

Return of Organization Exempt From Income Tax

2002

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

For the 2002 calendar year, or tax year period beginning SEP 1, 2002 and ending AUG 31, 2003

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: NEW YORK UNIVERSITY
 Please use IRS label or print or type See Specific Instructions
 Number and street (or P.O. box if mail is not delivered to street address): 726 BROADWAY - SECOND FLOOR
 Room/suite: 238
 City or town, state or country, and ZIP + 4: NEW YORK NY 10003

D Employer identification number: 13-5562308
E Telephone number: (212) 998-2913
F Accounting method: Cash Accrual
 Other (specify):

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates: _____
H(c) Are all affiliates included? N/A Yes No
 (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN: _____

G Web site: WWW.NYU.EDU

J Organization type (check only one): 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

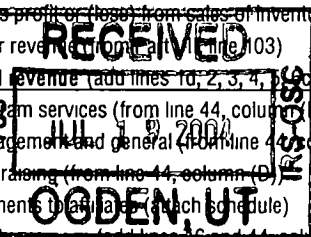
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 5,664,884,644.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received:				
a	Direct public support	1a	199,936,133.		
b	Indirect public support	1b			
c	Government contributions (grants)	1c	193,239,000.		
d	Total (add lines 1a through 1c) (cash \$ <u>385,463,305.</u> noncash \$ <u>7,711,828.</u>)	1d	393,175,133.		
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,365,674,000.		
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4	12,726,000.		
5	Dividends and interest from securities	5	20,799,328.		
6a	Gross rents SEE STATEMENT 2	6a	33,358,945.		
b	Less: rental expenses SEE STATEMENT 3	6b	36,223,945.		
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	<2,865,000.>		
7	Other investment income (describe _____)	7			
8a	Gross amount from sale of assets other than inventory	(A) Securities		(B) Other	
b	Less: cost or other basis and sales expenses	8a	3,487,366,000.	8b	
c	Gain or (loss) (attach schedule)	8b	3,447,803,924.	8c	
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 4	8c	39,562,076.	8d	39,562,076.
9	Special events and activities (attach schedule)				
a	Gross revenue (not including \$ <u>2,891,957.</u> of contributions reported on line 1a)	9a	754,852.		
b	Less: direct expenses other than fundraising expenses	9b	1,473,985.		
c	Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 5	9c	<719,133.>		
10a	Gross sales of inventory, less returns and allowances	10a	32,493,386.		
b	Less: cost of goods sold	10b	25,720,714.		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) STMT 6	10c	6,772,672.		
11	Other revenue (from Part VIII, line 103)	11	318,537,000.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	2,153,662,076.		
13	Program services (from line 44, column (B))	13	1,934,915,163.		
14	Management and general (from line 44, column (C))	14	147,246,365.		
15	Fundraising (from line 44, column (D))	15	19,589,472.		
16	Payments to other organizations (attach schedule)	16			
17	Total expenses (add lines 13 and 14, column (A))	17	2,101,751,000.		
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	51,911,076.		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	2,118,698,000.		
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 7	20	1,456,924.		
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	2,172,066,000.		

SCANNED JUL 23 2004.



Part II Statement of Functional Expenses

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

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash \$162,364,000, noncash \$	22 162,364,000	162,364,000	STMT 10	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 4,055,304	3,751,156	304,148	0
26 Other salaries and wages	26 817,437,773	749,507,357	60,770,867	7,159,549
27 Pension plan contributions	27 53,624,309	49,602,486	4,021,823	0
28 Other employee benefits	28 52,506,574	48,568,581	3,937,993	0
29 Payroll taxes	29 55,646,787	49,722,877	4,031,585	1,892,325
30 Professional fundraising fees	30			
31 Accounting fees	31 358,000	331,150	26,850	0
32 Legal fees	32 2,435,179	2,252,541	182,638	0
33 Supplies	33 49,973,938	46,088,655	3,736,918	148,365
34 Telephone	34 10,237,673	9,229,560	748,343	259,770
35 Postage and shipping	35 7,952,015	6,852,383	555,599	544,033
36 Occupancy	36 91,289,582	84,441,013	6,846,569	2,000
37 Equipment rental and maintenance	37 8,587,000	7,893,578	640,020	53,402
38 Printing and publications	38 2,334,000	1,044,516	84,691	1,204,793
39 Travel	39			
40 Conferences, conventions, and meetings	40 45,639,000	40,716,484	3,301,336	1,621,180
41 Interest	41 48,203,000	44,587,775	3,615,225	0
42 Depreciation, depletion, etc. (attach schedule) ^{STMT 51}	42 90,601,055	83,805,976	6,795,079	0
43 Other expenses not covered above (itemize):				
a _____	43a			
b _____	43b			
c _____	43c			
d _____	43d			
e SEE STATEMENT 8	43e 598,505,811	544,155,075	47,646,681	6,704,055
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 2,101,751,000	1,934,915,163	147,246,365	19,589,472

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 9

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

Program Service Expenses
 (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)

a INSTRUCTION AND DEPARTMENT RESEARCH	(Grants and allocations \$ _____)	1,094,977,563
b PATIENT CARE	(Grants and allocations \$ _____)	171,702,200
c RESEARCH AND OTHER SPONSORED PROGRAMS	(Grants and allocations \$ _____)	188,431,750
d OPERATION AND MAINTENANCE OF PLANT	(Grants and allocations \$ _____)	123,244,225
e Other program services (attach schedule) STATEMENT 11	(Grants and allocations \$ 162,364,000)	356,559,425
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		1,934,915,163

