

Form 990
Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 03-01-2018, and ending 02-28-2019
B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending
C Name of organization: THE UNIVERSITY CLUB
Doing business as
Number and street (or P O box if mail is not delivered to street address): ONE WEST 54TH STREET
Room/suite
City or town, state or province, country, and ZIP or foreign postal code: NEW YORK, NY 10019
D Employer identification number: 13-1429480
E Telephone number: (212) 247-2100
G Gross receipts \$ 60,650,444
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number
I Tax-exempt status: 501(c)(3) 501(c) (7) (insert no) 4947(a)(1) or 527
J Website: WWW UNIVERSITYCLUBNY ORG
K Form of organization: Corporation Trust Association Other
L Year of formation 1865
M State of legal domicile NY

Part I Summary

Table with 4 columns: Description, Prior Year, Current Year, End of Year. Rows include: 1 Briefly describe the organization's mission... 2 Check this box... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income... 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue... 13 Grants and similar amounts paid... 14 Benefits paid... 15 Salaries, other compensation... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses... 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances...

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

Sign Here
Signature of officer: THOMAS J STRAUSS TREASURER
Date: 2020-01-14

Paid Preparer Use Only
Print/Type preparer's name: CONDON O'MEARA MCGINTY & DONNELLY LLP
Preparer's signature
Date
Check if self-employed
PTIN P00183769
Firm's EIN 13-3628255
Firm's address ONE BATTERY PARK PLAZA 7TH FL NEW YORK, NY 10004
Phone no (212) 661-7777

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If "Yes," complete Schedule J</i>	23 Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	
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? <i>If "Yes," complete Schedule L, Part II</i>	26	No
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? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
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? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
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 Yes	

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 136	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes	

<p>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</p>	2a	411			
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	Yes	
<p>b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i></p>			3b	Yes	
<p>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)?</p>			4a		No
<p>b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a		No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b		No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c		
<p>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?</p>			6a		No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
<p>a 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?</p>			7a		
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b		
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c		
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e		
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f		
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			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?					
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b		
10 Section 501(c)(7) organizations. Enter					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a	2,206,848			
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b	6,288,667			
11 Section 501(c)(12) organizations. Enter					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O					
<p>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</p>	13b		13a		
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a		No
<p>b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i></p>			14b		
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>			15		No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O</p>			16		No

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

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [] Own website [] Another's website [x] Upon request [] Other (explain in Schedule O); 19 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; 20 State the name, address, and telephone number of the person who possesses the organization's books and records. JENNIFER ZEPPIERI THE CLUB ONE WEST 54TH STREET NEW YORK, NY 10019 (212) 247-2100

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	1,488,767	0	340,918

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 7

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 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? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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) Name and business address	(B) Description of services	(C) Compensation
CONSTRUCTOMICS LLC 40 BROAD STREET 4TH FLOOR NEW YORK, NY 10004	CONTRACTOR	480,774
M SLAVIN & SONS LTD C/O NORTH CAPITAL LLC PO BOX 278 LAUREL, NY 11948	MEAT PROVEYOR	188,825
SHIELDS WARENDORFF FLOWERS 52 WEST 56TH STREET NEW YORK, NY 10019	FLORIST	168,881

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 ▶ 3

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	30,000		
	g Noncash contributions included in lines 1a - 1f \$ _____				
	h Total. Add lines 1a-1f		30,000		
Program Service Revenue			Business Code		
	2a MEMBERSHIP DUES	900099	11,919,925	11,919,925	
	b CAPITAL ASSESSMENT	900099	1,157,240	1,157,240	
	c ENTRANCE FEES	900099	1,049,608	1,049,608	
	d _____				
	e _____				
	f All other program service revenue				
g Total. Add lines 2a-2f		14,126,773			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		528,123		522,923
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	(i) Real	(ii) Personal		
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)			-201,962	-201,962
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a			
	b Less direct expenses	b			
	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19	a			
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b	22,577,024			
c Net income or (loss) from sales of inventory			19,142,336	13,986,620	
Miscellaneous Revenue	Business Code				
11a PARTNERSHIP LOSS	900099		-1,150	-1,150	
b _____					
c _____					
d All other revenue					
e Total. Add lines 11a-11d			-1,150		
12 Total revenue. See Instructions		33,624,120	28,113,393	5,475,527	

