such individual									3		Х
4 For any individual listed on line 1a, is the	•							•	•			
and related organizations greater than \$1										4		X
5 Did any person listed on line 1a receive o	r accrue compen	ısati	on fr	om	any	unre	elate	ed organization or individ	dual for services			

rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
THE TAGS GROUP	MARKETING,	101 545
7116 COVE LAKE DRIVE, WAKE FOREST, NC 27587 FIDUCIENT ADVISORS LLC, 500 W MADISON	COMMUNICATIONS AND E	121,547.
STREET, SUITE 1700, CHICAGO, IL 60661	CONSULTING FIRM	108,748.
MCALLISTER AND QUINN LLC, 1625 EYE STREET, NW SUITE 750, WASHINGTON, DC 20006	GRANT WRITING	108,600.
MW BOTTE 750, WASHINGTON, DC 20000	GRANI WRITING	100,000.
2 Total number of independent contractors (including but not limited to those listed \$100,000 of compensation from the organization 3	d above) who received more than	

Form **990** (2022)

Х

Form 990 (2022) C / O SUN
Part VIII Statement of Revenue

			Check if Schedule O c	ontair	ne a reend	nee i	or note to any lin	e in this Part VIII			
			Officer if Schedule O C	Ontail	iis a respi	1136	or note to any iin	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenuè excluded
									function revenue	business revenue	from tax under
											sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 :	а	Federated campaigns		1a						
ar our	ı	b	Membership dues		1b						
A, G	•	С	Fundraising events		1c						
ar /			Related organizations								
s, G			Government grants (contri								
Sign			All other contributions, gifts, g								
ber j			similar amounts not included				1,627,506.				
ĕ₹		a	Noncash contributions included in li			ŧ .					
οğ		_	Total. Add lines 1a-1f	11100 14		*		1,627,506.			
<u> </u>	-	<u></u>	Total: Add lines fa ff				Business Code				
	•	_	OTHER INCOME				711190	265,840.	265,840.		
ice	2 6	_	OTHER INCOME				711190	203,840.	203,040.		
er v	'	b									
n S	•	С									
ran 3ev	•	d									
Program Service Revenue	•	е									
<u>-</u>	1	f	All other program service r	evenu	ле		900099				
		g	Total. Add lines 2a-2f					265,840.			
	3		Investment income (includ	ing di	vidends, i	ntere	st, and				
								1,419,457.			1419457.
	4		Income from investment or								
	5		Royalties		•	•					
	•			Ш	(i) Rea		(ii) Personal				
	6	2	Gross rents	6a	()		()				
			***************************************	6b							
			Less: rental expenses								
			Rental income or (loss)	6c							
			Net rental income or (loss)	<u>.</u>			(::\ O+l:-				
	7 :	а	Gross amount from sales of	_	(i) Securi		(ii) Other				
			assets other than inventory	7a	36,260,	04/.					
	- 1	b	Less: cost or other basis								
Revenue			and sales expenses		36,352,						
Š	•	С	Gain or (loss)	7с	-91,	504.					
Be	•	d	Net gain or (loss)			<u></u>		-91,504.			-91,504.
her	8 8	а	Gross income from fundraisin	ıg ever	nts (not						
₹			including \$		of						
			contributions reported on	line 1	c). See						
			Part IV, line 18			8a					
	-	b	Less: direct expenses			8b					
			Net income or (loss) from f			nts					
			Gross income from gamino								
			Part IV, line 19	_		9a					
		h	Less: direct expenses			9b					
			Net income or (loss) from g								
			Gross sales of inventory, le			Ĭ					
	10 6	а	• •			100					
			and allowances			10a					
			Less: cost of goods sold			10b	•				
		С	Net income or (loss) from s	sales (of invento	ry					
S							Business Code				
on e	11 :	а									
Miscellaneous Revenue	ı	b									
e e	(С									
Aisc B	(d	All other revenue								
	(Total. Add lines 11a-11d								
	12		Total revenue. See instructio					3,221,299.	265,840.	0.	1327953.