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing	12,704,000.	45	8,480,000.	
	46 Savings and temporary cash investments	196,746,000.	46	128,677,000.	
	47 a Accounts receivable	47a 189,295,024.			
	b Less: allowance for doubtful accounts	47b 25,567,000.	134,086,247.	47c 163,728,024.	
	48 a Pledges receivable	48a 408,496,000.			
	b Less: allowance for doubtful accounts	48b 32,028,000.	431,250,000.	48c 376,468,000.	
	49 Grants receivable		42,069,000.	49 46,072,000.	
	50 Receivables from officers, directors, trustees, and key employees	STATEMENT 12	2,049,753.	50	1,930,976.
	51 a Other notes and loans receivable STMT 13	51a 86,382,000.			
	b Less: allowance for doubtful accounts	51b 4,975,000.	83,590,000.	51c 81,407,000.	
	52 Inventories for sale or use		8,935,000.	52 8,017,084.	
	53 Prepaid expenses and deferred charges		4,783,188.	53 9,184,542.	
	54 Investments - securities STMT 14 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		1,627,255,000.	54 1,781,385,259.	
	55 a Investments - land, buildings, and equipment; basis	55a			
b Less: accumulated depreciation	55b		55c		
56 Investments - other			56		
57 a Land, buildings, and equipment; basis STMT 30	57a 2,516,459,000.				
b Less: accumulated depreciation	57b 985,868,000.	1,400,018,000.	57c 1,530,591,000.		
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 15)		14,064,812.	58 23,133,115.		
59 Total assets (add lines 45 through 58) (must equal line 74)		3,957,551,000.	59	4,159,074,000.	
Liabilities	60 Accounts payable and accrued expenses	251,140,000.	60	318,469,000.	
	61 Grants payable		61		
	62 Deferred revenue	358,853,000.	62	395,308,000.	
	63 Loans from officers, directors, trustees, and key employees		63		
	64 a Tax-exempt bond liabilities STMT 16	724,352,000.	64a	730,348,000.	
	b Mortgages and other notes payable STMT 17	271,753,000.	64b	268,012,000.	
	65 Other liabilities (describe <input type="checkbox"/> SEE STATEMENT 18)		232,755,000.	65 274,871,000.	
66 Total liabilities (add lines 60 through 65)		1,838,853,000.	66	1,987,008,000.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	959,334,000.	67	1,010,748,000.	
	68 Temporarily restricted	397,558,000.	68	326,390,000.	
	69 Permanently restricted	761,806,000.	69	834,928,000.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		2,118,698,000.	73	2,172,066,000.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		3,957,551,000.	74	4,159,074,000.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <u>SEE STATEMENT 24</u> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed <u>NONE</u>		
b	Number of employees employed in the pay period that includes March 12, 2002	90b	20196
91	The books are in care of <u>KERRI J. CARPENTER</u> Telephone no. <u>(212) 998-2913</u>		
	Located at <u>838 BROADWAY, 5TH FLOOR, NEW YORK, N.Y.</u> ZIP + 4 <u>10003-9345</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a TUITION AND FEES					958,356,000.
b PATIENT CARE					220,307,000.
c ROYALTIES					52,524,000.
d DIRECT EXP. RECOVERY					62,631,000.
e OTHER - RESTRICTED					71,856,000.
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	12,726,000.	
96 Dividends and interest from securities			14	20,799,328.	
97 Net rental income or (loss) from real estate:					
a debt-financed property			16	<2,865,000.>	
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	39,562,076.	
101 Net income or (loss) from special events			01	<719,133.>	
102 Gross profit or (loss) from sales of inventory	611310	215,476.	03	6,557,196.	
103 Other revenue:					
a AUXILIARY INCOME	812930	1,125,698.	01	218,091,302.	
b HOSPITAL AFFILIATION			08	99,320,000.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		1,341,174.		393,471,769.	1,365,674,000.
105 Total (add line 104, columns (B), (D), and (E))					1,760,486,943.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 25

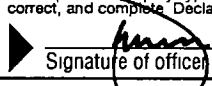
Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)


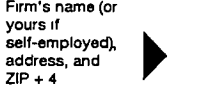
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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 furnished by taxpayer.

Please Sign Here:  Date: 7/15

Paid Preparer's Use Only: Preparer's signature:  Firm's name (or yours if self-employed), address, and ZIP + 4: 

223181 01-22-03

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2002

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

NEW YORK UNIVERSITY

13 5562308

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JAMES GRIFO ----- 550 FIRST AVENUE, N.Y., N.Y.,	PROFESSOR	2,747,904.	71,940.	
NICOLE NOYES ----- 550 FIRST AVENUE, N.Y., N.Y.,	ASST. PROF.	2,283,789.	71,089.	
ALAN BERKELEY ----- 550 FIRST AVENUE, N.Y., N.Y.,	PROFESSOR	2,162,132.	84,861.	
STEPHEN B. COLVIN ----- 550 FIRST AVENUE, N.Y., N.Y.,	ASSOC. PROF.	1,538,933.	68,646.	
FREDERICH LICCIARDI ----- 550 FIRST AVENUE, N.Y., N.Y.,	PROFESSOR	1,288,840.	71,422.	
Total number of other employees paid over \$50,000	▶ 5370			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
RC DOLNER LLC ----- 375 HUDSON STREET, NEW YORK, N.Y., 10014	CONTRACTOR	26,893,112.
ABM COMPANY ----- 551 FIFTH AVE, SUITE 300 NEW YORK, N.Y., 10176	CONTRACTOR	8,463,930.
J A JONES GMO LLC ----- 6E 43RD STREET, 9TH FLOOR NEW YORK, N.Y., 10017	CONTRACTOR	5,157,505.
ON PAR CONTRACTING ----- 230 SOUTH 5TH AVENUE, MT. VERNON, N.Y., 10550	CONTRACTOR	3,295,631.
PHILIP HOLZER & ASSOC. ----- 420 WEST 25TH STREET, NEW YORK, N.Y., 10001	PRINTING SERVICES	2,514,378.
Total number of others receiving over \$50,000 for professional services	▶ 261	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ <u>862,586.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)</p> <p style="text-align: center;">VI-B, LINE I</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.</p>	x	
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) SEE STATEMENT 26</p> <p>a Sale, exchange, or leasing of property?</p>	x	
<p>b Lending of money or other extension of credit?</p>	x	
<p>c Furnishing of goods, services, or facilities?</p>	x	
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	x	
<p>e Transfer of any part of its income or assets?</p>		x
<p>3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)</p>	x	
<p>4 Do you have a section 403(b) annuity plan for your employees?</p>	x	
<p>Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments. SEE STATEMENT 27</p>		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5** A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