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	250,000			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	650,110			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	12,717,342			
7 Other salaries and wages.				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	1,148,304			
9 Other employee benefits.	5,377,233			
10 Payroll taxes.	1,411,897			
11 Fees for services (non-employees):				
a Management.				
b Legal.	71,549			
c Accounting.	59,915			
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	94,663			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	200,774			
12 Advertising and promotion.				
13 Office expenses.	1,726,874			
14 Information technology.	62,190			
15 Royalties.				
16 Occupancy.	3,794,502			
17 Travel.				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	14,454			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	2,804,691			
23 Insurance.	718,375			
24 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):				
a UNRELATED BUS INC TAX	47,954			
b CLUBHOUSE EXPENSES	1,491,873			
c FOOD & BEV OPERATIONS	880,424			
d ROOMS OPERATIONS	381,543			
e All other expenses	682,359			
25 Total functional expenses. Add lines 1 through 24e.	34,587,026			
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	372,944	1	329,156
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	2,977,111	4	1,950,063
	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 employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	1,457,669	8	1,421,378
	9 Prepaid expenses and deferred charges	1,490,537	9	1,806,488
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 76,537,451		
	b Less accumulated depreciation	10b 44,074,082	32,728,294	10c 32,463,369
	11 Investments—publicly traded securities	19,844,444	11	19,593,775
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	58,870,999	16	57,564,229	
Liabilities	17 Accounts payable and accrued expenses	4,671,620	17	4,940,175
	18 Grants payable		18	
	19 Deferred revenue		19	
	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 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	2,621,259	25	2,538,346
	26 Total liabilities. Add lines 17 through 25	7,292,879	26	7,478,521
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	49,169,817	27	47,714,157
	28 Temporarily restricted net assets	2,114,676	28	2,047,924
	29 Permanently restricted net assets	293,627	29	323,627
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	51,578,120	33	50,085,708	
34 Total liabilities and net assets/fund balances	58,870,999	34	57,564,229	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	33,624,120
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,587,026
3	Revenue less expenses Subtract line 2 from line 1	3	-962,906
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	51,578,120
5	Net unrealized gains (losses) on investments	5	112,998
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	-642,504
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	50,085,708

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash 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?
 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 13-1429480

Name: THE UNIVERSITY CLUB

Form 990 (2018)

Form 990, Part III, Line 4a:

TAX EXEMPT CLUB ACTIVITIES

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SANFORD A COCKRELL III PRESIDENT	10 00	X		X				0	0	0
DAVID LIFSON VICE PRESIDENT	10 00	X		X				0	0	0
HOWARD E STEINBERG VICE PRESIDENT	10 00	X		X				0	0	0
STEVEN LORCH SECRETARY	10 00	X		X				0	0	0
THOMAS J STRAUSS TREASURER	10 00	X		X				0	0	0
MICAELA RH MCMURROUGH ASSISTANT TREASURER	10 00	X		X				0	0	0
TRAVEY EVE JOHNSON ASSISTANT SECRETARY	10 00	X		X				0	0	0
JANE R ANDREWS COUNCIL MEMBER	2 00	X						0	0	0
C CASEY BAYLES COUNCIL MEMBER	2 00	X						0	0	0
MARTIN L BUDD COUNCIL MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FRANCIS J CALCAGNO COUNCIL MEMBER	2 00	X						0	0	0
SCOTT CAPUTO COUNCIL MEMBER	2 00	X						0	0	0
EVEANN CASSIS COUNCIL MEMBER	2 00	X						0	0	0
ROBERT J COAKLEY COUNCIL MEMBER	2 00	X						0	0	0
ANNE L CORISTON COUNCIL MEMBER	2 00	X						0	0	0
JD CREGAN JR COUNCIL MEMBER	2 00	X						0	0	0
MICHAEL H DEVLIN II COUNCIL MEMBER	2 00	X						0	0	0
DANIEL L DOLGIN COUNCIL MEMBER	2 00	X						0	0	0
THOMAS P FARRELL JR COUNCIL MEMBER	2 00	X						0	0	0
JAMES K FINKEL COUNCIL MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES G FREEMAN COUNCIL MEMBER	2 00	X						0	0	0
THEODORE R GAMBLE COUNCIL MEMBER	2 00	X						0	0	0
HOWARD E GELTZER COUNCIL MEMBER	2 00	X						0	0	0
BRIDGER GEORGE COUNCIL MEMBER	2 00	X						0	0	0
WARREN H HABER COUNCIL MEMBER	2 00	X						0	0	0
BLAIR L KELLER COUNCIL MEMBER	2 00	X						0	0	0
JAMES J KILLERLANE III COUNCIL MEMBER	2 00	X						0	0	0
OWEN PJ KING COUNCIL MEMBER	2 00	X						0	0	0
RICHARD G MASON COUNCIL MEMBER	2 00	X						0	0	0
PATRICK J MCCURDY COUNCIL MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANN E MCGOWAN COUNCIL MEMBER	2 00	X						0	0	0
THOMAS J O'HOLLORAN COUNCIL MEMBER	2 00	X						0	0	0
MITCHELL S ROSENTHAL COUNCIL MEMBER	2 00	X						0	0	0
MICHAEL ROYCE COUNCIL MEMBER	2 00	X						0	0	0
CHARLES F RITCHER COUNCIL MEMBER	2 00	X						0	0	0
STEPHEN C SCHRAM COUNCIL MEMBER	2 00	X						0	0	0
BARBARA A TAYLOR COUNCIL MEMBER	2 00	X						0	0	0
JOHN P DORMAN GENERAL MANAGER	40 00				X			574,056	0	179,022
JOHN GRIECO FOOD & BEVERAGE DIRECTOR	40 00					X		196,460	0	29,122
ROBERT BAGLI EXECUTIVE CHEF	40 00					X		205,186	0	11,938

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JENNIFER ZEPPIERI COMPTROLLER	40 00					X		180,814	0	52,949
ZAHIR AHMED BANQUET MANAGER	40 00					X		161,117	0	37,998
DAMIEN MUDGE SQUASH PROFESSIONAL	40 00					X		171,134	0	29,889

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
THE UNIVERSITY CLUB

Employer identification number
13-1429480

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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 an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 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)? Yes No

9 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 ► \$ _____

2 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 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,408,303	2,216,544	2,001,403	2,184,158	2,106,112
b Contributions	727,938	708,796	686,207	698,667	705,512
c Net investment earnings, gains, and losses	52,919	217,892	274,992	-181,920	126,345
d Grants or scholarships					
e Other expenditures for facilities and programs	817,609	734,929	745,988	699,502	753,811
f Administrative expenses					
g End of year balance	2,371,551	2,408,303	2,216,614	2,001,403	2,184,158

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶ 13 640 %
 - c** Temporarily restricted endowment ▶ 86 360 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		805,000		805,000
b Buildings		57,314,974	30,427,750	26,887,224
c Leasehold improvements				
d Equipment		18,417,477	13,646,332	4,771,145
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				32,463,369

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
TAXES PAYABLE	278,468
UNEARNED INCOME	843,415
DEFERRED LIFE MEMBERSHIP	870,216
DEFERRED LIFE MEMBERSHIP FEES	285,000
DEFERRED COMPENSATION PLAN	261,247
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,538,346

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	36,785,679
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	112,998
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	3,440,815
e	Add lines 2a through 2d	2e	3,553,813
3	Subtract line 2e from line 1	3	33,231,866
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	17,259
b	Other (Describe in Part XIII)	4b	389,923
c	Add lines 4a and 4b	4c	407,182
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	33,639,048

