** PUBLIC DISCLOSURE COPY **

Department of the Treasury

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 Open to Public Inspection

Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2015 calendar year, or tax year beginning JUL 1 2015 and ending JUN 30 2016 Check if applicable: C Name of organization D Employer identification number Address change URBAN LAND INSTITUTE Name change Doing business as 53-0159845 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 2001 L STREET NW (202) 624-7000 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 72,957,291. Amended return WASHINGTON DC 20036 H(a) Is this a group return Applica-tion F Name and address of principal officer: PATRICK L. PHILLIPS for subordinates? Yes x No pending H(b) Are all subordinates included? Yes SAME AS C ABOVE 527 I Tax-exempt status: x 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.ULI.ORG H(c) Group exemption number ▶ K Form of organization: x Corporation Trust Association Other > L Year of formation: 1936 M State of legal domicile: IL Part I | Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 15 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 241 Total number of volunteers (estimate if necessary) 6 7200 7 a Total unrelated business revenue from Part VIII, column (C), line 12 1,641,439. b Net unrelated business taxable income from Form 990 T, line 34 -19,636. Current Year Contributions and grants (Part VIII, line 1h) ' 9,863,831 4,615,943. Revenue Program service revenue (Part VIII, line 2g) 63,320,316 67,645,840. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,157,697 695,508. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 74.341.844 72,957,291. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1 081 182 1,516,530. Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 23,496,309 25.079.641. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 42,203,300 47,445,111. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 66 780 791 74 041 282. Revenue less expenses. Subtract line 18 from line 12 7,561,053 -1,083,991. OF Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 71,648,653 74,322,989. 21 Total liabilities (Part X, line 26) 21 055 245 25,595,107. Vet Net assets or fund balances. Subtract line 21 from line 20 50,593,408 48 727 882. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. PUBLIC INSPECTION COPY - RETAIN FOR Signature of officer Date Sign YOUR RECORDS Here PATRICK L. PHILLIPS, Type or print name and title PTIN Preparer's signature Check Print/Type preparer's name Paid self-employed WILLIAM E. TURCO, CPA P00369217 Preparer m's EIN Firm's name RSM US LLP 42-0714325 Use Only Firm's address > 9737 WASHINGTONIAN BLVD., #400 GAITHERSBURG, MD 20878-7340 Phone no. (301) 296-3600

May the IRS discuss this return with the preparer shown above? (see instructions)

x Yes

12-16-15

SEE SCHEDULE O FOR CONTINUATION(S)

4d Other program services (Describe in Schedule O.)

4e Total program service expenses 59 088 510.

13,865,276, including grants of \$

1,394,722.) (Revenue \$ 21,722,999.)

Form 990 (2015) URBAN LAND INSTITUTE 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?	2	X	
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 Revenue Procedure 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			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	_7_		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	40-		244
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		X
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	v	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	_ A
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1.14		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
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	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	000	X

Form **990** (2015)

Form 990 (2015) URBAN LAND INSTITUTE Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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		
ď	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		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):		1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "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		х
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	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	х	
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Form 990 (2015) Part V Statements Regarding Other IRS Filings and Tax Compliance

	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 1a 244							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			1				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c	х					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 241							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	X					
b	b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O							
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	Х					
b	If "Yes," enter the name of the foreign country: ► UNITED KINGDOM, HONG KONG, CHINA			1				
	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		5b		Х				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
_	were not tax deductible?	6b		-				
7	Organizations that may receive deductible contributions under section 170(c).	_		885				
а	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?		_	X				
	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	7b		_				
C	to file Form 8282?	7c		x				
Н	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		х				
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							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders N/A 11a							
D	Gross income from other sources (Do not net amounts due or paid to other sources against							
100	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?	100						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a						
u	Note. See the instructions for additional information the organization must report on Schedule O.	,ua						
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							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
		Голи	000	(004E)				

Form 990 (2015) URBAN LAND INSTITUTE Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section 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 in Schedule O. 15 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 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 X 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 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a 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 in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Х Did the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a **b** Other officers or key employees of the organization 15b Х If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

7	List the states with which a copy of this Form 990 is required to be filed FCA_CT_DC_GA
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.
	x Own website Another's website x Upon request Other (explain in Schedule O)
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records:

MICHAEL TERSECK, ULI - (202) 624-7000 2001 L STREET NW NO. 200 WASHINGTON DC 20036

Form **990** (2015)

532006 12-16-15

Employees, and Independent Contractors

Page 7 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Check if Schedule O contains a response or note to any line in this Part VII

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

- 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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100.000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	box	(C) Position o not check more than one x, unless person is both an ficer and a director/trustee)				h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RANDALL ROWE GLOBAL CHAIRMAN	2.00	x		х				0.	0.	
(2) THOMAS TOOMEY	2.00	Δ.		Δ_				0.	0.	0.
TREASURER	2.00	x		х				0.	0.	0.
(3) JONATHAN BRINSDEN	2,00	-				П			· ·	
SECRETARY		x		x				0.	0.	0.
(4) LYNN THURBER	2,00								-:10	
IMMEDIATE PAST CHAIRMAN		x						0.	0.	0.
(5) GEOFFREY STACK	2.00									
ULI FOUNDATION CHAIRMAN		х						0.	0.	0.
(6) ROGER ORF	2,00									
ULI EMEA CHAIRMAN		х		_				0.	0.	0.
(7) RAYMOND CHOW	2.00									
ULI ASIA PACIFIC CHAIRMAN		Х	_	_	_	_		0.	0.	0.
(8) IAN HAWKSWORTH	2,00									
MEMBER		Х		_		-		0.	0,	0.
(9) STEPHEN NAVARRO	2.00									
MEMBER		Х				-	_	0.	0.	0.
(10) OLIVIER PIANI	2.00								_	19
MEMBER		X		_		-		0.	0.	0.
(11) RICHARD PRICE	2.00	x								
MEMBER (12) DEBORAH RATNER SALZBERG	2,00	X				1		0.	0.	0.
MEMBER	2.00	x						0.	0.	0.
(13) DIANA REID	2,00	A						0.	0.	
MEMBER	2,00	x						0.	0.	0.
(14) OWEN THOMAS	2,00							Ů,	0,	
MEMBER		x						0.	0.	0.
(15) LAURA LEE MARTIN	2.00									
MEMBER		x						0.	0.	0.
(16) PATRICK L. PHILLIPS	35.50									
GLOBAL CEO	2,00	х		х				723,749.	0.	15,900.
(17) CHERYL G. CUMMINS	37,50									_
GLOBAL GOVERNANCE OFFICER				Х				501,758,	0.	21,797.

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Form 990 (2015)

	INSTITUTE								53-0159845	Page •
Part VII Section A. Officers, Directors, 1	rustees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
18) MICHAEL J. TERSECK	37.50									160 2000000
ĈFO .		_	_	X	_			411,084.	0.	19,907
(19) JOHN P. FITZGERALD	37.50									
HIEF EXECUTIVE ASIA		_		X			_	392,375.	0.	22,111
20) LISETTE VAN DOORN	37.50									
CHIEF EXECUTIVE EMEA				Х				369,051.	0.	0
21) MARILEE UTTER	37.50									
VP, DISTRICT/NATIONAL COUNCIL					Х			297,801.	0.	26,969
22) JASON L. RAY	37.50									
HIEF TECHNOLOGY OFFICER			_		Х			296,500.	0.	32,744
23) LELA AGNEW	37.50									
VP, COMMUNICATIONS					Х			265,970.	0.	14,476
24) DAVID HOWARD	37,50									
VP, DEVELOPMENT					х			259,943.	0.	22,011
25) MARY BETH CORRIGAN	37.50							2	ľ	
VP, CONVENINGS		Ш			х			220,255.	0.	12,297
26) STEPHANIE WASSER	37.50									
VP, COUNCILS					х			200,014.	0.	15,756
1b Sub-total			*****	*****	*****	****		3,938,500.	0.	203,968
c Total from continuation sheets to Par								1,262,089.	0.	76,057
d Total (add lines 1b and 1c)	************	2007.000	*****				>	5,200,589.	0.	280,025
2 Total number of individuals (including b	ut not limited to th	ose	liste	ed al	hove	a) wh	no re	eceived more than \$100	0.000 of reportable	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 x

Section B. Independent Contractors

1 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)	(B)	(C)
Name and business address	Description of services	Compensation
FREEMAN DECORATING		
PO BOX 650036, DALLAS, TX 75265-0036	MEETING ARRANGEMENT LOGISTICS	2,699,931.
ACF SOLUTIONS		
11800 SUNRISE VALLEY DR, RESTON, VA 20191	IT CONSULTING	1,424,236.
FREEMAN AUDIO VISUAL SOLUTION		
PO BOX 650519, DALLAS, TX 75265-0519	MEETING AUDIOVISUAL CONSULTING	1,220,403.
RELIANCE TELESERVICES INC		
1510 RICHIE HWY SUITE 204, ARNOLD, MD 21012	CUSTOMER SERVICE	960,681.
SMG		
747 HOWARD STREET, SAN FRANCISCO, CA 94103	CONVENTION CENTER SERVICES	765,523.
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	
\$100,000 of compensation from the organization	55	