N/A

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	0.	0.	0.	0.	0.
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts					
c Total support for section 509(a)(1) test: Enter line 24, column (e)					
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					
e Public support (line 26c minus line 26d total)					
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:					
(2001) (2000) (1999) (1998)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2001) (2000) (1999) (1998)					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					
d Add: Line 27a total _____ and line 27b total _____					
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	x	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	x	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) <u>SEE STATEMENT 28</u>	x	
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	x	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	x	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	x	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	x	
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		x
b	Admissions policies?		x
c	Employment of faculty or administrative staff?		x
d	Scholarships or other financial assistance?		x
e	Educational policies?		x
f	Use of facilities?		x
g	Athletic programs?		x
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		x
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	x	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		x
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	x	

Schedule A (Form 990 or 990-EZ) 2002

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

N/A

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures

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

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

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
X		
X		
	X	
X		100.
X		1,005.
X		250,000.
X		564,169.
X		47,312.
		862,586.

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

SEE STATEMENT 29

SCHEDULE A, PART V - EXPLANATION FOR LINE 34A

THE UNIVERSITY RECEIVES FINANCIAL AID FROM VARIOUS FEDERAL,
STATE AND LOCAL AGENCIES.

FORM 990

RENTAL INCOME

STATEMENT 2

KIND AND LOCATION OF PROPERTY

ACTIVITY
NUMBER

GROSS
RENTAL INCOME

RENTAL REAL ESTATE

1

33,358,945.

TOTAL TO FORM 990, PART I, LINE 6A

33,358,945.

FORM 990

RENTAL EXPENSES

STATEMENT 3

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
RENTAL REAL ESTATE		36,223,945.	
- SUBTOTAL -	1		36,223,945.
TOTAL TO FORM 990, PART I, LINE 6B			36,223,945.

FORM 990 **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES** **STATEMENT** **4**

<u>DESCRIPTION</u>	<u>GROSS SALES PRICE</u>	<u>COST OR OTHER BASIS</u>	<u>EXPENSE OF SALE</u>	<u>NET GAIN OR (LOSS)</u>
VARIOUS PUBLICLY TRADED SECURITIES	3,487,366,000.	3,447,803,924.	0.	39,562,076.
TO FORM 990, PART I, LINE 8	3,487,366,000.	3,447,803,924.	0.	39,562,076.

FORM 990

SPECIAL EVENTS AND ACTIVITIES

STATEMENT 5

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
CHILD STUDY CENTER GALA HOSPITALITY INDUSTRY INVESTMENT CONFERENCE	1,332,944.	1,203,819.	129,125.	150,909.	<21,784.>
URBAN LEADERSHIP REI AWARD DINNER	840,000.	582,325.	257,675.	99,474.	158,201.
OTHER FUNDRAISING EVENTS	429,950.	312,950.	117,000.	317,663.	<200,663.>
	1,043,915.	792,863.	251,052.	905,939.	<654,887.>
TO FM 990, PART I, LINE 9	3,646,809.	2,891,957.	754,852.	1,473,985.	<719,133.>

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 6

INCOME

1. GROSS RECEIPTS	32,493,386	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		32,493,386
4. COST OF GOODS SOLD (LINE 13)	25,720,714	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		6,772,672

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	5,651,000	
7. MERCHANDISE PURCHASED	24,439,434	
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		30,090,434
12. INVENTORY AT END OF YEAR	4,369,720	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12).		25,720,714

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 7

DESCRIPTIONAMOUNT

NET UNREALIZED GAIN ON INVESTMENTS	69,298,924.
NET UNREALIZED GAIN ON DEPOSITS	1,629,000.
ADJUSTMENTS TO CONTRIBUTIONS RECEIVABLE	<42,909,000.>
MINIMUM PENSION LIABILITY ADJUSTMENT	<11,133,000.>
ARBITRAGE & INVESTMENT LOSS ON DEPOSITS WITH TRUSTEES	<5,807,000.>
LOSS ON REFINANCING OF DEBT	<5,033,000.>
TEMPORARILY/PERMANENTLY RESTRICTED - OTHER	<4,589,000.>
TOTAL TO FORM 990, PART I, LINE 20	1,456,924.