Form 990 (2022) C/O SUNY PURCHASE Part IX Statement of Functional Expenses

Total expenses Program service expenses Total expenses Program service expenses Analogement and general expenses Total expenses Program service expenses Analogement and general expenses Analogement and general expenses Total expenses Program service expenses Analogement and general expenses Analogement	o) aising nses
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, line 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(f)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 1 Management 1 Legal 16,848. 16,848. 1 16,8	
2 Grants and other assistance to domestic individuals. See Part IV, line 22	
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(r)(11)) and persons described in section 4958(r)(3)(B) 7. Other salaries and wages 8. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9. Other employee benefits 1. Control of the services (nonemployees): a Management 1. Legal 1. Control of the services (nonemployees): 4. Accounting 7. Accounting 7. Accounting 7. Accounting 7. Accounting 8. Professional fundraising services. See Part IV, line 17 8. Investment management fees 9. Other (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 2. Advertising and promotion 3. Office expenses 4. Information technology 5. Royalties 6. Occupancy 7. Travel 8. Payments of travel or entertainment expenses for any federal, state, or local public officials 9. Conferences, conventions, and meetings	
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(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 1 Fees for services (nonemployees): a Management b Legal 1 Fees for services (nonemployees): a Management b Legal 1 Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (Iff line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 4 Advertising and promotion 5 Advertising and promotion 7 A	
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation included above to disqualified persons (as defined under section 4958(c)(3)(8) To Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Operand taxes Head of the section 4958(c)(3)(8) Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Operand taxes Person services (nonemployees): Advangement Legal 16,848. 16,84	
individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(c)(3)(8) Cother salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Payroll taxes Person escribed in section 401(k) and 403(b) employer contributions (include section 401(k) and 403(b) employer contributions) Payroll taxes Person or services (nonemployees): a Management b Legal	
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) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 6 , 569 • 6 , 569 • 0 Payroll taxes 1 Fees for services (nonemployees): a Management b Legal 7 4, 425 • 1 6, 848 • 1 6, 848 • 1 6, 848 • 1 6, 848 • 1 6, 848 • 1 74, 425 • 1 192, 826 •	
5 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (nonemployees): Management Legal 16,848. 16,848. Accounting 74,425. Tobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Royalties Cocupancy Travel Payrol taxes 1,093,935. 1,093,9	
trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 0 Payroll taxes 1 Fees for services (nonemployees): a Management b Legal 1 16,848. 1 16,848. 1 16,848. 2 Accounting 4 Lobbying 6 Professional fundraising services. See Part IV, line 17 Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 2 Advertising and promotion 3 Office expenses 3 19,594. 2 03,492. 7 77,949. 3 Information technology 5 Royalties 6 Occupancy 7 Travel 5 77,379. 5 50,285. 2 ,365.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 1 Pees for services (nonemployees): a Management b Legal 1 Accounting 1 Accounting 1 Accounting 1 Accounting 2 Professional fundraising services. See Part IV, line 17 Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 2 Advertising and promotion 3 Office expenses 4 Information technology 5 Royalties 6 Occupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	
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Dersons described in section 4958(c)(3)(B) Tother salaries and wages Tother salaries and wages Tother salaries and wages Tother section 401(k) and 403(b) employer contributions) Tother employee benefits Tother employee benefits Tother employee benefits Tother employee benefits Tother employees Tother employee benefits Tother employees T	
7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(h) employer contributions) 9 Other employee benefits 1 Fees for services (nonemployees): a Management b Legal 1 CACCOUNTING 1 COTHORNOOLING 1 COTHORNOOLING 2 COTHORNOOLING 2 OTHER (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 2 Advertising and promotion 3 Office expenses 3 Office expenses 4 Information technology 5 Royalties 6 Occupancy 7 Travel 5 Conferences, conventions, and meetings	
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	
Section 401(k) and 403(b) employer contributions G , 569 . G , 569 .	
9 Other employee benefits 6 , 569 . 6 , 569 . 9 Payroll taxes	
Payroll taxes Fees for services (nonemployees): a Management	
1 Fees for services (nonemployees): a Management b Legal	
a Management b Legal	
b Legal 16,848. 16,848. 16,848. 74,425. 74,425. 74,425.	
c Accounting	
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion 3 Office expenses 3 Information technology Royalties Coccupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	
e Professional fundraising services. See Part IV, line 17 f Investment management fees	
f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) Advertising and promotion Giffice expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings	
column (A), amount, list line 11g expenses on Sch 0.) 577,754. 357,652. 69,723. 15 2 Advertising and promotion 54,393. 54,393. 30 3 Office expenses 319,594. 203,492. 77,949. 30 4 Information technology 50 50,285. 2,365. 5 Payments of travel or entertainment expenses for any federal, state, or local public officials 57,379. 50,285. 2,365. 9 Conferences, conventions, and meetings 57,379. 50,285. 2,365.	
Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings	
3 Office expenses 319,594. 203,492. 77,949. 3 4 Information technology 5 Royalties 6 Occupancy 7 Travel 57,379. 50,285. 2,365. 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	0,379
4 Information technology 5 Royalties 6 Occupancy 7 Travel 57,379 50,285 2,365 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	
5 Royalties 6 Occupancy 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	<mark>8,153</mark>
6 Occupancy 7 Travel 57,379. 50,285. 2,365. 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	
7 Travel 57,379. 50,285. 2,365. 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings	
Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings	
for any federal, state, or local public officials 9 Conferences, conventions, and meetings	4,729
9 Conferences, conventions, and meetings	
0. Interest	
O Interest	
1 Payments to affiliates	
2 Depreciation, depletion, and amortization	
3 Insurance 44,500. 44,500.	
4 Other expenses. Itemize expenses not covered 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 1,121,805. 1,112,536.	9,269
DED3 TDG 337D W3 TAMEDA3 AGE 07 500 07 500	J, 403
	1,100
	$\frac{1,100}{0,674}$
	0,0/4
e All other expenses	4,304
	±,3U4
6 Joint costs. Complete this line only if the organization	
reported in column (B) joint costs from a combined	
educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)	