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2015)

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Part VII Section A. Officers, Directors, 7 (A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	(c		Pos call	ition		ıly)	Reportable compensation from	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)		compensation from the organization and related organizations
27) LORI G. HATCHER	37.50									
VP, MEMBERSHIP/MARKETING		_		_	Х	_	_	192,687.	0.	22,45
28) GAYLE BERENS	37.50									
SVP, EDUCATION		-			_	X		237,913.	0.	9,82
(29) FELIX CIAMPA	37.50					J.		040 450		CATAL SERVICE
DISTRICT COUNCIL EXECUTIVE	37 50					X		219,450.	0.	13,73
(30) THOMAS MURPHY SENIOR RESIDENT FELLOW	37.50					x		206,553.	0.	11,87
(31) DEBRA L. THROCKMORTON	37.50		\vdash			^		400,553,	0.	11,87
SVP, FINANCE	37.30					x		206,299.	0.	15,79
(32) SARENE MARSHALL	37.50							200,233.	0.	13,72
ED SUSTAINABILITY						x		199,187.	0.	2,36
								y		
otal to Part VII, Section A, line 1c	_1							1 262 089.		76,05

Form 990 (2015) URBAN LAND INSTITUTE 53-0159845 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (**D)** Revenue excluded from tax under (B) (C) (A) Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 10 d Related organizations 1d 4,193,850 e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 422,093 g Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f 4 615 943 Business Code Program Service Revenue 2 a COUNCILS 900099 29 154 879 29,154,879 15,788,344 15,788,344 b MEETINGS & CONFERENCES 900099 c MEMBERSHIP DUES 900099 14,750,390 14,750,390 d PUB./URBAN LAND MAG. 541800 2,644,074 1,002,635 1,641,439 e CONTENT 900099 2,592,078 2,592,078 f All other program service revenue 900099 2,716,075 2 716 075 Total, Add lines 2a-2f 67 645 840 Investment income (including dividends, interest, and other similar amounts) 586,034 586,034, 4 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 109,474. d Net gain or (loss) 109,474. 109,474 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses _____b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19a b Less: direct expenses _____ b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . Miscellaneous Revenue **Business Code** 11 a b d All other revenue

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1,641,439,

695,508.

Total revenue. See instructions.

e Total. Add lines 11a-11d

72 957 291

66 004 401

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URBAN LAND INSTITUTE Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns, All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX X (A) Total expenses Do not include amounts reported on lines 6b, Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 1,199,511 1.199.511 Grants and other assistance to domestic individuals. See Part IV, line 22 212 019 212 019 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 105,000 105.000 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 4.443.393 1,779,642 2,410,116 253,635. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 17,113,941, 13,867,443, 2,576,865 669,633. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 684.367 496,738 158,319 29,310. Other employee benefits 1,578,650 1,145,841 365,198 67,611. 10 Payroll taxes 1,259,290 914,038 291,319 53.933. 11 Fees for services (non-employees): Management Legal b 197,078 189,994 7.084 Accounting 256,127 78,630 177,497 d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees _____ 67,175 67,175 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 12,721,156 11,134,142 1,493,196 93.818. Advertising and promotion 12 216,556 173,643 41,721 1,192. 13 Office expenses 1,881,254 1,644,279 208,688 28,287. Information technology 14 1,567,468 1,567,468 Royalties 15 16 Occupancy 1,961,620 1,376,965 489,557 95,098. 17 Travel 2.963.504 2,467,711 422,890 72,903. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 12,515,932 12,144,831 262,903 108,198. Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 555.327 160,592 31,197. 363.538 23 Insurance 266,395 50,819 215,576 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) ... DISTRICT COUNCIL DUES S 4.121.034 4,121,034 DISTRICT COUNCIL ADMINI 3,488,605 3,488,605 CREDIT CARD FEES 860,530 860,406 102 22. d ULI PRODUCTS FROM STOCK 110,111 109,986 125 All other expenses 3 695 239 1,096,520 2,589,980 8,739. Total functional expenses. Add lines 1 through 24e 25 74.041.282 59.088.510 13,439,196 1,513,576. 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 if following SOP 98-2 (ASC 958-720)

Form 990 (2015)

Form 990 (2015) t
Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	400.	1	
2	Savings and temporary cash investments	14,337,550.	2	15,521,996.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,299,421.	4	1,616,952.
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
ets	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8	Inventories for sale or use	246,888.	8	155,601,
9	Prepaid expenses and deferred charges	1,341,263.	9	1,249,201,
10a				
	basis. Complete Part VI of Schedule D 10,012,354.			
b		1,919,501,	10c	4,615,437.
11	Investments - publicly traded securities	10,555,618.	11	8,023,366
12	Investments - other securities. See Part IV, line 11	5,035,604.	12	6,216,413
13	Investments · program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	36,912,408.	15	36,924,023
16	Total assets. Add lines 1 through 15 (must equal line 34)	71,648,653,	16	74,322,989
17	Accounts payable and accrued expenses	6,903,056.	17	6,129,717,
18	Grants payable		18	
19	Deferred revenue	14,028,976.	19	15,597,857
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
<u> </u>	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	123,213.	25	3,867,533,
26	Total liabilities, Add lines 17 through 25	21,055,245,	26	25,595,107.
.	Organizations that follow SFAS 117 (ASC 958), check here ▶ x and			
	complete lines 27 through 29, and lines 33 and 34.			2181/2222 (2122)
27	Unrestricted net assets	19,684,673.	27	19,399,153,
28	Temporarily restricted net assets	30,908,735.	28	29,328,729.
29	Permanently restricted net assets		29	
[Organizations that do not follow SFAS 117 (ASC 958), check here			
0 0	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets of Fund balances 27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	Retained earnings, endowment, accumulated income, or other funds		32	Name and American
_ 33	Total net assets or fund balances	50,593,408.	33	48,727,882.
34	Total liabilities and net assets/fund balances	71 648 653.	34	74,322,989. Form 990 (2015)

Form 990 (2015)

Forn	1990 (2015) URBAN LAND INSTITUTE	53-0159845		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				x
1	Total revenue (must equal Part VIII, column (A), line 12)	1.	72	957	291.
2	Total expenses (must equal Part IX, column (A), line 25)	2	74	041	282.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	083	991.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	50	593	408.
5	Net unrealized gains (losses) on investments	5		-562	648.
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 in Schedule O)	9	9	218	887.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	48	727	882.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				بلط
		7		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 in Schedule	O.:			
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	Х	-
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?	TORREST !	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		L
			Form	990	(2015)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization **Employer identification number** 53-0159845 URBAN LAND INSTITUTE Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 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, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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). 10 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of (i) Name of supported listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) instructions) instructions) Yes Total

Schedule A (Form 990 or 990-EZ) 2015 URBAN LAND INSTITUTE 53-0159845 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	ction A. Public Support			411			
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and	***************************************	700		1		
	membership fees received. (Do not						
	include any "unusual grants.")						
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					1	
Ŭ	furnished by a governmental unit to		1				
	the organization without charge						
4	Total, Add lines 1 through 3					1	1
	The portion of total contributions						
0	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,						
c	column (f)						-
	Public support. Subtract line 5 from line 4.						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4	(a) 2011	(10) 2012	(0) 2010	(4) 2014	(e) 2010	TI) Total
	Gross income from interest,					1	
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
•	Net income from unrelated business			-		1	-
9							
	activities, whether or not the						
40	business is regularly carried on					 	
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.) Total support. Add lines 7 through 10					-	
	• • • • • • • • • • • • • • • • • • • •	ete (eee inetrueti	iona)			40	
	Gross receipts from related activities, First five years. If the Form 990 is for					12	
13	organization, check this box and stop	-					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage			***************************************	
-	Public support percentage for 2015 (column (fl)		14	%
	Public support percentage from 2014					15	%
	33 1/3% support test - 2015. If the						
TOU	stop here. The organization qualifies	-					
h	33 1/3% support test - 2014. If the						
	and stop here. The organization qual	-					
172	10% -facts-and-circumstances tes						
170	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	•	•	
h	10% -facts-and-circumstances tes						
D	more, and if the organization meets the						
	organization meets the "facts-and-circ				•		
10	Private foundation. If the organization		•	·			ne
10	Filvate Touridation. If the Organization	ar did flot offect a	DOX OIT MINE TO, TO	, 100, 17A, 01 17	D ₁ Uneck this DOX		00 == 000 EZ\ 001E

