Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2014 calendar year, or tax year beginning JUL 1 2014 and ending JUN 30, 2015 C Name of organization D Employer identification number Check if applicable: Address change URBAN LAND INSTITUTE Name change Doing business as 53-0159845 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 500W 1025 THOMAS JEFFERSON ST. NW (202) 624-7000 termin-ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 87,659,067. Amended return WASHINGTON DC 20007 H(a) Is this a group return Applica-F Name and address of principal officer: PATRICK L. PHILLIPS for subordinates?_____L ∐Yes Lx No pending H(b) Are all subordinates included? Yes SAME AS C ABOVE Tax-exempt status: x 501(c)(3) 501(c) () (insert no.) 527 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► www.uli.org H(c) Group exemption number K Form of organization: x Corporation Trust Association Other > L Year of formation: 1936 M State of legal domicile: IL Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 15 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 210 Total number of volunteers (estimate if necessary) 7137 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 1,763,835. b Net unrelated business taxable income from Form 990 T line 34 -250. Prior Year Current Year Contributions and grants (Part VIII, line 1h) 7.071.950 9,863,831. Revenue Program service revenue (Part VIII, line 2g) 55,113,938 63,320,316. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 225,586 1,157,697. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 74.341.844. 62,411,474 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1 004 850 1,081,182. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 21 347 188 23,496,309. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 37,186,756 42,203,300. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 59 538 794 66,780,791, Revenue less expenses. Subtract line 18 from line 12 2,872,680 7,561,053. Assets or **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 60.723.578 71,648,653. 21 Total liabilities (Part X, line 26) 16,267,759 21,055,245. und Net assets or fund balances. Subtract line 21 from line 20 44 455 819 50 593 408. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. PUBLIC INSPECTION Signature of officer COPY - RETAIN FOR Sign YOUR RECORDS Here PATRICK L. PHILLIPS, CEO Type or print name and title Date Preparer's signature PTIN Check Print/Type preparer's name Paid WILLIAM E. TURCO, CPA P00369217 Preparer Firm's EIN Firm's name RSM US LLP 42-0714325 Use Only Firm's address > 9737 WASHINGTONIAN BLVD., #400 GAITHERSBURG, MD 20878-7340 Phone no. (301) 296-3600

No

Yes

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

		53-0159845	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u>x</u>
1	Briefly describe the organization's mission:		
	TO PROVIDE LEADERSHIP IN THE RESPONSIBLE USE OF LAND AND IN CREATING		
	AND SUSTAINING THRIVING COMMUNITIES WORLDWIDE.		
2	Did the organization undertake any significant program services during the year which were not listed on	_	
	the prior Form 990 or 990-EZ?	L	Yes X No
	If "Yes," describe these new services on Schedule O.	7-	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L	Yes X 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 n	neasured by ex	rpenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total exp	enses, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$	\$	24 406 393.)
	DISTRICT COUNCILS/NATIONAL COUNCILS:	-	
	THE PURPOSE OF THE DISTRICT/NATIONAL COUNCILS PROGRAM IS TO PROVIDE		
	ULI'S PRESENCE AT THE LOCAL LEVEL, THROUGH THE DEVELOPMENT AND		
	PRESENTATION OF PROGRAMS OF WORK THAT ADDRESS LOCAL REAL ESTATE AND		
	URBAN PLANNING ISSUES. THE ACTIVITIES RECORDED HERE REPRESENT THE		
	ACTIVITIES PERFORMED DIRECTLY BY THE DISTRICT/NATIONAL COUNCILS WHICH		
	ARE ACCOUNTED FOR SEPARATELY WITHIN ULL, AS WELL AS, THE COSTS INCURRED		
	BY ULI AT THE NATIONAL LEVEL TO SUPPORT THE DISTRICT/NATIONAL COUNCIL		
	PROGRAM. THE MAJORITY OF THE COSTS AT THE NATIONAL LEVEL ARE FOR		
	PROGRAM SUPPORT AND LOGISTICAL SUPPORT, AS WELL AS, COMMUNITY OUTREACH		
	EFFORTS IN THE AREAS OF REGIONAL COOPERATION, URBAN REVITALIZATION, AND		
41.	EDUCATING HIGH SCHOOL STUDENTS ON LAND USE AND DEVELOPMENT ISSUES.		
4b	(Code:) (Expenses \$	\$	15,814,156.)
	MEETINGS/CONFERENCES:		
	THE MEETING PROGRAM REPRESENTS THE REVENUES AND EXPENSES RELATED TO		
	ULI'S SPRING AND FALL ANNUAL MEETINGS WHILE THE CONFERENCE PROGRAM		
	FOCUSES ON DEVELOPMENT TOPICS OF IMMEDIATE INTEREST, SUCH AS RESORT AND		
	MASTER PLANNED COMMUNITIES, ENTERTAINMENT, AND INTERNATIONAL REAL		
	ESTATE FINANCE AND INVESTMENT.		
		_=	
4c	(Code:) (Expenses \$6,506,169, including grants of \$10,500,) (Revenue	\$	1,737,926.)
	CENTERS-AREAS OF CONTENT FOCUS:		
	THE ULI TERWILLIGER CENTER FOR WORKFORCE HOUSING SUPPORTS DEVELOPMENT		
	OF HOUSING AFFORDABLE TO MODERATE-INCOME WORKERS. ESTABLISHED IN 2007,		
	THE CENTER WILL IDENTIFY AND ELIMINATE BARRIERS TO WORKFORCE HOUSING		
	PRODUCTION BY RAISING AWARENESS OF THE AFFORDABILITY GAP AND ADVOCATING		
	CHANGES IN PUBLIC POLICY.		
	ULI'S EUROPEAN RESEARCH CENTER OVERSEES STRATEGY AND DELIVERY FOR BROAD		
	RANGE OF PROJECTS INCLUDING EMERGING TRENDS EUROPE, LESSEN, AND		
	INFOBURSTS.		