Form 990 (2022)
Part X Balance Sheet

rar	t X	Balance Sneet				
		Check if Schedule O contains a response or no	ote to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,309,001.	1	1,455,178
	2	Savings and temporary cash investments		847,378.	2	847,378
	3	Pledges and grants receivable, net	497,969.	3	505,791	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from any current of				
		trustee, key employee, creator or founder, subs	stantial contributor, or 35%			
		controlled entity or family member of any of the	ese persons		5	
	6	Loans and other receivables from other disqua				
		under section 4958(f)(1)), and persons describe		6		
s l	7	Notes and loans receivable, net		7		
Assets	8	Inventories for sale or use			8	_
₹	9	Prepaid expenses and deferred charges		14,012.	9	0
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		27,449,052.		35,651,798
	12	Investments - other securities. See Part IV, line		63,450,137.	12	58,367,354
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets	10.010	14	1 100	
	15	Other assets. See Part IV, line 11		10,343.	15	1,422
	16	Total assets. Add lines 1 through 15 (must equal to 15)	ual line 33)	93,577,892.	16	96,828,921
	17	Accounts payable and accrued expenses	152,878.	17	241,705	
	18	Grants payable	00 001	18	62 020	
	19	Deferred revenue		82,201.	19	63,230
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete			21	
es	22	Loans and other payables to any current or form				
		trustee, key employee, creator or founder, subs				
Liabilities		controlled entity or family member of any of the			22	
-	23	Secured mortgages and notes payable to unre			23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, p				
		parties, and other liabilities not included on line	es 17-24). Complete Part X	11,197,418.		11,040,853
	00	of Schedule D		11,432,497.		11,345,788
+	26	Total liabilities. Add lines 17 through 25		11,432,497.	26	11,343,700
g		Organizations that follow FASB ASC 958, ch and complete lines 27, 28, 32, and 33.	eck nere 21			
2	27			7,323,981.	27	8,414,446
<u>a</u> a	28	Net assets with donor restrictions Net assets with donor restrictions		74,821,414.		77,068,687
5	20	Organizations that do not follow FASB ASC		74,021,414.	20	77,000,007
		and complete lines 29 through 33.	936, Check here			
5	29	Capital stock or trust principal, or current funds	•		29	
ers	30	Paid-in or capital surplus, or land, building, or e			30	
488	31	Retained earnings, endowment, accumulated in			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		82,145,395.	32	85,483,133
z	33			93,577,892.		96,828,921

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI			<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>, 22:</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>,98</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>62.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				<u>95.</u>
5	Net unrealized gains (losses) on investments	5	6	<u>,10</u>	2,9	00.
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	<u>85</u>	<u>, 48</u>	3,1	33.
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
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			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?			2b	X	<u> </u>
	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	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

PURCHASE COLLEGE FOUNDATION,

Go to www.irs.gov/Form990 for instructions and the latest information.