532022 09-23-15

Schedule A (Form 990 or 990-EZ) 2015 URBAN LAND INSTITUTE Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and					, v	
	membership fees received. (Do not						
	include any "unusual grants.")	15,384,567.	18.062.894.	20,000,411.	23.784.758.	19,366,333.	96,598,963.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	36 411 348.	37.001.834.	40,490,225.	47 635 554.	51 254 012.	212,792,973.
3	Gross receipts from activities that						
	are not an unrelated trade or business 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	51,795,915.	55,064,728.	60,490,636.	71,420,312,	70,620,345.	309,391,936.
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
t	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						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						309 391 936.
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	51,795,915.	55,064,728.	60,490,636.	71,420,312.	70,620,345.	309,391,936.
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	99,687.	122,305.	86,107.	416,852.	586,034.	1,310,985.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	99,687.	122,305.	86,107.	416,852,	586,034.	1,310,985.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						WART OF ANY ANY AND A
	Total support. (Add lines 9, 10c, 11, and 12,)		55,187,033.	60,576,743.	71,837,164.		
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3) organiz	ation,
_	check this box and stop here	- C D-					
	ction C. Computation of Publ						
	Public support percentage for 2015 (I					15	99.58 %
	Public support percentage from 2014				*****************	16	99.71 %
	ction D. Computation of Inves						
	Investment income percentage for 20			e 13, column (f))		17	.42 %
	Investment income percentage from :					18	.29 %
19a	a 33 1/3% support tests - 2015. If the						
b	more than 33 1/3%, check this box a 33 1/3% support tests - 2014. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%,	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V,)

Section A	A. All	Supporting	Organizations
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Yes No 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. 1 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). 2 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a 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. 3b 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. 3c 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below. 4a 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. 4b 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) 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) 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). 5a 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? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 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. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8 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. 9a b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which

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Schedule A (Form 990 or 990-EZ) 2015

9b

9c

10a

the supporting organization had an interest? If "Yes," provide detail in Part VI.

supporting organizations)? If "Yes," answer 10b below.

determine whether the organization had excess business holdings.)

c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
_	tion B. Type I Supporting Organizations		-	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove 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		1	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			110
	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 in (2), 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 yea(see Instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3</i> below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	3	
2	Activities Test. Answer (a) and (b) below.		Yes	No
_ a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	.,,,
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	4.0		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- Cu		
	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b		
-	garage and the second s	- 00		

A Prior Year (optional) Net short-term capital gain Recoveries of prior-year distributions Chief gross income (see instructions) Add lines 1 through 3 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) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) Agregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): Average monthly value of securities Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Fair market value of other non-exempt-use assets For Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Multiply line 2 from line 1 d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Militiply line 5 by .035 Recoveries of prior-year distributions Militiply line 5 by .035 Recoveries of prior-year distributions Militiply line 5 by .035 Recoveries of prior-year distributions Adjusted net income for prior year (from Section A, line 8, Column A) Enter greater of line 2 or line 3 Interest greater of line 2 or line 3 Enter greater of line 2 or line 3 Interpretate of line 2 or line 3 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organ	izations	
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a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use assets (subtract line 4 from line 3) 6 Net value of non-exempt-use assets (subtract line 4 from line 3) 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Minimum Asset Amount (add line 7 to line 6) 7 Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 Enter 85% of line 2 or line 3 4 Inter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount, Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6		instructions for short tax year or assets held for part of year):			
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7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	6	DUCKER DE TARE DE SERVICIONES DE LA CONTRACTOR DE LA CONT	6		
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Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Current Year Current Year	8		8		
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Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 2 3 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 4 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	2		2		
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5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	4		4		
Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	5		5		
emergency temporary reduction (see instructions) 6	6				
			6		
	7			ed Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2015

	Type in Non-Tunouonally integrated out	o(a)(o) capporting orga	Time (communica)	Carlotte Company of the Company of t
sect	ion D - Distributions	The state of the s		Current Year
1	Amounts paid to supported organizations to accomplish ex	- 1/2 V - 1/2		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
V.50	organizations, in excess of income from activity	V 70W 25 52		
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		7	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
	From 2013			
	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Carryover from 2010 not applied (see instructions)			
1	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
4	line 7:			
_	1000			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
_	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
_	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
C	Excess from 2013			
d	Excess from 2014			
е	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	(Form 990 or 990-EZ) 2015 URBAN LAND INSTITUTE	53-0159845	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 1 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; F Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ac (See instructions.)	7a or 17b; Part III, line 12 nes 1 and 2; Part IV, Sec Part V, Section B, line 1e;	tion C,
			
Š.			
1			
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No., 1545-0047

Employer identification number

2015

	UR	BAN LAND INSTITUTE	53-0159845				
Organiz	zation type (check o	ne):					
Filers o	f:	Section:					
Form 99	90 or 990-EZ	x 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	90-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	-	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ıle. See instructions.				
General	l Rule						
х	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor					
Special	Rules						
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour, line 1. Complete Parts I and II.	or 16b, and that received from				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it m ı	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name	of organization		

Employer identification number

URBAN LAND INSTITUTE

53-0159845

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	41.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 4,193,850.	Person x Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 422,093.	Person x Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

URBAN LAND INSTITUTE

53-0159845

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	÷
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of orga	nization				Employer identification number			
Part III	D INSTITUTE Exclusively religious, charitable, etc., contr	ibutions to organizations describe	ed in section	501(c)(7), (8), or	53-0159845 (10) that total more than \$1,000 for			
· care m	the year from any one contributor. Complete co	olumns (a) through (e) and the fol	lowing line er	TITY For organizations				
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	, charitable, etc., contributions of \$1,000	or less for the y	/ear: (Enter this info. once.)) — 5			
(a) No.	Ose duplicate copies of Part III II additional	il space is needed.						
from	(b) Purpose of gift	(c) Use of gift		(d) Descr	ription of how gift is held			
Part I			-					
-	*	***************************************		=				
		×						
		(e) Transfer of Q	-:44					
		(e) Transier of g	Jii t					
	Transferee's name, address, ar	d 7ID . 4	Dol	ationship of trar	nsferor to transferee			
	Transieree's flame, address, ar	IGZII T T	itei	adonainp or dar	isier of to transferee			
1								
1								
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desci	ription of how gift is held			
raiti								
								
'		#						
		(e) Transfer of o	aift					
	(b) Hallott of gift							
	Transferee's name, address, ar	d ZIP + 4	Rela	ationship of trar	nsferor to transferee			
1 3	**							
(a) No. from	(h) Dumana of sift	(a) Llan of gift		(d) Doos	ription of how gift is held			
Part I	(b) Purpose of gift	(c) Use of gift		(u) Desci	Inplient of new girt is field			
		20						
	<u> </u>	Signature						
		(e) Transfer of	gift					
_	Transferee's name, address, ar	nd ZIP + 4	Rela	ationship of trar	nsferor to transferee			
,								
,								
	-							
4)))								
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held			
Part I	(=/- =:							
,								
,		-						
-								
		(e) Transfer of	gift					
	_							
-	Transferee's name, address, ar	nd ZIP + 4	Rela	ationship of trai	nsferor to transferee			

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.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

Name of the organization Employer identification number URBAN LAND INSTITUTE 53-0159845 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of 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 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: 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 for Form 990. Schedule D (Form 990) 2015

	dule D (Form 990) 2015 URBAN LAND	INSTITUTE			0		3-01598			ige 2
Pai	t III Organizations Maintaining C									
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following tha	ıt are a siç	gnificant i	use of its	collection	items	3
	(check all that apply):									
a	Public exhibition	d	Loan or exc							
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	•	•	•			se in Parl	: XIII,		
5	During the year, did the organization solicit or							-		1
_	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered	"Yes" on	Form 990), Part IV,	line 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia		-					-		,
	on Form 990, Part X?						*******	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:							
								Amount		
C	Beginning balance					, 1c				
d	Additions during the year					. 1d				
е	Distributions during the year	**************************	**************			1e				
f	Ending balance					1f				
2 a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or cu	ustodial acco	unt liabili	ty?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.									
oar a	t V Endowment Funds. Complete if	the organization an	swered "Yes" on Fo	rm 990, Par	IV, line 1	0.				
		(a) Current year	(b) Prior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four	ears l	oack
1a	Beginning of year balance	41,282,125.	35,931,193,	33,86	6.436.	32.8	99.541.	32.	814.	722.
b	Contributions	29,899,832.	34 368 055.	25,44	0.881.	21.9	78.119.	20.	458.	072.
	Net investment earnings, gains, and losses	-77	,, ,,							
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs	29,618,292.	29.017.123.	23_37	6.124.	21.0	11.224.	20.	373.	253.
f	Administrative expenses				,			3170-2-4-0		
	End of year balance	41 563 665.	41,282,125.	35.93	1,193.	33.8	66.436.	32	899	541.
_	Provide the estimated percentage of the curr	ent vear end balanc	- Company of the Company		,		,		-	
	Board designated or quasi-endowment	29.40	%	,, ,,,						
	Permanent endowment	%								
	Temporarily restricted endowment ▶	70.60 %								
	The percentages on lines 2a, 2b, and 2c shou									
За	Are there endowment funds not in the posses	•	tion that are held a	nd administe	ered for th	e oraaniz	ation			
	by:								res	No
	(i) unrelated organizations									х
	(ii) related organizations								х	
b	If "Yes" on line 3a(ii), are the related organiza:								х	
	Describe in Part XIII the intended uses of the			***************		***********				
	t VI Land, Buildings, and Equipm		30.110.100.100.100.000							
i sani	Complete if the organization answered		. Part IV. line 11a. S	See Form 990). Part X. I	line 10.				
	Description of property	(a) Cost or of		or other		cumulate	-d	(d) Book	value	
	bosonption of property	basis (investr	, ,	(other)	٠,,	reciation	-	(u) Dook	value	•
10	Land		, , ,	/						
	Buildings									
	Leasehold improvements			346 040		20	902	201 - 221	31E	210
			4	346,042.			802.		315,	
u	Equipment	\$2		765,616.		526,	J.U.		239	UDD.