FORM 990

OTHER EXPENSES

STATEMENT 8

DESCRIPTION	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	2,293,000.	1,916,354.	155,380.	221,266.
ANIMAL CARE	5,906,000.	5,463,050.	442,950.	0.
BOOKS & PERIODICALS	16,060,000.	14,839,532.	1,203,205.	17,263.
COMMISSIONS & ROYALTIES	895,000.	827,875.	67,125.	0.
COMPUTER EXPENSE CONTRACTED	5,905,000.	5,458,998.	442,621.	3,381.
INSTRUCTION	4,884,000.	4,517,700.	366,300.	0.
EMPLOYEE RECRUITMENT	2,616,000.	2,403,822.	194,905.	17,273.
EMPLOYEE TRAINING	9,510,000.	8,796,750.	713,250.	0.
EQUIPMENT - NON CAPITAL	10,577,000.	9,768,445.	792,036.	16,519.
FAS 106	15,452,000.	14,293,100.	1,158,900.	0.
HONORARIUMS, AWARDS & DIPLOMAS	2,492,000.	2,286,641.	185,403.	19,956.
HOSPITAL AFFILIATION	101,100,000.	93,517,500.	7,582,500.	0.
INSURANCE	3,645,247.	3,371,046.	273,328.	873.
INVESTMENT EXPENSE	3,526,000.	0.	3,526,000.	0.
LEASED EQUIPMENT	26,249,000.	24,280,325.	1,968,675.	0.
MAINTENANCE & REPAIRS	10,798,320.	9,987,955.	809,834.	531.
NEWS PRESS	1,317,000.	1,218,225.	98,775.	0.
OTHER EXPENSES	21,402,603.	15,459,662.	1,253,487.	4,689,454.
PATIENT CARE SERVICES	2,950,000.	2,728,750.	221,250.	0.
PROFESSIONAL FEES	126,916,997.	115,809,499.	9,389,959.	1,717,539.
PURCHASES FOR RESALE	9,323,000.	8,623,775.	699,225.	0.
SERVICE CONTRACTS & FEES	30,651,000.	28,352,175.	2,298,825.	0.
SOME INDIRECT EXPENSES	9,223,387.	8,531,633.	691,754.	0.
SUBGRANTS	5,598,000.	5,178,150.	419,850.	0.
TAXES & LICENSES	3,912,786.	3,619,327.	293,459.	0.
UTILITIES	31,588,471.	29,219,336.	2,369,135.	0.
DIRECT EXPENSES - GRANTS & CONTRACTS	133,714,000.	123,685,450.	10,028,550.	0.
TOTAL TO FM 990, LN 43	598,505,811.	544,155,075.	47,646,681.	6,704,055.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 9
PART III

EXPLANATION

NEW YORK UNIVERSITY (THE UNIVERSITY) IS A PRIVATE INSTITUTION OF HIGHER EDUCATION AND RESEARCH LOCATED PRIMARILY IN NEW YORK CITY. THE UNIVERSITY IS RECOGNIZED BOTH NATIONALLY AND INTERNATIONALLY AS A LEADER IN SCHOLARSHIP AND IS A MEMBER OF THE DISTINGUISHED ASSOCIATION OF AMERICAN UNIVERSITIES. FOUNDED IN 1831, THE UNIVERSITY NOW INCLUDES THIRTEEN SCHOOLS AND COLLEGES AT FIVE MAJOR CENTERS IN MANHATTAN, EACH WITH ITS OWN TRADITIONS, PROGRAMS AND FACULTY. THE SCHOOLS IN ORDER OF FOUNDING DATE ARE, COLLEGE OF ARTS AND SCIENCE, SCHOOL OF LAW, SCHOOL OF MEDICINE, COLLEGE OF DENTISTRY, GRADUATE SCHOOL OF ARTS AND SCIENCE, SCHOOL OF EDUCATION, STERN SCHOOL OF BUSINESS, SCHOOL OF CONTINUING AND PROFESSIONAL STUDIES, WAGNER GRADUATE SCHOOL OF PUBLIC SERVICE, POST GRADUATE MEDICAL SCHOOL, EHRENKRANZ SCHOOL OF SOCIAL WORK, TISCH SCHOOL OF THE ARTS AND THE GALLATIN SCHOOL OF INDIVIDUAL STUDY. THE UNIVERSITY ALSO OPERATES BRANCH CAMPUSES AND RESEARCH PROGRAMS IN OTHER PARTS OF THE UNITED STATES AND ABROAD. THE UNIVERSITY CONDUCTS STUDY ABROAD PROGRAMS IN MORE THAN TWENTY COUNTRIES.

FORM 990

CASH GRANTS AND ALLOCATIONS

STATEMENT 10

<u>CLASSIFICATION</u>	<u>DONEE'S NAME</u>	<u>DONEE'S ADDRESS</u>	<u>DONEE'S RELATIONSHIP</u>	<u>AMOUNT</u>
STUDENT FINANCIAL AID	VARIOUS	VARIOUS	NONE	162,364,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				162,364,000.

FORM 990

OTHER PROGRAM SERVICES

STATEMENT 11

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
STUDENT AID	162,364,000.	162,364,000.
LIBRARY		40,239,350.
STUDENT SERVICES		60,438,575.
HOSPITAL AFFILIATIONS		93,517,500.
TOTAL TO FORM 990, PART III, LINE E	162,364,000.	356,559,425.

FORM 990 RECEIVABLES DUE FROM OFFICERS, DIRECTORS, TRUSTEES STATEMENT 12
AND OTHER KEY EMPLOYEES - REPORTED AS SINGLE TOTAL

DESCRIPTION

BALANCE DUE

JOHN E. SEXTON - PRESIDENT	189,429.
JACOB J. LEW - EXECUTIVE VICE PRESIDENT	1,448,208.
JEANNEMARIE SMITH - SVP FOR FINANCE & BUDGET	293,339.
<hr/>	
TOTAL INCLUDED ON FORM 990, PART IV, LINE 50, COLUMN B	1,930,976.
<hr/> <hr/>	

FORM 990

PART IV - LINE(S) 51C OTHER NOTES AND LOANS RECEIVABLE

STATEMENT 13

GROSS STUDENT LOAN FUND	86,382,000
ALLOWANCE FOR UNCOLLECTIBLE STUDENT LOANS	<u>(4,975,000)</u>
TOTAL STUDENT LOAN FUND	<u>81,407,000</u>

FORM 990

NON-GOVERNMENT SECURITIES

STATEMENT 14

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
ALTERNATIVE INVESTMENTS				336,188,000.	336,188,000.
EQUITY SECURITIES				501,210,000.	501,210,000.
FIXED INCOME SECURITIES				442,732,000.	442,732,000.
OTHER SECURITIES				10,825,000.	10,825,000.
SHORT - TERM INVESTMENTS				398,166,000.	398,166,000.
REAL ESTATE INVESTED COLLATERAL IN S/T SECURITIES				27,830,000.	27,830,000.
				64,434,259.	64,434,259.
TO 990, LN 54 COL B				1,781,385,259.	1,781,385,259.