INC.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

C/O SUNY PURCHASE 23-7066616 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

C/O SUNY PURCHASE

23-7066616 Page 2

Part II 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	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	3860662.	1385211.	2097359.	2278857.	1627506.	11249595.		
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	1150713.	1069592.	1022006.	990,436.	839,450.	5072197.		
4	Total. Add lines 1 through 3	5011375.	2454803.	3119365.	3269293.	2466956.	16321792.		
	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)						1670267.		
6	Public support. Subtract line 5 from line 4.						14651525.		
	etion B. Total Support						<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
	Amounts from line 4	5011375.	2454803.	3119365.	3269293.	2466956.	16321792.		
	Gross income from interest.				0 = 0 0 = 0 0 1				
Ŭ	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	1272708.	1220665.	1745558.	1317169.	1419457.	6975557.		
۵	Net income from unrelated business	12727001	12200031	17133301	13171030	1111111111	03733371		
•	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
10	or loss from the sale of capital								
	•								
44	assets (Explain in Part VI.)						23297349.		
		ete (eee inetwystie	no)				,600,717.		
	Gross receipts from related activities, First 5 years. If the Form 990 is for the	•		iourth or fifth town			,000,717.		
ıs		· ·		•					
Sec	organization, check this box and storetion C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •					
	Public support percentage for 2022 (I			rolumn (f))		14	62.89 %		
	Public support percentage from 2021					15	67.11 %		
	33 1/3% support test - 2022. If the c								
104							T		
h	stop here. The organization qualifies as a publicly supported organization								
	and stop here. The organization qual								
17a									
. , a	7a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and 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 te			=	· ·	VITIOW LITE Organiz			
h	10% -facts-and-circumstances test					7a and line 15 is	10% or		
b							10/0 01		
	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								
19	•		-		•				
10	Private foundation. If the organization	ni did not check a f	JUA UITIIIIE 13, 168	a, 100, 17a, 01 17b	, check this box at		/Farm 000\ 2022		

Schedule A (Form 990) 2022

23-7066616 Page 3

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						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1	T			
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		•	•		· —
0-	check this box and stop here						
	ction C. Computation of Publi					T T	
	Public support percentage for 2022 (I	, (,,	,	(//		15	<u>%</u>
	Public support percentage from 2021 ction D. Computation of Investigation					16	%
	•			no 13 column (f)		17	0/
	Investment income percentage for 20						<u>%</u>
	Investment income percentage from 3					18 3 1/3% and line 1	7 is not
198	33 1/3% support tests - 2022. If the						
L	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the						
i.	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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")? *If* "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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 disqualified person (as defined on 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.)

	Yes	No
1		
•		
2		
3a		
Ja		
3b		
0.		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
_		
6		
7		
8		
9a		
9b		
9c		
90		
10a		
40.		
10b ule A (Forn	n 000\	2022

		-/00001	o Pa	age 5
Pa	rt IV Supporting Organizations (continued)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
44	Lies the every ration accepted a gift or contribution from any of the following nervone?		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
а	11c below, the governing body of a supported organization?	11a		
h	A family member of a person described on line 11a above?	11b		
		TID		
C	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	11c		
Sec	<u>detail in</u> Part VI. etion B. Type I Supporting Organizations	110		
	and the supportant of the supportant of the support		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	or	100	110
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office			
	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 supports			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	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,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	·		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	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			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc	tions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction	I	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а				
	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	0-		
L	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on 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	Oh.		
2	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а		20		
h	trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
b	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
	or the supported organizations: II Tes. Describe III • Mi • • I the fole played by the organization III this fedard.			

			PUR	CUADE	COLLEGE	FOUNDATION,	T1//
chedule A	(Form 990)	2022	C/0	SUNY	PURCHASE	3	

1	Check here if the organization satisfied the Integral Part Test as a qualifyir All other Type III non-functionally integrated supporting organizations mus		•	Part VI). See instructions
Sect	ion A - Adjusted Net Income	<u>t complete c</u>	(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		
ect	on 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		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
•	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
<u>-</u> 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		
	ion C - Distributable Amount	1 9		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		
<u>-</u> 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			
J	emergency temporary reduction (see instructions).	6		
7			Type III supporting area	nization (see
•	Check here if the current year is the organization's first as a non-functiona	ny integrated	i Type iii supportiilig orga	unzauon (SEE

Schedule A (Form 990) 2022

Section D - Distributions	_	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu	ued)	3 - 7000010 Page 7
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than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020	5	Remaining underdistributions for years prior to 2022, if				
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020		any. Subtract lines 3g and 4a from line 2. For result greater				
and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020		than zero, explain in Part VI. See instructions.				
Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020	6	Remaining underdistributions for 2022. Subtract lines 3h				
7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020		and 4b from line 1. For result greater than zero, explain in				
and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020		Part VI. See instructions.				
8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020	7	-				
a Excess from 2018 b Excess from 2019 c Excess from 2020	8					
b Excess from 2019 c Excess from 2020						
c Excess from 2020						
a Excess from 2021		Excess from 2021				
e Excess from 2022						