Schedule D (Form 990) 2015

4 839 585

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

61,111.

4,615,437.

Schedule D (Form 990) 2015 URBAN LAND INSTIT	UTE	53	-0159845	Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" of				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year marke	t value
(1) Financial derivatives				
(2) Closely-held equity interests	1,614,985,	END-OF-YEAR MARKET VALUE		
(3) Other				
(A) REAL ESTATE	347,362.	END-OF-YEAR MARKET VALUE		
(B) 412615,498-PIMCO TOTAL RETURN FD				
(C) INSTL	4,254,066.	END-OF-YEAR MARKET VALUE		
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	6,216,413.			
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year marke	t 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" of		11d. See Form 990, Part X, line 15.		
(a) [[]	Description		(b) Book	value
(1) ACCRUED INTEREST RECEIVABLE				18,131.
(2) BENEFICIAL INTEREST IN ULI FOUNDATION			29,	298,754.
(3) DUE FROM ULI FOUNDATION			7,	607,138.
(4)				
(5)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		36	924 023.
Part X Other Liabilities.				
Complete if the organization answered "Yes" of			25.	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) DEFERRED RENT		3,867,533.		
(3)				
(4)				
(5)				
(6)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 3,867,533. 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII x

Schedule D (Form 990) 2015

(7) (8)

53-0159845 Page **4**

Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With	Revenue per R	eturn.	illi Addo
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	72,322,240.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-562,648.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	-5 228.		
е	Add lines 2a through 2d	*************		2e	-567,876.
3	Subtract line 2e from line 1			3	72,890,116.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	90 (90)			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	67,175.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		*********	4c	67,175.
_ 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	72,957,291.
Pai	t XII Reconciliation of Expenses per Audited Financial Sta	atements With	Expenses per	Return	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total expenses and losses per audited financial statements		**********	1	74,187,766.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	V 18	1=20-606 = 15-5000 = 1082000 W		
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
c	Other losses				
d	Other (Describe in Part XIII.)		213,659.		
е	Add lines 2a through 2d			2e	213,659.
3	Subtract line 2e from line 1			3	73,974,107.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		-		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	67,175.		
b	Other (Describe in Part XIII.)	220000 7800 1			
С	Add lines 4a and 4b			4c	67,175.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18			5	74.041.282.
Par	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b a	ınd 2b; Part V, line	4; Part X,	line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional inform	ation.		
PART	V, LINE 4:				
	•				
BOAR	D DESIGNATED NET ASSETS ARE ASSETS HELD BY THE LOCAL DISTR	CICT/NATIONAL			
COUN	CIL AND PRODUCT COUNCIL PROGRAMS AND ARE USED TO SUPPORT T	HEIR			
PROG	RAMS,				
TEMP	ORARILY RESTRICTED NET ASSETS WHICH ARE PURPOSE RESTRICTED	REPRESENT			
		•			
ASSE	TS HELD BY ULIF THAT ARE AVAILABLE FOR ULI PROGRAMS.				
PART	X LINE 2:				
ULI	AND ULIF ARE GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UN	IDER THE			
PROV	ISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.	IN ADDITION			
	THE THE THE TOTAL CONT.				
ULT_	AND ULIF QUALIFY FOR CHARITABLE CONTRIBUTION DEDUCTIONS A	ND HAVE BEEN			
532054	1			Schedul	e D (Form 990) 2015

Schedule D (Form 990) 2015 URBAN LAND INSTITUTE	53-0159845	Page 5
Part XIII Supplemental Information (continued)		
CLASSIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS, INCOME WHICH		
IS NOT RELATED TO EXEMPT PURPOSES. LESS APPLICABLE DEDUCTIONS, IS SUBJECT		
15 NOT REDATED TO EARMYT FORFOSES, DESS APPLICABLE DEDOCTIONS, 13 SOBOECT		
TO FEDERAL AND STATE CORPORATE INCOME TAXES, NEITHER ULI NOR ULIF HAD		
UNRELATED BUSINESS INCOME TAX FOR THE YEARS ENDED JUNE 30, 2016 AND 2015.		
ULI AND ULIF ARE NOT AWARE OF ANY UNCERTAIN TAX POSITIONS AND THEREFORE,		
NO TAX LIABILITIES HAVE BEEN RECORDED AT JUNE 30, 2016 AND 2015,		
GENERALLY, ULI AND ULIF ARE NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS		
BY THE U.S. FEDERAL STATE OR LOCAL TAX AUTHORITIES BEFORE 2013.		
bi the U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES BEFORE 2013,		
PART XI, LINE 2D - OTHER ADJUSTMENTS:		
UNREALIZED LOSS ON FOREIGN CURRENCY TRANSLATION -5,228.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:		
UNREALIZED LOSS ON FOREIGN CURRENCY TRANSLATION 213,659.		

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

Name of the organization

Employer identification number

JRBAN LAND INSTITUTE				53-0159845	
	rmation on A	ctivities Ou	tside the United States. Comple		es" on
Form 990, Part I\					
		n maintain recor	ds to substantiate the amount of its gr	ants and other assistance,	
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance? x	Yes No
2 For grantmakers. Desc United States.	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and other assistance outs	side the
3 Activities per Region. (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) Is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA AND THE			DDOGDAM, GEDVITGEG	SEE PART V FOR DESCRIPTION OF	2 005 214
PACIFIC	5	4	PROGRAM SERVICES	ACTIVITIES IN THE REGION SEE PART V FOR	2,995,214.
EUROPE (INCLUDING				DESCRIPTION OF	
(CELAND & GREENLAND)	-2	16	PROGRAM SERVICES	ACTIVITIES IN THE REGION	5,469,435.
EAST ASIA AND THE	0	0	GRANT TO RECIPIENT LOCATED IN REGION		5,000.
SUROPE (INCLUDING	0	0	GRANT TO RECIPIENT LOCATED IN REGION		100,000.
3 a Sub-total	7	20			8,569,649.
b Total from continuation					
sheets to Part I	0	0			0.
c Totals (add lines 3a					n eres sous
and 3b)	7.	20			8 569 649.

 $\label{eq:LHA} \mbox{LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.}$

Schedule F (Form 990) 2015

Page 2

URBAN LAND INSTITUTE

Schedule F (Form 990) 2015

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2015	21 22 face iii o ii i ainn
(h) Description of non-cash assistance					Schee	5
(g) Amount of non-cash assistance	0				xempt by	
(f) Manner of cash disbursement	CHECK				recognized as tax-e	
(e) Amount of cash grant	100,000,CHECK				foreign country,	
(d) Purpose of grant	J.C. NICHOLS PRIZE AWARD				Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	
(c) Region	EUROPE (INCLUDING ICELAND & GREENLAND)				ns listed above that are relibilities provided a section	
(b) IRS code section and EIN (if applicable)					recipient organizatior he grantee or counse other organizations o	
1 (a) Name of organization					 2 Enter total number of recipient organizations listed at the IRS, or for which the grantee or counsel has prosente total number of other organizations or entities 	

53-0159845

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)		. 7		=		Schedule F (Form 990) 2015
(g) Description of non-cash assistance						Sched
(f) Amount of non-cash assistance						
(e) Manner of cash disbursement						
(d) Amount of cash grant						
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance						

Part IV	Foreign Forms	3

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	x No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	x No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	x No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	x No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	x No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	x No

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 URBAN LAND INSTITUTE 53-0159845 Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2: ULI SPONSORS A NUMBER OF AWARDS TO BOTH INDIVIDUALS AND INSTITUTIONS FOR CONTRIBUTIONS TO THE INDUSTRY CONSISTENT WITH ULI'S CORPORATE MISSION. SOME AWARDS ARE THE RESULT OF COMPETITIONS; OTHERS ARE BASED ON MERIT. ALL HAVE SPECIFIC WRITTEN CRITERIA FOR EVALUATION AND AWARD AND ARE BUDGETED AS APPROVED BY THE BOARD, SCHEDULE F. PART I. LINE 3(E) DESCRIPTIONS OF ACTIVITIES IN ASIA: THIS REGION COVERS MANY OF THE SAME PROGRAM AREAS AS EUROPE. FOLLOWING THEREFORE IS A JUST A LISTING OF THE PROGRAM HIGHLIGHTS AS IT RELATES TO EACH OF THOSE AREAS: - AS OF JUNE 30, 2016 ASIA MEMBERSHIP TOTALED 1,874 IT HAS ACTIVE NATIONAL COUNCILS IN FOUR COUNTRIES IT HELD 1 CONFERENCE IN SHANGHAI, CHINA IT PUBLISHED AN EMERGING TRENDS IN REAL ESTATE ASIA PACIFIC, WHICH PROVIDES AN OUTLOOK ON ASIA PACIFIC REAL ESTATE INVESTMENT AND DEVELOPMENT TRENDS, REAL ESTATE FINANCE AND CAPITAL MARKETS, TRENDS BY PROPERTY SECTOR AND METROPOLITAN AREA, AND OTHER REAL ESTATE ISSUES PERTINENT TO THE COUNTRIES IN ASIA, AREA OF CONTENT FOCUS IN SUSTAINABILITY AND CAPITAL MARKETS, SCHEDULE F. PART I. LINE 3(E) DESCRIPTIONS OF ACTIVITIES IN EUROPE: MEMBERSHIP-GROW MEMBERSHIP WHILE MAINTAINING EXISTING MEMBERS PROVIDING THEM WITH THE ULI EXPERIENCE WHICH IS AN OPEN EXCHANGE OF IDEAS, NETWORKING OPPORTUNITIES, AND THE ABILITY TO WORK WITH THE LEADERS OF THE LAND USE INDUSTRY: DEVELOPERS, BUILDERS, ENGINEERS ATTORNEYS PLANNERS INVESTORS FINANCIAL ADVISORS ACADEMICS