FORM 990

OTHER ASSETS

STATEMENT 15

DESCRIPTIONAMOUNT

BOND ISSUANCE COSTS

8,078,449.

DEPOSITS

352,561.

SCHOOL OF LAW FOUNDATION

2,533,105.

SCHOOL OF MEDICINE

12,169,000.

TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B

23,133,115.

FORM 990 PART IV - LINE 64a TAX - EXEMPT BOND LIABILITIES STATEMENT 16

	Original Principal	Date Assumed	Final Due Date	Interest Rate	Average Annual Payment Interest & Principal	Outstanding Debt 8/31/03	Outstanding Debt 08/31/02	Bond Interest Payable 8/31/03
UNIVERSITY CENTERS:								
Dormitory Authority of the State of New York:								
Bonds Payable:								
1993 Bonds	157,695,828	12/15/93	07/01/11	4 30%-5 50%	14,435,752	-	81,644,000	-
1993 Discount						-	(293,000)	-
1998 Bonds	250,000,000	03/30/98	07/01/27	4 00%-6 0%	18,050,261	234,995,000	239,660,000	2,235,875
1998 Premium					-	19,029,000	19,708,000	-
2001 ABonds	114,569,457	05/01/01	07/01/15	5 00%-5 75%	18,050,261	102,389,000	108,625,000	873,845
2001 A Premium					-	4,035,000	4,371,000	-
2001 Series 1 Bonds	66,000,000	03/15/01	07/01/40	4 375%-5 50%	4,540,181	66,000,000	66,000,000	602,866
2001 Series 1 Premium					-	4,793,000	4,923,000	-
2001 Series 2 Bonds	40,092,627	08/01/01	07/01/41	4 00%-5 50%	2,612,895	40,093,000	40,093,000	339,112
2001 Series 2 Discount					-	(178,000)	(182,000)	-
2003 Series A Bonds	68,525,637	06/01/03	07/01/11	2 00%-5 00%	7,223,215	68,526,000	-	1,024,998
2003 Series A Premium					-	4,737,000	-	-
2003 Series B Bonds	26,875,000	06/01/03	07/01/11	5 00%	26,875,000	26,875,000	-	386,328
2003 Series B Premium					-	3,684,000	-	-
Total DA Bonds	723,758,549				91,787,566	574,978,000	564,549,000	5,463,024
SCHOOL OF MEDICINE:								
DA of the State of NY:								
Bonds Payable:								
1993 Bonds	** 65,704,218	12/15/93	07/01/11	4.30%-5 50%	\$ 5,490,179	\$ -	\$ 38,617,000	
2001A Bonds	9,075,543	05/01/01	07/01/15	5 00%-5 75%	888,253	8,110,000	8,605,000	78,821
2001A Premium					-	320,000	346,000	
2001 Series#1 Bonds	54,000,000	03/15/01	07/01/40	4 375%-5 50%	3,473,688	54,000,000	54,000,000	493,254
2001 Series#1 Premium					-	3,922,000	4,028,000	
2001 Series#2 Bonds	54,207,373	08/01/01	07/01/41	4 00%-5 50%	3,320,203	54,207,000	54,207,000	458,466
2003 Series A Bond	32,600,000	06/01/03	07/01/11	2 00%-5 00%	4,351,947	32,600,000	-	
2003 Series A Premium						2,211,000	-	
Total DA Bonds	215,587,134				17,524,270	155,370,000	159,803,000	1,030,541
TOTAL TO PART IV LINE 64a					109,311,836	730,348,000	724,352,000	6,493,565

** All Original Principal include School of Medicine & Hospital Center both

FORM 990 PART IV - LINE 64b MORTGAGES AND OTHER NOTES PAYABLE STATEMENT 17

	Original Principal	Date Assumed	Final Due Date	Interest Rate	Average Annual Payment Interest & Principal	Outstanding Debt 08/31/03	Outstanding Debt 08/31/02	Bond Interest Payable 08/31/03	
College Housing Loan Goddard Hall	3,500,000	11/09/87	11/01/17	3.00%	142,000	2,073,000	2,190,000	-	
IDA Bonds	64,210,000	10/18/01	08/31/41	4.125%-5.375%	4,123,500	64,210,000	64,210,000	534,929	
IDA Discount					-	(1,564,000)	(1,605,000)	-	
Carlyle I & II	27,047,423	12/01/93	12/1/13	7.07%	2,579,300	20,273,000	20,273,000	-	
Carlyle III	24,852,574	12/01/93	12/1/13	7.07%	2,370,000	18,627,000	18,627,000	-	
Power Authority	750,000	03/1/98	3/01/05		400,000	198,000	323,000	-	
Total Univ Centers	120,359,997				9,614,800	103,817,000	104,018,000	534,929	
Other:									
Obligations under capitalized leases									
Sallie Mae - MUB	** 179,910,572	03/92	08/12	8.377%	16,721,445	161,337,000	164,643,000	1,171,390	
Sallie Mae - HCC Refinance	** 10,089,428	03/92	08/12	8.377%	404,447	2,777,000	2,970,000	21,130	
Wascos II Lease	68,997	4/98	3/03	7.27%	16,680	0	9,000		
Wasco II Lease	45,748	12/98	12/03	9.24%	11,437	3,000	14,000		
Wasco III Lease	12,902	11/99	11/04	11.074%	3,372	4,000	7,000		
GE 9800 - New Lease	100,000	1/02	12/06	8.516%	24,768	74,000	92,000		
Digital Equipment Corp		In Progress	In Progress	Variable	-	-	-		
Total Other	190,227,647				17,182,149	164,195,000	167,735,000	1,192,520	
TOTAL TO PART IV - LINE 64b						\$ 26,796,949	\$ 268,012,000	\$ 271,753,000	\$ 1,727,449

** All Original Principal include School of Medicine & Hospital Center both

*** The average annual payment doesn't include the last principal payment for MUB (\$122,032,589) and HCC (\$480,726)

FORM 990

OTHER LIABILITIES

STATEMENT 18

DESCRIPTIONAMOUNT

ACCRUED PENSION & POSTRETIREMENT BENEFITS

203,080,000.