Schedule A (Form 990) 2022

Part VI	Supplemental Information Deside the conference required by Dest II like 40. Dest II like 475 and 75. Dest III like 40.
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE

Employer identification number 23-7066616

Par			nds or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Bonor advised funds	(b) Farias and other accounts
1 2	Total number at end of year		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor a	dvised funds
3	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
U	for charitable purposes and not for the benefit of the donor o		
Par			
1	Purpose(s) of conservation easements held by the organization		55, · a. · · · , · · · · ·
·	Preservation of land for public use (for example, recrea		on of a historically important land area
	Protection of natural habitat	· —	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the fo	orm of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
	Number of conservation easements on a certified historic stru		
	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling	g of
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conse	ervation easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section	170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expe	ense statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stat	tements that describes the
Б.	organization's accounting for conservation easements.	A J. IPala Saal Tarana	Oller O're'le Assets
Par	t III Organizations Maintaining Collections of	·	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research	in furtherance of public
	service, provide in Part XIII the text of the footnote to its finar		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in	furtherance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
			The state of the s
2	If the organization received or held works of art, historical tre-		ncial gain, provide
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1		
-	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 202

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

23-7066616 Page 2

Par	t III Organizations Maintaining C	ollections of Art	t, Historical Tre	asures, or Othe	r Simil	ar Assets	(continue	d)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	ollowing that make s	significan	t use of its		
	collection items (check all that apply):							
а	Public exhibition	d	Loan or exc	hange program				
b	Scholarly research	е		5 1 5				
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	e organization's exe	mpt purr	ose in Part	XIII.	
5	During the year, did the organization solicit o							
•	to be sold to raise funds rather than to be ma						Yes	No
Par								
	reported an amount on Form 990, Par		·· ···· J ··			,,	,	
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contributions	s or other assets not	included			
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII							
_		and compress and re-	.og table.				Amount	
c	Beginning balance				10			
	Additions during the year							
	Distributions during the year							
f	Ending balance				16			
2a	Did the organization include an amount on Fo						Yes	X No
	If "Yes," explain the arrangement in Part XIII.				•] 100	
Par								
	Complete	(a) Current year	(b) Prior year	(c) Two years back		e vears back	(e) Four yea	ars back
12	Beginning of year balance	77,354,169.	90,209,904.	74,412,640.		949,084.		8,119.
b	Contributions	556,057.	944,302.			565,797.	· ·	3,272.
	Net investment earnings, gains, and losses	6,621,844.	-8,809,815.			406,578.		5,497.
4	Grants or scholarships	1,145,581.	969,007.			,006,769.		1,403.
u	Other expenditures for facilities	_,,			2,000,700		-,	
-		3,568,889.	4,021,215.	2,461,425.	1	,688,894.	1 47	6,383.
£	and programs	0,000,000.	1,021,220.	2,101,120.	_	, • • • , • • • • •	-,-/	*,****
	Administrative expenses	79 817 600	77,354,169.	90,209,904.	74	412,640.	77 94	9,084.
g	Provide the estimated percentage of the curr				, , -	,	,5-	,,,,,,
2	Board designated or quasi-endowment	8.0400	% Column (a)) Helu as.				
a h	Permanent endowment 56.6600	%						
b	25 2000	⁷⁰ %						
C								
2-	The percentages on lines 2a, 2b, and 2c short		tion that are hald an	d administered for t	h o			
Sa	Are there endowment funds not in the posses	SSION OF THE Organiza	illon that are nelu ar	iu auriinistereu ior t	ie		Ye	s No
	organization by:						3a(i)	X
	(i) Unrelated organizations						3a(ii)	$\frac{1}{X}$
h	(ii) Related organizations							+**
4	Describe in Part XIII the intended uses of the						SD	
	t VI Land, Buildings, and Equipm		willett fullus.					
	Complete if the organization answered). Part IV. line 11a. S	ee Form 990. Part X	line 10.			
	Description of property	(a) Cost or o	i	<u>i</u>	Accumula	ntod .	(d) Pook ve	
	Description of property	basis (investn		' '	epreciation	II	(d) Book va	alue
10	Land	,		(-3.5.)				
	Land	II						
	Buildings							
	Leasehold improvements	II						
	Equipment							
	Other		V and summer (D) 15-11	<u> </u>		+		0.
เบเสเ	. Aud iiiles ta liiiluugit le. (Collimn (a) miist e	uuai rorm 990. Part .	x column (B) line 10	JG.1				• •