Schedule F (Form 990) 2015

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Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
ARCHITECTS AND PUBLIC OFFICIALS, MEMBERS HAVE ACCESS TO OBJECTIVE
INFORMATION AND THE EXPERIENCE OF THOSE ACTIVE IN EVERY DISCIPLINE OF
REAL ESTATE DEVELOPMENT, INVESTMENT, AND REGULATION. AS OF JUNE 30,
2016, ULI HAD 2,616 MEMBERS IN EUROPE.
NATIONAL COUNCILS-THE PURPOSE OF THE NATIONAL COUNCIL PROGRAM IS TO
PROVIDE ULI'S PRESENCE AT THE LOCAL LEVEL THRU THE DEVELOPMENT AND
PRESENTATION OF PROGRAMS OF WORK THAT ADDRESS LOCAL REAL ESTATE AND
URBAN PLANNING ISSUES. THE ACTIVITIES RECORDED HERE REPRESENT THE
ACTIVITIES PERFORMED DIRECTLY BY THE NATIONAL COUNCILS. ULI HAS 16
NATIONAL COUNCILS IN EUROPE EITHER IN DEVELOPMENT OR GROWING.
PRODUCT COUNCILS-ULI PRODUCT COUNCILS PROVIDE A FORUM FOR INFORMATION
EXCHANGE ON THE STATE-OF-THE-ART OF A VARIETY OF DEVELOPMENT SECTORS.
FULL MEMBERS ARE ELIGIBLE TO SERVE ON THESE COUNCILS.
MEETINGS/CONFERENCES-THIS PROGRAM FOCUSES ON DEVELOPMENT TOPICS OF
IMMEDIATE INTEREST INCLUDING THE ANNUAL CONFERENCE IN PARIS WHICH
COVERS INTERNATIONAL REAL ESTATE FINANCE AND INVESTMENT, AN ANNUAL
LEADERSHIP RETREAT, AND ONE TOPICAL/TRENDS CONFERENCES.
PUBLISHING-PRODUCES AN ANNUAL EMERGING TRENDS IN REAL ESTATE EUROPE
REPORT. THIS REPORT IS PUBLISHED BY THE URBAN LAND INSTITUTE (ULI)
AND PRICEWATERHOUSECOOPERS IS BASED ON SURVEYS AND INTERVIEWS WITH
APPROXIMATELY 600 INDUSTRY EXPERTS, WHICH COVERS 27 MARKETS IN
COUNTRIES THROUGHOUT EUROPE. THE REPORT CONTAINS PREDICTIONS FOR

Schedule F (Form 990) 2015

INDIVIDUAL PROPERTY SECTORS AS WELL AS MARKETS, ALONG WITH INSIGHTS

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
REGARDING REAL ESTATE CAPITAL MARKETS AND THE ECONOMY IN GENERAL.
ADVISORY SERVICES-ULI PROVIDES TECHNICAL EXPERTISE OF ITS MEMBERS TO
CITIES, PRIVATE DEVELOPERS, AND OTHER ORGANIZATIONS THAT NEED OBJECTIVE
ANALYSIS AND ADVICE ON HOW TO SOLVE DIFFICULT LAND USE, DEVELOPMENT,
AND REDEVELOPMENT PROBLEMS.
DEVELOPMENT-THIS DEPARTMENT HAS THE RESPONSIBILITY OF RAISING THE
SPONSORSHIP FUNDS FOR ALL EUROPE'S CONFERENCES/PROGRAMS.
AREA OF CONTENT FOCUS:
- ULI'S EUROPEAN RESEARCH CENTER OVERSEES STRATEGY AND DELIVERY FOR
BROAD RANGE OF TOPICS.

SCHEDULE (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

OMB No. 1545-0047	2015	Open to Public	Inspection
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▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

2 Employer identification number (h) Purpose of grant 53-0159845 or assistance X Yes SENERAL SUPPORT GENERAL SUPPORT Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 0 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 411 100,000 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1.094 (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 501(C)(3) Enter total number of other organizations listed in the line 1 table 27-1207970 23-7133957 Part I General Information on Grants and Assistance (p) EIN URBAN LAND INSTITUTE criteria used to award the grants or assistance? 1 (a) Name and address of organization 909 THIRD AVENUE, C/O GELLER & CO or government 2001 L ST NW, SUITE 200 WASHINGTON, DC 20036 Name of the organization NEW YORK, NY 10022 CITIES OF SERVICE ULI FOUNDATION Part II N

Schedule I (Form 990) (2015)

Page 2 (f) Description of non-cash assistance 53-0159845 (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance 0 0 Ö 78,495 2,550 91,096 21,553 (c) Amount of cash grant THE ONE PROGRAM COMMUNITY ACTION GRANTS, IS A PRIZE FOR VISIONARIES IN URBAN DEVELOPMENT AND THE GERALD D. HINES STUDENT MOST OF THE FUNDING PROVIDED TO INDIVIDUALS AND ORGANIZATIONS ARE AWARDS FOR PARTICIPATION IN ULI'S AWARD PROGRAMS (MOST NOTABLY THE JC NICHOLS (b) Number of recipients 50 15 50 30 URBAN LAND INSTITUTE (a) Type of grant or assistance URBAN DESIGN COMPETITION). AWARDS FOR EXCELLENCE COMMUNITY OUTREACH PART I, LINE 2: GRANT PROGRAM AWARDS GALA URBAN PLAN Part III Part IV HINES

Schedule I (Form 990) (2015)

Schedule I (Form 990) (2015)

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532102 10-28-15

Schedule I (Form 990) URBAN LAND INSTITUTE Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)	duals in the Unite	d States (Schedule	1 (Form 990), Part III		53-0159845 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
APGAR AWARD	-	500.	o		
KEMP AWARD	2.	855.	0		
WOMENS LEADERSHIP INITIATIVE	10.	4,000.	0.0		
AMPLIFY AWARD	t-l	000 9	0		
STRONG TOWNS SCHOLARSHIP	-	1 000	0		
					Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number 53-0159845 URBAN LAND INSTITUTE

F	art i Questions negariting Compensation			
			Yes	No
Та	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel x Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	x Independent compensation consultant x Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	x	
h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		Δ.	х
c	Participate in, or receive payment from, an equity-based compensation arrangement?			X
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The teath of lines to a first the persons and provide the applicable amounts to each term in a time			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule	J (Fori	n 990	2015