FEDERAL GRANTS REFUNDABLE

71,791,000.

TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B

274,871,000.

FORM 990

OTHER REVENUE NOT INCLUDED ON FORM 990

STATEMENT 19

DESCRIPTIONAMOUNT

ADJUSTMENTS TO CONTRIBUTIONS RECEIVABLE - PART I LINE 20	<42,909,000.>
MINIMUM PENSION LIABILITY - PART I LINE 20	<11,133,000.>
ARBITRAGE & INVESTMENT LOSS ON DEPOSITS WITH TRUSTEES - PART I LINE 20	<5,807,000.>
LOSS ON REFINANCING OF DEBT - PART I LINE 20	<5,033,000.>
TEMPORARILY/PERMANENTLY RESTRICTED OTHER - PART I LINE 20	<4,589,000.>
STUDENT FINANCIAL AID - PART II LINE 22	<162,364,000.>
INVESTMENT EXPENSES - PART II STMT 8	<3,526,000.>
TOTAL TO FORM 990, PART IV-A	<235,361,000.>

FORM 990

OTHER EXPENSES NOT INCLUDED ON FORM 990

STATEMENT 20

DESCRIPTIONAMOUNT

REAL ESTATE EXPENSES - PART I LINE 6B	36,223,945.
FUNDRAISING EXPENSES - PART I LINE 9B	1,473,985.
BOOKSTORE COST OF GOODS SOLD - PART I LINE 10B	25,720,714.
MISCELLANEOUS - ROUNDING	356.
TOTAL TO FORM 990, PART IV-B	63,419,000.

FORM 990

OTHER REVENUE INCLUDED ON FORM 990

STATEMENT 21

DESCRIPTIONAMOUNT

REAL ESTATE EXPENSES - PART I LINE 6B	<36,223,945.>
FUNDRAISING EXPENSES - PART I LINE 9B	<1,473,985.>
BOOKSTORE COST OF GOODS SOLD - PART I LINE 10B	<25,720,714.>
MISCELLANEOUS - ROUNDING	<356.>
TOTAL TO FORM 990, PART IV-A	<63,419,000.>

FORM 990 OTHER EXPENSES INCLUDED ON FORM 990 STATEMENT 22

DESCRIPTION	AMOUNT
STUDENT FINANCIAL AID - PART II LINE 22	162,364,000.
TOTAL TO FORM 990, PART IV-B	162,364,000.

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 23

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE	
			BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOHN E. SEXTON 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	UNIVERSITY PRESIDENT 40	740,504.	32,508.	0.
JACOB J. LEW 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	EXECUTIVE VP 40	807,880.	32,559.	0.
DAVID W. MCLAUGHLIN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	PROVOST 40	450,000.	29,721.	0.
S. ANDREW SCHAFFER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	SVP, GEN. COUNSEL & SEC. 40	425,000.	32,508.	0.
ROBERT BERNE 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	VP ACADEMIC & HEALTH 40	425,000.	32,508.	0.
JENNEMARIE SMITH 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	SVP. FOR FINANCE & BUDGET 40	326,920.	30,323.	0.
DEBRA LAMORTE 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	SENIOR VP-DEV.& ALUMNI 40	300,000.	23,673.	0.
CHERYL MILLS 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	SVP. FOR OPER. & ADMIN. 40	300,000.	15,083.	0.
HAROLD T. READ - UNTIL 12/31/03 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	V.P. FOR FINANCE 40	280,000.	32,296.	0.
MARTIN LIPTON - CHAIR 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
LARRY A. SILVERSTEIN - VICE CHAIR 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.

DIANE BELFER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MARC H. BELL 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
WILLIAM R. BERKLEY 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
EDWARD H. BERSOFF 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
RONALD E. BLAYLOCK 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MRS. ELMER HOLMES BOBST 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
LEONARD BOXER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
JOHN BRADEMAS 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
KEVIN R. BRINE 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
ARTHUR L. CARTER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
BARRY DILLER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MARY C. FARRELL 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
LAURENCE D. FINK 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.

PAUL E. FRANCIS 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
PAUL J. FRIBOURG 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
JAY M. FURMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
ERIC J. GLEACHER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
NORMAN GOODMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
RICHARD A. GRASSO 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
ALAN C. GREENBERG 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
H DALE HEMMERDINGER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
RICHARD D. KATCHER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
HENRY KAUFMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
RICHARD JAY KOGAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
CHARLES KUSHNER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
KENNETH G. LANGONE 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.

JILLIAN MANUS-SALZMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
BROOKE GARBER NEIDICH 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
L. JAY OLIVA 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
DAVID C. OXMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
HERBERT M. PAUL 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
LESTER POLLACK 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
ROBERT ROSENKRANZ 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
E. JOHN ROSENWALD, JR. 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
WILLIAM C. RUDIN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
CONSTANCE SILVER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
HENRY R. SILVERMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
JOEL E. SMILOW 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
JAY STEIN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.

JOSEPH S. STEINBERG 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MICHAEL H. STEINHARDT 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
HENRY TAUB 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
PRESTON ROBERT TISCH 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
LILLIAN VERNON 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
JOHN L. VOGELSTEIN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
CASEY WASSERMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
ANTHONY WELTERS 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
LEONARD A. WILF 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MARTIN J. WYGOD 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
WILLIAM D. ZABEL 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MORTIMER B. ZUCKERMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE AS NEEDED	0.	0.	0.
MRS. W. VINCENT ASTOR 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.