Schedule D (Form 990) 2022

C/O SUNY PURCHASE

Ochedale B (Form 550) 2022 57 6 B 521 2 2 6			70000 Tage
Part VII Investments - Other Securities.	on Farm 000 Back IV line 4	dla Oca Farra 000 Bart V Pros 40	
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) HRDNG LVNR INTERNATIONAL			
(B) EQUITY	6,983,774.	END-OF-YEAR MARKET	
(C) HEDGE FUNDS	17,881,986.	END-OF-YEAR MARKET	
(D) TIAA-CREF SOC CHOICE	18,208,349.	END-OF-YEAR MARKET	
(E) DODGE & COX INTL STCK-1	6,956,617.	END-OF-YEAR MARKET	VALUE
(F) VANGUARD CASH RESERVES			
(G) FEDERAL - ADM	8,336,628.	END-OF-YEAR MARKET	VALUE
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	58,367,354.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-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 1	1d. 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	e 15.)		
Part X Other Liabilities.	·		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DUE TO PURCHASE COLLEGE			23,337.
(3) DUE TO PURCHASE COLLEGE			·
(4) ASSOCIATION (PCA)			258.
(5) DUE TO RESEARCH FOUNDATION	N FOR		
(6) SUNY			31,005.
(7) INVESTMENTS HELD FOR OTHER	RS (PCA		1=,::0
(8) AND FRIENDS)	,		10,980,278.
(9) GIFT ANNUITY PAYABLE			5,975.
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)		11,040,853.
Column (b) must equal 1 om 500, 1 art 7, col. (b) inte	<u>, = v./ </u>		

Schedule D (Form 990) 2022

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

I ai	Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		ii nevellue pei ne	turri.	
1	Take the control of the control of the control of the defendance of the control o			1	9,970,823.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				3,310,023.
	Net unrealized gains (losses) on investments	2a	6.102.900.		
	Donated services and use of facilities		6,102,900. 839,450.		
	Recoveries of prior year grants		,		
	Other (Describe in Part XIII.)				
	Add lines 2a through 2d			2e	6,942,350.
	Subtract line 2e from line 1			3	3,028,473.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	192,826.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	192,826.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)t XII Reconciliation of Expenses per Audited Financial Stateme			5	3,221,299.
Par			th Expenses per F	Returi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	6,633,085.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
	Donated services and use of facilities		839,450.		
	Prior year adjustments			-	
	Other losses			-	
	Other (Describe in Part XIII.)				020 450
	Add lines 2a through 2d			2e	839,450. 5,793,635.
	Subtract line 2e from line 1			3	5,795,055.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	امدا	102 826		
	Investment expenses not included on Form 990, Part VIII, line 7b		192,826.	-	
	Other (Describe in Part XIII.) Add lines 4a and 4b			4c	192,826.
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	5,986,461.
	t XIII Supplemental Information.				3,300,101
lines 2	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add TV, LINE 4			; Part)	K, line 2; Part XI,
THE	ENDOWMENT FUNDS ARE DESIGNATED TO PROVIDE	E LONG	G TERM SUPPO	RT I	FOR THE
PRO	GRAMS OF SUNY PURCHASE COLLEGE. THE FUNDS	ARE U	JSED TO SUPP	ORT	
SCH	OLARSHIPS AND CAMPUS PROGRAMS.				

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization PURCHAS	E COLLEGE FOUNDATI	ON,	IN	С.		Employer ide	ntification number
C/O SUN	IY PURCHASE					23-7066	616
Part I Fundraising Activities required to complete this par	Complete if the organization answert.	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	sed funds through any of the following with a solicitar or oral agreement with any individual control or entity in connection with providuals or entities (fundraisers) pursured.	ation of ation of I fundra I (include professi	non-g gover aising ding of onal fo	overnment grants nment grants events fficers, directors, trus undraising services?		X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		Did raiser ustody itrol of utions?	(iv) Gross receipts from activity		Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
THE STELTER COMPANY - 10435	PLANNED GIVING PROGRAM -	Yes	No				
NEW YORK AVE., DES MOINES, IA	WEBSITE AND EMAILS		х	0.		6,100.	-6,100.
MCALLISTER & QUINN LLC - 1030							
15TH STREET, NW SUITE 590	GRANT WRITING SERVICES		х	0.		108,600.	-108,600.
THE TAGS GROUP - 364 W 18TH	MARKETING COMMUNICATIONS						
ST #6G, NEW YORK, NY 10011	AND EVENT SUPPORT		х	0.		76,060.	-76,060.
3 List all states in which the organization or licensing.		contrib	utions			'	
CA, CO, ME, MD, MA, MI, MN,		SC,V	ΙΑ,V	VI,AL,AR,CO	,FI	GA, KS,	KY,LA,MS
MI, NM, NC, OK, OR, RI, TN,	VA,WV,HI,NV,UT,CT						