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	38,278,091
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	4,073,342
e	Add lines 2a through 2d	2e	4,073,342
3	Subtract line 2e from line 1	3	34,204,749
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	17,259
b	Other (Describe in Part XIII)	4b	365,018
c	Add lines 4a and 4b	4c	382,277
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	34,587,026

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 13-1429480

Name: THE UNIVERSITY CLUB

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 3,434,688 PARTNERSHIP INCOME 6,127

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	DEFERRED COMP INTEREST 11,314 GROSS UP OF INVESTMENT INCOME 378,609

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 3,434,688 PENSION ADJUSTMENT 638,654

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	PARTNERSHIP DEDUCTION 1,337 GROSS UP MOMA EXPENSES 363,681

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization THE UNIVERSITY CLUB

Employer identification number 13-1429480

Part I General Information on Grants and Assistance

- 1 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 criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II 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 recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Row 1: ONE WEST 54TH STREET FOUNDATION, 31-1662093, 501 (C) (3), 250,000, SUPPORT.

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

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

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE UNIVERSITY CLUB

Employer identification number
13-1429480

Part I Questions Regarding Compensation

	Yes	No
1a 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		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in 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	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
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		
<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input type="checkbox"/> 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		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
Only 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		
a The organization?	5a	
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III	5b	
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	
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III	6b	
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	
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	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JOHN P DORMAN GENERAL MANAGER	(i)	574,056	0	0	138,396	40,626	753,078	0
	(ii)	0	0	0	0	0	0	0
2 JOHN GRIECO FOOD & BEVERAGE DIRECTOR	(i)	196,460	0	0	18,196	10,926	225,582	0
	(ii)	0	0	0	0	0	0	0
3 ROBERT BAGLI EXECUTIVE CHEF	(i)	205,186	0	0	8,207	3,731	217,124	0
	(ii)	0	0	0	0	0	0	0
4 JENNIFER ZEPPIERI COMPTROLLER	(i)	180,814	0	0	20,551	32,398	233,763	0
	(ii)	0	0	0	0	0	0	0
5 ZAHIR AHMED BANQUET MANAGER	(i)	161,117	0	0	6,445	31,553	199,115	0
	(ii)	0	0	0	0	0	0	0
6 DAMIEN MUDGE SQUASH PROFESSIONAL	(i)	171,134	0	0	16,165	13,724	201,023	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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.

Return Reference	Explanation
PART I, LINE 4B	THE GENERAL MANAGER IS A PARTICIPANT IN THE NON-QUALIFIED DEFERRED COMP PLAN



Schedule J (Form 990) 2018

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2018

Open to Public Inspection

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.