532111 10-14-15

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 a	W-2 and/or 1099-MI	nd/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	in column (B) reported as deferred on prior Form 990
(1) PATRICK L. PHILLIPS	Ξ	610,693,	111,181,	1,875,	15,900.	0.	739,649.	0
GLOBAL CEO	(ii)	0	0	0	0	0	0	.0
(2) CHERYL G. CUMMINS	€	443,666.	55,000.	3.092.	15,900.	5.897.	523_555.	0
GLOBAL GOVERNANCE OFFICER	(ii)	0	0	0	0	0	0	0
(3) MICHAEL J. TERSECK	Θ	355,081.	55,000.	1,003.	15,900.	4,007.	430,991.	0
CFO	(II)	0	0	0	0	0	.0	0.
(4) JOHN P. FITZGERALD	(3)	236,569.	.25,000	130,806.	9,186.	14,349.	415,910.	0
CHIEF EXECUTIVE ASIA	(ii)	0	0	0	0	0	0	.0
(5) LISETTE VAN DOORN	(3)	348,358.	20,693.	0	0.	.0	369,051.	.0
CHIEF EXECUTIVE EMEA	⊞	0	.0	0	0.	0.	0	0
(6) MARILEE UTTER	Ξ	264 474.	27,993.	5,334,	15,900.	11,069.	324,770,	0
EVP, DISTRICT/NATIONAL COUNCIL	(ii)	0.	0.	0	0	0.	0.	0
	(3)	267,237.	28,843.	420	15,900.	16,844.	329,244.	.0
CHIEF TECHNOLOGY OFFICER	(II)	0	0	0	0	0.	0	0
(8) LELA AGNEW	Ξ	241,400,	23 940.	630	14,476.	0.	280,446.	0
EVP, COMMUNICATIONS	(1)	0	0	0	.0	.0	.0	.0
(9) DAVID HOWARD	€	234,239.	25,074.	630	7,436.	14,575.	281,954.	0
EVP, DEVELOPMENT	(E)	0.	.0	0	0	0.	.0	.0
(10) MARY BETH CORRIGAN	€	205 086.	14,203.	996	12,297.	0.	232,552.	0
SVP, CONVENINGS	(II)	0.	0.	0	0	0.	0	0
(11) STEPHANIE WASSER	(E)	184,358.	12,884.	2,772.	10,986.	4,770.	215,770.	0
SVP, COUNCILS	(ii)	.0	.0	0	0	0.	.0	0
(12) LORI G. HATCHER	Ξ	178,414.	12,467.	1,806,	10,795.	11,661.	215,143,	0
SVP, MEMBERSHIP/MARKETING	(E)	0	0	0	0	.0	0.	0
(13) GAYLE BERENS	Ξ	117,160.	6,678.	114,075,	6,341.	3,484	247 738.	0.
SVP, EDUCATION	(E)	0	0	0	.0	0.	.0	0
(14) FELIX CIAMPA	Ξ	205,905.	12,915.	630	12,414.	1,771.	233,635.	0,
DISTRICT COUNCIL EXECUTIVE	⊞	.0	0	0	0	0	.0	0
(15) THOMAS MURPHY	Ξ	197,900.	0	8,653	11,874.	.0	218,427.	0
SENIOR RESIDENT FELLOW	€	0	0	0	0.	0	.0	.0
(16) DEBRA L. THROCKMORTON	Ξ	191,158.	13,335.	1,806,	11,573.	4,224.	222,096.	0
SVP FINANCE	(ii)	0.	0.	0	0	0.	0.	0
532112				(Schedu	Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	F
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·(i)(a)	in column (B) reported as deferred on prior Form 990
(17) SARENE MARSHALL	ε	189,548,	9,009.	630	1,366.	6,502.	207,055.	0
ED SUSTAINABILITY	(ii)	.0	0.	0	0	0	0	0
	Θ							
	(II)							
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	(II)							
	(1)							
	(II)							
	Ξ							
	Ξ							
	Θ							
	(ii)							
	Θ							
	(1)							
	Ξ							
	⊞							
532112				,			Sched	Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 URBAN LAND INSTITUTE	53-0159845 Page 3	33
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	is part for any additional information.	ĺ
PART I, LINE 1A:		I
HOUSING ALLOWANCE:		
KATHLEEN CAREY - HOUSING ALLOWANCE \$50,379, TAXABLE COMPENSATION		1
JOHN P. FITZGERALD - FOREIGN HOUSING ALLOWANCE \$76,619, TAXABLE		
AATION		
TOHN P. FITTZGERALD - GROSS IIP PAYMENTS \$30,250 - TAXABLE COMPENSALTION		
		XII
PART I, LINE 4A:		1 1
GAYLE BERENS RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$113,172, THIS		
AMOUNT IS INCLUDED IN PART II, COLUMN B (III) OTHER REPORTABLE		
COMPENSATION.		
PART I, LINE 7;		1
ES ARE D		
עיק שיים דיים שיים שיים מים ועומים מוי וגיזורועודותאן שוייה עם רושוני		ĺ
K WALCA IS		Î
SUPERVISOR AT THE END OF THE FISCAL YEAR, THE SUPERVISOR RECOMMENDS THE		Î
INDIVIDUAL'S BONUS WHICH IS SUBJECT TO FINAL APPROVAL BY THE CEO. IN THE		Ÿ
CASE OF THE CEO, THE PERFORMANCE CRITERIA IS ESTABLISHED BY THE CHAIRMAN		
	Schedule J (Form 990) 2015	015

Schedule J (Form 990) 2015 URBAN LAND INSTITUTE Part III Sundemental Information	53-0159845 Page 3	3
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	s part for any additional information.	T
AND EVALUATED BY THE ULI COMPENSATION COMMITTEE, IN THE CASE OF THE CFO,		1 1
GLOBAL GOVERNANCE OFFICER, ULIF PRESIDENT, CHIEF EXECUTIVE EMEA, AND CHIEF		Ĩ
EXECUTIVE ASIA, THE CRITERIA IS ESTABLISHED BY THE CEO AND EVALUATED BY HIM		1
IN CONJUNCTION WITH THE ULI COMPENSATION COMMITTEE.		Ĩ
THE % OF BASE COMPENSATION AN INDIVIDUAL IS ELIGIBLE (BUT NOT GUARANTEED)		Î
TO RECEIVE IS BASED UPON THEIR POSITION (VP AND ABOVE), OR THEIR EMPLOYMENT		1
CONTRACT IF THEY HAVE ONE (1.E., CEO, CFO, EXECUTIVE OFFICER, ULIF		ĺ
PRESIDENT, AND CHIEF EXECUTIVE EMEA).		Î
THE COMPENSATION INFORMATION SHOWN IN PART VII OF THE FORM 990, AS WELL AS		1
SCHEDULE J, IS PRESENTED ON A CALENDAR YEAR BASIS IN ACCORDANCE WITH IRS		1
FORM 990 FILING INSTRUCTIONS.		
		i=
		I
		1
		1
	Schedule J (Form 990) 2015	015

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

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 990-EZ.

OMB No. 1545-0047 Open to Public

Internal Revenue Service Name of the organization Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

URBAN LAND INSTITUTE	53-0159845
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	·
TO PROVIDE LEADERSHIP IN THE RESPONSIBLE USE OF LAND AND IN CREATING	
AND SUSTAINING THRIVING COMMUNITIES WORLDWIDE.	
FORM 990, PAGE 1, PART I, LINE 6, NUMBER OF VOLUNTEERS:	
WE INCLUDE ALL TRUSTEES, MEMBERS ON THE ESTABLISHED COMMITTEES AND	
ADVISORY GROUPS, AND ESTIMATE A CERTAIN NUMBER OF VOLUNTEERS FOR EACH	
DISTRICT COUNCIL AND FOR EACH ADVISORY SERVICE PANEL THAT IS PROVIDED.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
ESTABLISHED IN 2009. ITS MISSION IS TO EMPOWER LEADERS IN THE PUBLIC	
SECTOR TO ENVISION, BUILD AND SUSTAIN SUCCESSFUL 21ST CENTURY	
COMMUNITIES BY PROVIDING ACCESS TO INFORMATION, BEST PRACTICES, PEER	
NETWORKS AND OTHER RESOURCES TO FOSTER CREATIVE, EFFICIENT AND	
SUSTAINABLE LAND USE PRACTICES.	
THE MISSION OF ULI'S CAPITAL MARKETS CENTER IS TO PROVIDE LEADERSHIP IN	
FOSTERING A HEALTHY AND PRODUCTIVE REAL ESTATE INDUSTRY AND	
SPECIFICALLY THE REAL ESTATE CAPITAL MARKETS SECTOR THROUGH RESEARCH,	
TREND ANALYSIS, EDUCATION, EVENTS, PUBLICATIONS, WEBSITES AND WEB-BASED	
RESOURCES, ADVOCACY, AND LEADERSHIP,	
THE CENTER FOR SUSTAINABILITY ENCOMPASSES ULI'S CLIMATE CHANGE, LAND	
USE AND ENERGY (CLUE) INITIATIVE WHICH CONDUCTS RESEARCH AND	

PROGRAMMING ACROSS SEVERAL PRIMARY TOPIC AREAS INCLUDING: 1) THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. $^{532211}_{09\text{-}02\text{-}15}$

Schedule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization	Employer identification number
URBAN LAND INSTITUTE	53-0159845
CHANGING NATURE OF BUSINESS PRACTICES AT THE NEXUS OF FINANCE, ENERGY	
AND BUILDINGS, 2) NEW FORMS OF PUBLIC-PRIVATE PARTNERSHIPS THAT ALIGN	
REAL ESTATE WITH A NEW GENERATION OF PUBLIC BENEFITS, AND 3) THE ROLE	
OF EMERGING TECHNOLOGIES IN ENABLING LOCAL MARKETS TO ACHIEVE COMMUNITY	
SUSTAINABILITY GOALS,	
THE ROBERT C. LARSON LEADERSHIP INITIATIVE ENABLES ULI TO ADD	
LEADERSHIP DEVELOPMENT ACTIVITIES TO ITS PROGRAM OF WORK AND EXTEND THE	
INSTITUTE'S REACH TO A BROADER POPULATION OF CURRENT AND POTENTIAL	
LEADERS, THE INITIATIVE ALSO SUPPORTS THE WORK OF THE ULI WOMEN'S	
LEADERSHIP INITIATIVE WHOSE MISSION IS TO RAISE THE VISIBILITY AND	
NUMBER OF WOMEN LEADERS IN ULI AND THE REAL ESTATE INDUSTRY.	
THE MISSION OF ULI'S GREENPRINT CENTER IS TO GENERATE ENERGY EFFICIENT REAL ESTATE SOLUTIONS THAT IMPROVE THE ENVIRONMENT WHILE DEMONSTRATING	
NEAD BOTATE CONCITONO THAT IMPROVE THE ENVIRONMENT WHILE DEMONSTRATING	
THE CORRELATION WITH INCREASED PROPERTY VALUES, GREENPRINT FOCUSES ON	
REDUCING THE CARBON FOOTPRINT OF EXISTING BUILDINGS WHICH CURRENTLY	
REPRESENT ONE THIRD OF GLOBAL CARBON EMISSIONS AND WORKS TO ACHIEVE ITS	,
CARBON REDUCTION GOALS THROUGH EDUCATION AND ACTION. THE CENTER USES	
THE COLLECTIVE POWER OF ITS MEMBERSHIP TO LEAD BY EXAMPLE IN LOWERING	
CARBON EMISSIONS BY EXPLORING AND IMPLEMENTING ENERGY-REDUCING	
TECHNOLOGIES AND SHARING THEIR PERFORMANCE RESULTS WITH THE PUBLIC	
THROUGH THE GREENPRINT PERFORMANCE REPORT, TM.	
BUILDING HEALTHY PLACES LEVERAGES THE POWER OF ULI'S GLOBAL NETWORKS TO	
SHAPE PROJECTS AND PLACES IN WAYS THAT IMPROVE THE HEALTH OF PEOPLE AND	
COMMUNITIES.	