232081 10-27-22

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SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2022

Part II Fundraising Events C/O SUNY PURCHASE

ГС	rt I	of fundraising Events . Complete if the of fundraising event contributions and gro	_		The state of the s	
		and give	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
Ф			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
benses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
۵	8	Entertainment Other direct expenses				
	-	Direct expense summary. Add lines 4 through	9 in column (d)			
		Net income summary. Subtract line 10 from lin	. ,			
Pa	rt I	II Gaming. Complete if the organization a		990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re∕	1	Gross revenue				
es	2	Cash prizes				
xpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		er the state(s) in which the organization conducter the organization licensed to conduct gaming ac	_			Yes No
		No," explain:				
		re any of the organization's gaming licenses re			year?	Yes No
		-27.22				dule G (Form 990) 2022

PURCHASE COLLEGE FOUNDATION, INC.

Sch	edule G (Form 990) 2022 C/O SUNY PURCHASE 23-	<i>/</i>	ΤО	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	es	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	es	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		<u>%</u>
b	An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🔲 Y	es	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
10				
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	, 📖 Y	es	└─ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
D -	organization's own exempt activities during the tax year \$			
Ра	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, line:	s 9, 9	b, 10b,
	100, 100, 10, and 170, as applicable. Also provide any additional information. See instructions.			
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER:	S:		
 (I) NAME OF FUNDRAISER: THE STELTER COMPANY			
`-	, mile of romanical residence of the contract			
<u>(I</u>) ADDRESS OF FUNDRAISER: 10435 NEW YORK AVE., DES MOINES, IA	50322		
 (I) NAME OF FUNDRAISER: MCALLISTER & QUINN LLC			
<u>(I</u>) ADDRESS OF FUNDRAISER:			
<u>10</u>	30 15TH STREET, NW SUITE 590 WEST, WASHINGTON, DC 20005			

PURCHASE COLLEGE FOUNDATION, INC.

Schedule G	(Form 990) C/O Supplemental Information	SUNY PURCHASE	23-7066616	Page 4
Part IV	Supplemental Information	(continued)		
		(Softendou)		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

PURCHASE COLLEGE FOUNDATION, INC.

Go to www.irs.gov/Form990 for the latest information.

2022

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule I (Form 990) 2022

C/O SUNY I	PURCHASE						23-7066616
Part I General Information on Grants ar	nd Assistance					•	
1 Does the organization maintain records to	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to award the grants or assist	tance?						X Yes No
2 Describe in Part IV the organization's pro-	cedures for monit	oring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to D					anization answered "Y	es" on Form 990, Part I	V, line 21, for any
recipient that received more than \$		1	onal space is need	1	(e) NA-11 1 - 5		
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
 Enter total number of section 501(c)(3) ar Enter total number of other organizations 	-	•	e line 1 table	<u> </u>	<u> </u>	1	

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Page 2

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 Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(e) Method of valuation (f) Description of noncash assistance (book, FMV, appraisal, other) recipients cash grant cash assistance SCHOLARSHIPS ARE GIVEN TO STUDENTS BASED ON NEED. ACADEMIC PERFORMANCE AND ARTISTIC ACHIEVEMENTS. 854 2,299,228, 0 Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. PART I, LINE 2: 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 EXPERIENCES AND SUPPORT THEIR ABILITY TO COMPLETE THEIR DEGREE.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to 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.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE

Employer identification number 23-706616

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROMOTION AND SUPPORT OF PURCHASE COLLEGE, STATE UNIVERSITY OF NEW

YORK. UNIQUELY, PURCHASE COLLEGE COMBINES BOTH RENOWNED AND HIGHLY

SELECTIVE PROFESSIONAL AND CONSERVATORY ARTS PROGRAMS WITH

DISTINGUISHED LIBERAL ARTS AND SCIENCES PROGRAMS. THE LARGEST PROGRAMS

ARE IN VISUAL ARTS, MUSIC, LIBERAL STUDIES, PSYCHOLOGY, DANCE, BIOLOGY,

JOURNALISM AND NEW MEDIA.

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

OTHER PROGRAM SERVICES

EXPENSES \$ 880,467. INCLUDING GRANTS OF \$ 0. REVENUE \$ 236,612.