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

Department of the Treasury

Name of the organization
THE UNIVERSITY CLUB

Employer identification number

13-1429480

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART III, LINE 1	PROMOTION OF LITERATURE & ART, BY ESTABLISHING & MAINTAINING A LIBRARY READING-ROOM, & GALLERY OF ART THE CLUB ALSO PROVIDES A CLUBHOUSE & ATHLETIC FACILITIES FOR THE USE AND ENJOYMENT OF ITS MEMBERSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PART VI, SECTION A, LINE 4</p>	<p>ARTICLE II (OFFICERS), SECTION 1 THE CLUB IS SUBJECT TO THE PROVISIONS AND REQUIREMENTS OF THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW ["N-PCL"] N-PCL 714(A) PROVIDES IN PERTINENT PART THAT ABSENT A CONTRARY PROVISION IN THE CLUB'S CONSTITUTION, ANY OFFICER ELECTED OR APPOINTED BY THE COUNCIL MAY BE REMOVED BY THE COUNCIL, WITH CAUSE OR WITHOUT CAUSE. THUS, SINCE THERE IS CURRENTLY NO PROVISION IN THE CONSTITUTION TO THE CONTRARY, AT PRESENT OFFICERS CAN BE REMOVED FROM OFFICE BY THE COUNCIL FOR ANY REASON OR NO REASON AT ALL. THE PROPOSED REVISION REFLECTS THAT THE COUNCIL WOULD REQUIRE CAUSE BEFORE REMOVING AN OFFICER. THE THREE-FIFTH SUPERMAJORITY VOTE PROVIDED FOR REMOVAL FOR CAUSE IS THE SAME AS REQUIRED TO EXPEL A MEMBER FROM THE CLUB. SEE CONSTITUTION ARTICLE XIV. ARTICLE III, SECTION 10 THE CONSTITUTION PROVIDES THAT THE COUNCIL HAS THE POWER TO DETERMINE IF A COUNCIL MEMBER WHO FAILS TO ATTEND TWO CONSECUTIVE MEETINGS SHOULD BE REMOVED. THERE IS A CONCERN THAT THIS PROVISION MAY CONFLICT WITH N-PCL 706(C) GIVEN THAT THE COUNCIL IS COMPRISED OF MEMBERS ELECTED BY TWO DISTINCT CONSTITUENCIES: (I) TWENTY (20) MEMBERS ELECTED DIRECTLY BY THE CLUB MEMBERSHIP, AND (II) SIXTEEN (16) MEMBERS (OFFICERS AND STANDING COMMITTEE CHAIRS) ELECTED BY THE COUNCIL. THE CONCERN IS THAT N-PCL 706(C) MAY PRECLUDE COUNCIL AS A WHOLE FROM REMOVING ONE OF THE TWENTY MEMBER-ELECTED MEMBERS OF COUNCIL BECAUSE THEY WERE ELECTED BY A DIFFERENT CONSTITUENCY (I.E. MEMBERS). THIS PROPOSED AMENDMENT OBVIATES THOSE CONCERNS. UNDER THE PROPOSED LANGUAGE, A MEMBER WHO MISSES TWO CONSECUTIVE MEETINGS IS DEEMED TO HAVE OFFERED TO RESIGN, BUT COUNCIL CAN ACCEPT THAT OFFER OR NOT, OR SIMPLY IGNORE IT, AS IT DEEMS APPROPRIATE. ARTICLE XIV (SUSPENSION OR EXPULSION), SECTION 1 AT PRESENT, THE CONSTITUTION PROVIDES THE COUNCIL WITH ONLY TWO REMEDIES, TOTAL SUSPENSION OR EXPULSION FROM THE CLUB. CIRCUMSTANCES HAVE ARISEN IN THE PAST WHERE SOME LESSER OR MORE FINE-TUNED MEASURE MIGHT HAVE BEEN MORE APPROPRIATE BUT WAS SIMPLY NOT AVAILABLE. [THIS AMENDMENT WOULD, IN LIEU OF FULL SUSPENSION OR EXPULSION, PERMIT THE COUNCIL TO SUSPEND ONLY SOME OF THE MEMBER'S CLUB PRIVILEGES, FOR EXAMPLE, USE OF THE FITNESS CENTER, ACCESS TO THE TAP ROOM, OR OTHER PRIVILEGE. HOWEVER, THERE WOULD BE NO REDUCTION IN DUES OR ASSESSMENTS DURING SUCH PARTIAL SUSPENSION UNLESS THE COUNCIL DETERMINED OTHERWISE.] ARTICLE XIV, (NEW) SECTION 2 IT HAS BEEN THE LONGSTANDING AND PREFERRED PRACTICE FOR MEMBER ISSUES, COMPARTMENT AND OTHERWISE, TO BE HANDLED INFORMALLY WHEREBY THE MEMBER ENTERS INTO A VOLUNTARY AGREEMENT WORKED OUT WITH THE PRESIDENT, CHAIR OF THE HOUSE COMMITTEE AND THE GENERAL