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization	Employer identification number
URBAN LAND INSTITUTE	53-0159845
MEMBERSHIP SERVICES:	
THE REVENUES OF THIS PROGRAM REPRESENT THE MEMBERSHIP DUES FROM	
MEMBERS, THE EXPENSES RELATE TO MEMBERSHIP RECRUITMENT AND RETENTION	
EFFORTS, AS WELL AS ORDER PROCESSING AND FULL MEMBER ADMISSIONS	
ACTIVITIES.	
EXPENSES \$ 2,869,354. INCL GRANTS OF \$ 13,731. REVENUE \$ 14,750,390.	
PUBLISHING/URBAN LAND MAGAZINE:	
PUBLISHING REPRESENTS THE SALES AND RELATED EXPENSES OF ULI'S BOOK	
PUBLISHING PROGRAM INCLUDING THE ORGANIZATION'S BI-MONTHLY FLAGSHIP	
PUBLICATION, URBAN LAND MAGAZINE WHICH IS AVAILABLE AT NO COST TO	
MEMBERS, ULI PUBLICATIONS COVER A BROAD RANGE OF ISSUES RELEVANT TO	
LAND USE POLICY AND REAL ESTATE PRACTICE WITH A FOCUS ON EDUCATING TO	
IMPROVE THE TOTAL ENVIRONMENT, AND ESTABLISHING ULI AS AN INFLUENTIAL	
INDUSTRY VOICE AND LEADER.	
EXPENSES \$ 2,603,357. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,644,074.	
COUNCILS:	
ULI COUNCILS PROVIDES ITS MEMBERS WITH A FORUM FOR INFORMATION EXCHANGE	
ON THE STATE-OF-THE-ART OF A VARIETY OF DEVELOPMENT SECTORS, MEMBERSHIP	
IS BY APPOINTMENT AND LIMITED TO FULL MEMBERS. ULI CURRENTLY HAS 49	
DOMESTIC AND 5 GLOBAL COUNCILS WHICH FOCUS ON AREAS OF ACTIVITY IN	
DEVELOPMENT PRODUCTS, DEVELOPMENT PROCESSES, AND INTERNATIONAL ISSUES.	
EXPENSES \$ 2,230,953. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,612,459.	
,	
PROFESSIONAL DEVELOPMENT:	
THIS DEPARTMENT CONTAINS THE ACTIVITIES OF ULI'S CONTINUING EDUCATION	
PROGRAMS.	odula 0 /Farm 000 av 000 F7) (0045)

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization URBAN LAND INSTITUTE	Employer identification number 53-0159845
EXPENSES \$ 659,078. INCLUDING GRANTS OF \$ 0. REVENUE \$ 766,697.	
EXPENSES \$ 639,076. INCLUDING GRANTS OF \$ 0. REVENUE \$ 766,657.	
ADVISORY SERVICES:	
ULI PROVIDES THE TECHNICAL EXPERTISE OF ITS MEMBERS TO CITIES, PRIVATE	
DEVELOPERS, AND OTHER ORGANIZATIONS THAT NEED OBJECTIVE ANALYSIS AND	
ADVICE ON HOW TO SOLVE DIFFICULT LAND USE, DEVELOPMENT, AND	
REDEVELOPMENT PROBLEMS,	
EXPENSES \$ 1,454,886. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,836,384.	
·	
COMMUNICATIONS:	
THIS INCLUDES INTERNAL AND EXTERNAL COMMUNICATIONS PROGRAMS - MEDIA	
RELATIONS, BRANDING, AND CORPORATE COMMUNICATIONS.	
EXPENSES \$ 2.119.600. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
INVESTMENTS:	
THE PRIMARY PURPOSE OF ULI'S INVESTMENTS IS TO PROVIDE A READILY	
ACCESSIBLE SOURCE OF CASH IN THE EVENT OF AN ECONOMIC DOWNTURN;	
ACCORDINGLY, PRESERVATION OF CAPITAL AND LIQUIDITY ARE THE PARAMOUNT	
FEATURES OF THIS INVESTMENT PROGRAM.	
EXPENSES \$ 67,175. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
·	
AWARDS:	
ULI IS WIDELY RECOGNIZED AS THE PREEMINENT VOICE FOR ENCOURAGING AND	
FOSTERING HIGH STANDARDS OF LAND USE PLANNING AND REAL ESTATE	
DEVELOPMENT. ULI CELEBRATES THE PEOPLE AND PROJECTS THAT EMBODY BEST	
PRACTICE THROUGH THE AWARDS FOR EXCELLENCE PROGRAM, THE ULI J.C.	
NICHOLS PRIZE FOR VISIONARIES IN URBAN DEVELOPMENT AND THE ULI GERALD	=
D. HINES STUDENT URBAN DESIGN COMPETITION.	

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization URBAN LAND INSTITUTE	Employer identification number 53-0159845
EXPENSES \$ 766,429. INCLUDING GRANTS OF \$ 286,588. REVENUE \$ 76,166.	
ULI FOUNDATION (ULIF):	
ULIF TRANSFERS 100% OF THE FUNDS RAISED THROUGH THE ANNUAL FUND PROGRAM	
TO ULI TO SUPPORT ONGOING ULI PROGRAMS. IN RETURN, ULI ADDS TO ITS	
ANNUAL BUDGET ALL ULIF OPERATING EXPENSES THROUGH THE FORM OF A	
CONTRIBUTION TO ULIF.	
EXPENSES \$ 672,310. INCLUDING GRANTS OF \$ 672,310. REVENUE \$ 0.	
ULI DEVELOPMENT:	
THIS DEPARTMENT HAS THE RESPONSIBILITY OF RAISING THE SPONSORSHIP FUNDS	
FOR ALL INSTITUTE MEETINGS AND CONFERENCES.	
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 36,829.	
ULI IN THE COMMUNITY:	
THE INSTITUTE FOCUSES RESOURCES AND ENERGIES TO OUR COMMUNITY OUTREACH	
INITIATIVE AND OUR DISTRICT/NATIONAL COUNCILS EFFORTS, OFTEN DEPLOYING	
OUR POLICY AND PRACTICE WORK AND OUR RESIDENT FELLOWS.	
EXPENSES \$ 422,134. INCLUDING GRANTS OF \$ 422,093. REVENUE \$ 0.	
FORM 990, PART VI, SECTION A, LINE 6:	
ULI MEMBERS INCLUDE DEVELOPERS, ARCHITECTS, PUBLIC OFFICIALS, PLANNERS,	
REAL ESTATE BROKERS, APPRAISERS, ACCOUNTANTS, ATTORNEYS, ENGINEERS,	
FINANCIERS, ACADEMICS, AND STUDENTS.	
FORM 990, PART VI, SECTION A, LINE 7A:	
THE TRUSTEES ELECT THE ULI CHAIRMAN, THE ULIF CHAIRMAN, THE ULI BOARD OF	
DIRECTORS THE ULIF BOARD OF DIRECTORS AND ULI LIFE TRUSTEES. THE BOARD OF	hadula 0 /Farm 000 at 000 E7\ /0015\

SCHEDULE R (Form 990)

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

▶ Attach to Form 990.