GERALDINE H. COLES 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
JOHN J. CREEDON 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
LEWIS L. GLUCKSMAN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
MAURICE R. GREENBERG 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
HELEN L. KIMMEL 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
GEORGE A. MURPHY 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
THOMAS S. MURPHY - HON. VICE CHAIR 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
WILLIAM R. SALOMON 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
MARIE SCHWARTZ 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
SHELDON H. SOLOW 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
PHYLLIS CERF WAGNER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
ROBERT F. WRIGHT 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.
BARONESS MARIUCCIA ZERILLI-MARIMO 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	LIFE TRUSTEE AS NEEDED	0.	0.	0.

BRUCE BERGER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE ASSOCIATE AS NEEDED	0.	0.	0.
JANE EISNER BRAM 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE ASSOCIATE AS NEEDED	0.	0.	0.
BETTY WEINBERG ELLERIN 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE ASSOCIATE AS NEEDED	0.	0.	0.
BORIS KOSTELANETZ 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE ASSOCIATE AS NEEDED	0.	0.	0.
MARVIN LEFFLER 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE ASSOCIATE AS NEEDED	0.	0.	0.
MICHAEL J. ROSENBERG 70 WASHINGTON SQUARE SOUTH NEW YORK , N.Y. 10012	TRUSTEE ASSOCIATE AS NEEDED	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V

4,055,304.	261,179.	0.
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Compensation balances reflect the time period employees served as officers of NYU.

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS
PART VI, LINE 80B

STATEMENT 24

<u>NAME OF ORGANIZATION</u>	<u>EXEMPT</u>	<u>NONEXEMPT</u>
INSTITUTE OF FINE ARTS FOUNDATION	X	
INSTITUTE OF JUDICIAL ADMIN. INC.	X	
NATIONAL CENTER ON PHILANTHROPY AND THE LAW	X	
NEW YORK UNIVERSITY REAL ESTATE CORP.	X	
NYU IMAGING, INC.	X	
NYU MEDICAL CENTER FOUNDATION	X	
NYU SCHOOL OF BUSINESS FOUNDATION INC.	X	
NYU SCHOOL OF LAW FACULTY RETENTION ASSISTANCE CORP.	X	
NYU SCHOOL OF LAW FOUNDATION	X	
NYU SCHOOL OF LAW HOUSING ASSISTANCE CORPORATION	X	
NYU SCHOOL OF LAW RECRUITMENT ASSISTANCE	X	
WASHINGTON SQUARE LEGAL SERVICES INC.	X	
SCHOOL OF MEDICINE FOUNDATION INC.	X	

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 25

LINE EXPLANATION OF RELATIONSHIP OF ACTIVITIES

93A THIS ACTIVITY CONTRIBUTES IMPORTANTLY TO THE INSTRUCTIONAL PROGRAM WHICH ENABLES STUDENTS TO MEET EDUCATIONAL GOALS.

93B THIS ACTIVITY CONTRIBUTES IMPORTANTLY TO HEALTHCARE AND RESEARCH FOR THE BENEFIT OF PEOPLE WITH ILLNESSES IN OUR CITY, STATE & NATION.

93C THIS ACTIVITY IS RELATED TO THE UNIVERSITY'S EDUCATIONAL AND CIVIC PURPOSES.

93D THIS ACTIVITY REPRESENTS A RECOVERY OF SOME OF THE COSTS RELATED TO RESEARCH CONDUCTED BY THE UNIVERSITY.

93E THIS ACTIVITY IS RELATED TO THE UNIVERSITY'S EDUCATIONAL AND CIVIC PURPOSES.

SCHEDULE A

STATEMENT REGARDING ACTIVITIES WITH
SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS,
CREATORS, KEY EMPLOYEES, ETC.,
PART III, LINE 2

STATEMENT 26

LINE 2A

OTHER THAN THE PAYMENT OF REASONABLE AND NOT EXCESSIVE COMPENSATION AND REIMBURSEMENT OF EXPENSES FOR OFFICERS, THE UNIVERSITY KNOWS OF NO SIGNIFICANT TRANSACTIONS BETWEEN IT AND ANY PERSON DESCRIBED ABOVE OR ANY ORGANIZATION OR CORPORATION WITH WHICH SUCH PERSON IS AFFILIATED OTHER THAN TRANSACTIONS IN THE NORMAL CONDUCT OF ITS ACTIVITIES (I.E., THE BORROWING OF MONEY FROM A BANK OF WHICH THE TRUSTEE MAY BE AN OFFICER, OR THE PURCHASE OF PRODUCTS OF OR THE LEASING OF SPACE FROM A CORPORATION OF WHICH TRUSTEES MAY BE AN EMPLOYEE OR OFFICER). ALL SUCH TRANSACTIONS ARE CONDUCTED AT ARM'S LENGTH AND FOR GOOD AND SUFFICIENT CONSIDERATION. MOREOVER, IN SUCH INSTANCES, THE TRUSTEE PLAYS NO SIGNIFICANT ROLE IN THE TRANSACTIONS.

LINE 2B

SEE FORM 990, PART IV LINE 50

LINE 2D

SEE FORM 990, PART V

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 27
PART III, LINE 3

DISBURSEMENTS IN THE FURTHERANCE OF THE UNIVERSITY'S PROGRAMS ARE MADE DIRECTLY FOR SALARY AND OTHER EXPENSES INCURRED IN THE ACTIVE CONDUCT OF THOSE ACTIVITIES FOR WHICH THE UNIVERSITY IS ORGANIZED AND OPERATED. STUDENTS RECEIVING SCHOLARSHIPS AND FELLOWSHIPS ARE JUDGED WORTHY BY THE INSTITUTION'S ASSESSMENT ON THE BASIS OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND OTHER SIMILAR STANDARDS.