MANAGER, REDUCED TO WRITING AND SIGNED. THIS REMAINS THE PREFERRED METHOD OF RESOLVING MOST ISSUES, AND IT IS RECOMMENDED THAT THIS PROCEDURE BE PROVIDED FOR IN THE CONSTITUTION. ARTICLE XIV, (NEW) SECTION 3 UNDER THE PROPOSED ARTICLE XI, SECTION 7, AFTER A MEMBER HAS BEEN IN ARREARS FOR OVER THREE MONTHS, THE TREASUR</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	<p>ER WILL BE IN CONTACT WITH THE MEMBER TO MAKE A LAST EFFORT TO HAVE THE MEMBER'S ACCOUNT BROUGHT CURRENT IF IT IS NOT CURRENT AFTER THE FOURTH MONTH, THE TREASURER IS TO SEEK THE MEMBER'S EXPULSION FROM THE CLUB "ABSENT EXCEPTIONAL CIRCUMSTANCES AS DETERMINED BY THE TREASURER " SEE ARTICLE XI, PROPOSED SECTION 7 AN "EXCEPTIONAL CIRCUMSTANCE" WOULD EXIST IF , FOR EXAMPLE, THE MEMBER ENTERED INTO A WRITTEN PAYMENT SCHEDULE WHEREBY THE MEMBER REMAINS SUSPENDED FROM USAGE OF THE CLUB WHILE DUES AND ASSESSMENTS CONTINUED, AND UPON PAYMENT OF ALL AMOUNTS OWED, THE MEMBER WOULD BE REINSTATED AND COULD RESUME FULL USE OF THE CLUB HOWEVER, FAILURE TO ABIDE BY THE REPAYMENT AGREEMENT WOULD IMMEDIATELY RESULT IN THE MEMBER'S INVOLUNTARY RESIGNATION FROM THE CLUB A SECOND TYPE OF AGREEMENT WOULD REQUIRE THE MEMBER'S IMMEDIATE RESIGNATION FROM THE CLUB WITH AN AGREED PAYMENT SCHEDULE WHICH, IF COMPLIED WITH, WOULD DEEM THE MEMBER'S RESIGNATION TO HAVE BEEN "IN GOOD STANDING" FOR PURPOSES OF THE ABBREVIATED READMISSION PROCEDURES IN ARTICLE XI, (RENUMBERED) SECTION 4 THIS PROVIDES AN INCENTIVE FOR THE DELINQUENT MEMBER TO MEET THE PAYMENT OBLIGATIONS AND AVOID HAVING THE MEMBER'S ACCOUNT BEING TURNED OVER FOR COLLECTION ARTICLE XVII (AMENDMENT 5) N-PCL 602(C) SPECIFIES IN PERTINENT PART "UNLESS OTHERWISE PROVIDED IN THE [CHARTER] OR THE [CONSTITUTION] ADOPTED BY THE MEMBERS, ANY [CONSTITUTION] ADOPTED BY THE MEMBERS MAY BE AMENDED OR REPEALED BY THE [COUNCIL] " SINCE THE CONSTITUTION DOES NOT "OTHERWISE PROVIDE" THAT THE CONSTITUTION CAN ONLY BE AMENDED OR REPEALED BY THE MEMBERSHIP, AND IT IS CERTAINLY THE EXPECTATION OF THE MEMBERSHIP THAT THE CONSTITUTION SHOULD ONLY BE SUBJECT TO AMENDMENT BY THE MEMBERSHIP, IT IS CONSIDERED APPROPRIATE TO SO PROVIDE IN THE CONSTITUTION</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE UNIVERSITY CLUB WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS VOTE FOR THE PARTICIPANTS OF THE MEMBERS NOMINATING COMMITTEE WHO IN TURN ELECT THE EXECUTIVE AND COUNCIL MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	CHANGES MADE TO THE CONSTITUTION BY THE GOVERNING BODY MUST BE APPROVED BY THE MEMBERSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS REVIEWED BY THE TREASURER PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE AUDIT COMMITTEE OVERSEES THE DISTRIBUTION AND COLLECTION OF THE CONFLICT OF INTEREST POLICY STATEMENTS IF ANY CONFLICTS ARISE IT IS REVIEWED AND REPORTED TO THE COUNCIL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR OFFICERS AND KEY EMPLOYEES ARE REVIEWED BY THE CLUB'S PRESIDENT AND HOUSE COMMITTEE CHAIRMAN FOR APPROVAL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE CLUB DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PENSION ADJUSTMENT -638,654 DEFERRED COMP INTEREST INCOME -11,314 NET PARTNERSHIP INCOME 7,464