Open to Public Inspection 2015

OMB No. 1545-0047

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

53-0159845

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

URBAN LAND INSTITUTE

Name of the organization Department of the Treasury Internal Revenue Service

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
ULI SERVICES LIMITED - 98-1123263 SULTE 3418, JARDINE HOUSE, 1 CONNAUGHT PLACE HONG KONG	CONSULTANCY SERVICES	HONG KONG	0	447 585	447 585 URBAN LAND INSTITUTE
ULI EXHIBITION & CONSULTING (SHANGHAI) LTD - 98-1183457, ROOM 3663, TOWER II IFC, NO. 8 CENTURY AVENUE, PUDONG NEW DISTRICT.	EXHIBITION MANAGEMENT & CONSULTING	CHINA	228,228.	302,483,0	302,483,ULI SERVICES LIMITED

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

(a)	(q)	(0)	(p)	(e)	(1)	(b)	
Name, address, and EIN	Primary activity	Legal domicile (state or	a)	Public charity	Direc	Section 512(b)(13) controlled	(b)(13) ed
of related organization		foreign country)	section	status (if section	entity	entity?	2
				501(c)(3))		Yes	No
ULI FOUNDATION - 23-7133957							
2001 L STREET NW, STE 200	FUNDRAISING IN SUPPORT OF			<u></u>	JRBAN LAND		
WASHINGTON, DC 20036	ULI RESEARCH AND EDUCATION DISTRICT OF COLUMBIA 501(C)(3)	DISTRICT OF COLUMBIA 5		LINE 7	INSTITUTE	×	W.
	10						

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

SEE PART VII FOR CONTINUATIONS

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Schedule R (Form 990) 2015

532161 09-08-15 LHA

53-0159845

Schedule R (Form 990) 2015 URBAN LAND INSTITUTE

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. Part III

(i) (k) General or Percentage managing ownership partner?		Î	e related	Section 512(b)(13) controlled entity?			990) 2015
(j) General or F managing (e) Dartner? (5) Yes No			one or more	(h) Percentage ownership			Schedule R (Form 990) 2015
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			because it had	(g) Share of Fend-of-year assets			Sched
(h) Disproportionate allocations? Yes No			rt IV, line 34				
(g) Share of end-of-year assets			rm 990, Pa	(f) Share of total income			
			"Yes" on Fo	(e) Type of entity (C corp, S corp, or trust)			
(f) Share of total income			answered				
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			ie organization	(d) Direct controlling entity			
			omplete if th	(c) Legal domicile (state or foreign country)			54
(d) Direct controlling entity			oration or Trust Co year.	(b) Primary activity			
(c) Legal domicile (state or foreign country)			as a Corpo	Prim			
(b) Primary activity			ganizations Taxable rporation or trust duri	∠ د			
(a) Name, address, and EIN of related organization			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			532162 09-08-15

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				>	Yes No	٥
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?	ns with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Ą			1 a	×	
b Gift, grant, or capital contribution to related organization(s)				1b	×	
c Gift, grant, or capital contribution from related organization(s)				2	×	
				1d	×	
e Loans or loan guarantees by related organization(s)				9	Þ	1
				2	4	Ĩ
f Dividends from related organization(s)				11	×	
g Sale of assets to related organization(s)				19	×	
h Purchase of assets from related organization(s)		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1h	×	
				1i	×	
j Lease of facilities, equipment, or other assets to related organization(s)	***************************************	***************************************		1]	X	
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×	1)4
l Performance of services or membership or fundraising solicitations for related orga	related organization(s)			=	×	
m Performance of services or membership or fundraising solicitations by related orga	related organization(s)			- H	×	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)		***************************************	두	×	
 Sharing of paid employees with related organization(s) 				10	×	1
 P Reimbursement paid to related organization(s) for expenses 				to d	×	
Reimbursement paid by related organization(s) for expenses				19	×	
Other transfer of and a second of the second				÷	*	١.
(8)				<u>v</u>	4 ×	1.
1 1	who must complete the	nis line, including covered	relationships and transaction thresholds.			1
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(ব) Method of determining amount involved	volved		
(1) ULI FOUNDATION	щ	1,094,411,CASH	CASH			1
(2) ULI FOUNDATION	υ	5,773,855.	CASH	F 2		1
(3)						1
(4)						1
(5)						1
(9)						1
532163 09-08-15	52		Schedule R (Form 990) 2015	R (Form	990) 20	115

Schedule R (Form 990) 2015 URBAN LAND INSTITUTE

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.

noparate amount in box 20 stands of Schedule K-1 (Form 1065)	Are all Share of Share of Bismoon- Code Share of Bismoon- Code Biographic Code	ON SO				
	(f) Share of total income					
Share of end-of-year assets	Are all saturations sec. 501(c)(3) origs.?	NO NO				
Are all Share of Share of ond on one of total on one of one of total one of income assets	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	7. 0 3.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
Are all share of share of or share of or	(c) Legal domicile (state or foreign country)					
Are all Share of Share of Share of or organization income assets Ves No income assets	(b) Primary activity					
(c) (d) (e) (falter) income parties set (related, univelled) sections 512-514) (respectively) (state or foreign excluded from lax under enging) income assets	(a) Name, address, and EIN of entity					

Schedule R (Form 990) 2015 URBAN LAND INSTITUTE	53-0159845	Page 5
Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R (see instructions).		
PART I IDENTIFICATION OF DISREGARDED ENTITIES:		
FART 1, IDENTIFICATION OF DISKEGARDED ENTITIES:		
NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:		
ULI EXHIBITION & CONSULTING (SHANGHAI) LTD		
EIN: 98-1183457		
EIR. 90-116343 /		
ROOM 3663, TOWER II IFC, NO. 8 CENTURY AVENUE		
PUDONG NEW DISTRICT, SHANGHAI, CHINA		

Form **8868** (Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.lrs.gov/form8868,

OMB No. 1545-1709

	evenue Service	Intermediate discussion					37
• If you	are filing for an Aut	omatic 3-Month Extension, complete	e only Par	t I and check this box			► X
• If you	Lare filing for an Ado	litional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of t	this form).		
Do not	complete Part II unle	ss vou have already been granted a	n automat	tic 3-month extension on a previous	ly filed Forn	n 8868.	
Electro	nic filing (e-file) . Yo	ou can electronically file Form 8868 if yo	ou need a	3-month automatic extension of tin	ne to file (6 i	months for a	corporation
roduiro	d to file Form 990-T	or an additional (not automatic) 3-mon	th extens	ion of time. You can electronically fi	le Form 886	58 to request	t an extension
of time	to file any of the form	ns listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for 1	Fransfers As	ssociated Wi	th Certain
Person	al Benefit Contracts,	which must be sent to the IRS in paper	er format (see instructions). For more details o	on the elect	ronic filing of	this form,
visit wv	www.irs.gov/efile.and.c	lick on e-file for Charities & Nonprofits.					
Part	I Automati	c 3-Month Extension of Time	 Only s 	ubmit original (no copies nee	eded).		
A corp	oration required to fil	e Form 990-T and requesting an autom	natic 6-mo	nth extension - check this box and	complete		,
Part I c	nly						
All othe	er corporations (inclu	ding 1120-C filers), partnerships, REMi	Cs, and tr	rusts must use Form 7004 to reques	st an extens	ion of time	
to file ii	ncome tax returns.					's identifyin	glann manual and a second
Туре о	r Name of exemp	ot organization or other filer, see instruc	ctions.		Employer	identification	number (EIN) or
print						53-015	0015
-11 1 41		AND INSTITUTE					
File by th due date	for Number, street	, and room or suite no. If a P.O. box, se	e instruct	tions.	Social sec	urity number	r (55N)
filing you return. Se	1025 THO	MAS JEFFERSON ST, N	IM' M	J. 500W			
instructio	City, town or po	ost office, state, and ZIP code. For a fo	reign add	ress, see instructions.			
	WASHINGT	TON, DC 20007					
				No attended and analysis			0 1
Enter t	he Return code for t	he return that this application is for (file	a separa	te application for each return)	*********		
				A			Return
Applic	ation		Return	Application			Code
Is For			Code	Is For			07
Form 9	990 or Form 990-EZ		01	Form 990-T (corporation)			08
Form 9	UCG/ U		02	Form 1041-A Form 4720 (other than individual)			09
	1720 (individual)		03	Form 5227			10
The second second	990-PF	PRODUCE A	05	Form 6069			11
	990-T (sec. 401(a) or	- //:	06	Form 8870			12
Form 9	990-T (trust other tha	MICHAEL TERSEC					
		re of > 1025 THOMAS JE	REERS	ON ST. NW. NO. 500	W - W	ASHING:	TON, DC 2
• The	books are in the cal	$\frac{1023}{02}$ $\frac{10023}{624-7000}$	1 1110	Fax No.			
Tele	ephone No.	not have an office or place of busines	e in the l li		CONTRACTOR - FOR		>
• If th	ne organization does	urn, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is for	the whole a	roup, check this
	is is for a Group her	rt of the group, check this box	and atta	ach a list with the names and EINs	of all member	ers the exter	ision is for.
box ▶	l request an automat	ic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	e until		
10	FEBRUARY	15, 2017 , to file the exemp	t organiza	ation return for the organization nam	ned above.	The extensio	n
,	is for the organization		J				
	calendar yea						
	X tay year hea	inning JUL 1, 2015	, ar	nd ending JUN 30, 2016	5		
	tax your bog						
2	If the tax year entere	d in line 1 is for less than 12 months, o	heck reas	son: Initial return	Final retur	n	
_		ounting period					
3a	If this application is f	or Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			
	nonrefundable credi				3a	\$	0.
b	If this application is t	or Forms 990-PF, 990-T, 4720, or 6069), enter ar	ny refundable credits and			•
	estimated tax payme	ents made. Include any prior year over	payment a	allowed as a credit.	3b	\$	0
С	Balance due, Subtra	act line 3b from line 3a. Include your p	ayment wi	ith this form, if required,		62	•
	by using EETDS (Fla	ctronic Federal Tax Payment System).	See instr	uctions.	3c	\$	0.
Cauti	on. If you are going t	o make an electronic funds withdrawa	l (direct d	ebit) with this Form 8868, see Form	8453-EO a	nd Form 887	9-EO for payment
	ctions.						
						Form 9	868 (Rev. 1-2014)