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

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

Schedule O (Form 990) 2022

232211 10-28-22

Schedule O (Form 990) 2022 Page **2**

Name of the organization PURCHASE COLLEGE FOUNDATION, INC.

C/O SUNY PURCHASE

Employer identification number 23-7066616

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 SHE 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.

DURING THE COURSE 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.

Schedule O (Form 990) 2022	Page 2
Name of the organization PURCHASE COLLEGE FOUNDATION, INC. C/O SUNY PURCHASE	Employer identification number 23-7066616
FORM 990, PART XII, LINE 2C:	
THERE IS ONE AUDIT COMMITTEE FOR PURCHASE COLLEGE FOUNDATI	ON AND
FRIENDS OF THE NEUBERGER MUSEUM. EACH OF THE RELATED ORGAN	IZATIONS'
BOARD IS REPRESENTED ON THIS COMMITTEE.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

PURCHASE COLLEGE FOUNDATION, INC.

C/O SUNY PURCHASE

Part I Identification of Disregarded Entities. Complet	e if the organization answered "Yes'	on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	me End-of-year	assets [(f) Pirect conf entity	trolling	l
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34,	pecause it had one	or more related to	ax-exempt	ot	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct contro entity	ling	(g Section 5 contro entit	olled
•		,y,		501(c)(3))			Yes	No
PURCHASE COLLEGE FOUNDATION HOUSING CORP -								
13-4086734, 735 ANDERSON HILL ROAD,								
PURCHASE, NY 10577	RESIDENTIAL HOUSING	NEW YORK	501(C)(3)	LINE 10				X
PURCHASE HOUSING CORPORATION II - 82-1262347								
735 ANDERSON HILL ROAD								
PURCHASE, NY 10577	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) 2022

OMB No. 1545-0047

Employer identification number

23-7066616

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.

(a) Name, address, and EIN of related organization (b) Primary activity Primary activity Of related organization (c) Legal domicile (state or foreign country) Primary activity Of related organization (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income Of related, unrelated, excluded from tax under sections 512-514) (g) Share of total income Of rend-of-year assets (h) Disproportionate allocations? Yes No (i) General or managing partner? Yes No
Name, address, and EIN of related organization Primary activity Primary activity Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Percentage ownership Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514)
toreign country) State of foreign country excluded from tax under sections 512-514) assets 20 of Schedule Factor Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes Yes
Country Sections 512-514) Yes No K-1 (Form 1065) Yes No

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		tion b)(13) rolled tity?
		country)		,				Yes	No
-									
-	-								
-									
	-								

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

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

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		<u>X</u>
					1b		X
С	Gift, grant, or capital contribution from related organization(s)				1c	Х	
					1d	Х	
					1e		X
f	Dividends from related organization(s)				1f		X
					1g		X
h	Purchase of assets from related organization(s)				1h		X
					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
	, , , , , , , , , , , , , , , , , , , ,				11		<u>x</u>
					1m		X
					1n		X
					10		<u>x</u>
Ü	Onaling of paid employees with related organization(s)				10		
р	Reimbursement paid to related organization(s) for expenses				1p		Х
b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) f Dividends from related organization(s) g Sale of assets from related organization(s) f Exchange of assets from related organization(s) f Exchange of assets with related organization(s) f Lease of facilities, equipment, or other assets to related organization(s) f Performance of services or membership or fundraising solicitations for related organization(s) f Performance of services or membership or fundraising solicitations for related organization(s) f Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) f Peimbursement paid to related organization(s) f Reimbursement paid to related organization(s) for expenses f Reimbursement paid to related organization(s) for expenses f Other transfer of cash or property to related organization(s)		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 whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," and "Yes,"	ho must complete th	is line, including covered relat	tionships and transaction thresholds.			
	(a) Name of related organization	Transaction			olved		
(1)							
(0)							
(2)	·						
(3)							
(4)							
(5)							
(6)							
32163	09-14-22	4.0		Schedule	R (Forr	n 990)	2022

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.

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec	Share of	Share of	Dispro	por-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
of entity		(state or foreign	related, unrelated,	partners sec 501(c)(3) orgs.?	total	end-of-year	allocati	ite ons?	amount in box 20	managi	ownership
•		country)	sections 512-514)	Yes No		assets	Yes	No	(Form 1065)	Yes N	
			000000000000000000000000000000000000000	Tes No			1165	INO	(1 01111 1000)	resin	'
							+			\vdash	+
							\Box				
							+-+			\vdash	
							1 1				
							\sqcup			$\sqcup \!\!\!\! \perp$	
							+			\vdash	+