SCHEDULE A PRIVATE SCHOOL QUESTIONNAIRE - PART V, LINE 31 STATEMENT 28

ALL NEWSPAPER, ADVERTISEMENTS AND PUBLICATIONS INCLUDE AT LEAST THE FOLLOWING STATEMENT: " NEW YORK UNIVERSITY IS AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY INSTITUTION. " BULLETINS OF EACH SCHOOL AND OTHER LENGTHIER PUBLICATIONS INCLUDE THE FOLLOWING: " NEW YORK UNIVERSITY IS COMMITTED TO RELATIONS WITH ITS FACULTY, STUDENTS, AND STAFF MEMBERS, WITHOUT REGARD TO SEX, SEXUAL ORIENTATION, MARITAL OR PARENTAL STATUS, RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE AND HANDICAP. "

SCHEDULE A STATEMENT OF LOBBYING ACTIVITIES - PART VI-B STATEMENT 29

LINE A - VOLUNTEERS

NEW YORK UNIVERSITY HELD TWO DAY LONG VISITS WHERE ALUMNI VOLUNTEERS ASSISTED WITH UNIVERSITY EFFORTS TO SECURE FUNDING FOR HIGHER EDUCATION EFFORTS IN THE FEDERAL AND STATE BUDGETS. THEY WERE MARCH 04, 2003 IN ALBANY NEW YORK AND APRIL 08 - 09, 2003 IN WASHINGTON, D.C.

LINE B - PAID STAFF OR MANAGEMENT

THE FOLLOWING NYU EMPLOYEES WERE REGULARLY INVOLVED IN ACTIVITIES RELATED TO NATIONAL, STATE AND LOCAL LEGISLATION:

SENIOR VICE PRESIDENT FOR UNIVERSITY RELATIONS AND PUBLIC AFFAIRS
DIRECTOR OF GOVERNMENT AND COMMUNITY RELATIONS
ASSOCIATE DIRECTOR OF GOVERNMENT AND COMMUNITY RELATIONS
DIRECTOR OF FEDERAL POLICY
ASSISTANT DEAN - OFFICE OF GOVERNMENT AFFAIRS
POLICY ASSOCIATE AND GOVERNMENT POLICY ANALYST

LINE D - MAILING TO MEMBERS

VARIOUS MAILINGS WERE SENT BY THE OFFICE OF GOVERNMENT AND COMMUNITY RELATIONS TO NATIONAL, STATE AND LOCAL OFFICIALS RELATING TO HIGHER EDUCATION AND UNIVERSITY ISSUES.

LINE E - PUBLISHED OR BROADCAST STATEMENTS

THE OFFICE OF GOVERNMENT RELATIONS PUBLISHED A HANDBOOK FOR ALBANY DAY AND WASHINGTON D.C. DAY.

LINE G - DIRECT CONTACT WITH LEGISLATORS

THE SENIOR VICE PRESIDENT FOR UNIVERSITY RELATIONS AND PUBLIC AFFAIRS, DIRECTOR OF GOVERNMENT AND COMMUNITY RELATIONS, ASSISTANT DIRECTOR OF GOVERNMENT RELATIONS, DIRECTOR OF FEDERAL POLICY AND ASSISTANT DEAN - OFFICE OF GOVERNMENT AFFAIRS WERE IN REGULAR CONTACT WITH NATIONAL, STATE AND LOCAL LEGISLATORS, THEIR STAFF AND GOVERNMENT OFFICIALS. THE AMOUNT LISTED IN THIS CATAGORY REFLECTS THAT PORTION OF COMPENSATION RELATED TO THE TIME EXPENDED BY EACH INDIVIDUAL IN THIS FUNCTION.

LINE H - RALLIES, DEMONSTRATIONS AND SEMINARS

THE UNIVERSITY HELD A DAY LONG VISIT TO THE STATE CAPITAL ON MARCH 04, 2003 AND A TWO DAY VISIT TO WASHINGTON, D.C. ON APRIL 08 - 09, 2003.

LAND, BUILDINGS, AND EQUIPMENT ARE CARRIED AT THEIR ACQUISITION OR CONSTRUCTION COST. IF DONATED, THESE ASSETS ARE RECORDED AT THEIR FAIR VALUE ON THE DATE OF THE GIFT. BUILDINGS AND EQUIPMENT ARE DEPRECIATED OVER THEIR ESTIMATED USEFUL LIVES (BUILDINGS, 40 YEARS; BUILDING IMPROVEMENTS, 17 YEARS; EQUIPMENT, 3-9 YEARS) USING THE STRAIGHT-LINE METHOD.

601

0508

If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.

Name of Exempt Organization: NEW YORK UNIVERSITY
Employer identification number: 13-5562308
Number, street, and room or suite no: 726 BROADWAY - SECOND FLOOR
City, town or post office, state, and ZIP code: NEW YORK, NY 10003

Check type of return to be filed (File a separate application for each return):

- Form 990, Form 990-EZ, Form 990-T (sec 401(a) or 408(a) trust), Form 1041-A, Form 5227, Form 8870, Form 990-BL, Form 990-PF, Form 990-T (trust other than above), Form 4720, Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- If the organization does not have an office or place of business in the United States, check this box
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)
If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

I request an additional 3-month extension of time until JULY 15, 2004
For calendar year SEP 1, 2002 and ending AUG 31, 2003
If this tax year is for less than 12 months, check reason: Initial return, Final return, Change in accounting period
State in detail why you need the extension: ADDITIONAL TIME IS NEEDED TO OBTAIN INFORMATION REQUIRED TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made
8c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

Signature and Verification

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

Signature: [Handwritten Signature] Title: ASSOCIATE CONTROLLER Date: 4/1/04

Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
We cannot consider this application because it was filed after the due date of the return for w
Other

Director By: _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an addit different than the one entered above.

Name: C/O CDV TAX DEPARTMENT
Number and street (include suite, room, or apt. no.) Or a P.O. box number: 726 BROADWAY 2ND FLOOR, ROOM 238
City or town, province or state, and country (including postal or ZIP code): NEW YORK, N.Y., 10003-9580