	THE ULI/DANIEL ROSE CENTER FOR PUBLIC LEADERSHIP IN LAND USE WAS		
4d	Other program services (Describe in Schedule O.)		
-	(Expenses \$ 13,075,415, including grants of \$ 865,285.) (Revenue \$ 2	1 361 841 \	
4e	Total program service expenses 55,838,899.	_,,0=1,0	
	55,000,000.		Form 990 (2014)
32002			(2014)

Form 990 (2014) URBAN LAND INSTITUTE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	_	_ X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40		
4.4	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10	X	
11	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	114	-11	
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	<u>, .</u>		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	0.00
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	Х	
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	ITU	Λ	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	

Form 990 (2014) URBAN LAND INSTITUTE Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			110
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			- 65
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
-	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	×	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	002		
	If "Yes," complete Schedule R, Part V, line 2	36		х
		30		A
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI	37		y
37 38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 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</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		Х

Form 990 (2014) URBAN LAND INSTITUTE

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		112211	x
	III. W		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2 a	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 210			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	.		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country: SEE SCHEDULE O See SCHEDULE O			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		1000
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		_X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
оа	any contributions that were not tax deductible as charitable contributions?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0a		^_
b	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- OID		
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?	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		_X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
р 11	SAMMAMAMA S			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A 11a			
a	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand			<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	L
		Form	990	(2014)

URBAN LAND INSTITUTE

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

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 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? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA_CT_DC_GA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. x Own website Another's website x Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: MICHAEL TERSECK, ULI - (202) 624-7000 1025 THOMAS JEFFERSON ST NW NO. 500W WASHINGTON DC

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LYNN THURBER	7,50									
CHAIR		X	L	X	_		_	0.	0,	0.
(2) JOSEPH F AZRACK	2.00	-								
TREASURER		X	-	Х	_		_	0.	0,	0.
(3) ROBERT C LIEBER	2,00									_
SECRETARY		X	H	Х				0	0.	0.
(4) PETER S RUMMELL	2,00							0.	0.	
IMMEDIATE PAST CHAIR (5) RAYMOND CHOW	2,00	Х	H					U.	0,	0.
MEMBER	2.00	X						0.	0.	0.
(6) HAMID R MOGHADAM	2.00	^				m		0.	0.	0.
MEMBER	2.00	x						0.	0.	0.
(7) STEPHEN P NAVARRO	2.00	-				П	П			
MEMBER		x						0.	0.	0.
(8) JEREMEY NEWSUM	2.00		П							
MEMBER		х						0.	0.	0.
(9) ROGER G ORF	2.00									
MEMBER		х						0.	0,	0.
(10) DIANA REID	2.00									
MEMBER		X	_		_			0.	0,	0.
(11) RANDALL K ROWE	2.00									
MEMBER	-	Х	-					0.	0,	0.
(12) OWEN D THOMAS	2.00							1000		
MEMBER		X	H				H	0.	0,	0.
(13) OLIVIER PIANI	2.00							が記		
MEMBER		Х	-					0.	0,	0.
(14) DEBORAH RATNER SALZBERG MEMBER	2.00	x						0.	0.	0.
(15) GEOFFREY L. STACK	2,00		\vdash						0,	0.
ULI FOUNDATION CHAIRMAN	5.50							0.	0.	0.
(16) PATRICK L. PHILLIPS	35,50	Α								
CEO	2.00	x		x				700 526.	0.	14,406.
(17) CHERYL G. CUMMINS	37,50							,		
EXECUTIVE OFFICER	17.7			x				493 535.	0.	21_177.
432007 11-07-14										Form 990 (2014)

Form **990** (2014)

INSTITUTE								53-0159845	Page C
ustees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(B)							(D)	(E)	(F)
Average						one	Reportable	Reportable	Estimated
	box	, unle	ss pe	rson	is bot	h an	' '	compensation	amount of
		Ler al	lu a u	Tecto	Inus	166)			other
, ,	irecto						l		compensation from the
	eord	tee			sated		"	(VV-2/1099-WIISC)	organization
organizations	truste	al trus		99/	шрег		(** 27 1000 141100)		and related
below	qnal	ution	-	m plo	sst co	ᡖ			organizations
line)	Indivi	Institu	Office	Key er	Highe emplo	Form			Ü
37,50									
	_		X				402,173.	0.	16,160
37,50	ε								
			Х	_			111,862.	0.	6,376
37,50	,								
			Х	_			325,567.	0.	21,028
37,50									
				X			356,961.	0.	15,631
37,50									
				Х			289,822.	0.	27,650
37.50									
				X			285,637.	0.	18,888
37.50									
				X	Ш		262,085.	0.	14,209
37,50									
		_		х			249,121.	0.	24,965
37,50									
		_		х			215,911.	0.	12,060,
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,						3,693,200.	0.	192,550
VII, Section A					****		1,412,194.	0.	98,871
							5,105,394.	0.	291,421.
	ustees, Key Em (B) Average hours per week (list any hours for related organizations below line) 37,50 37,50 37,50 37,50 37,50 37,50 47,50 37,50 47,50 47,50 47,50 47,50 47,50 47,50 47,50 47,50 47,50 47,50 47,50	Average hours per week (list any hours for related organizations below line) 37,50 37,	Ustees, Key Employees (B) Average hours per week (list any hours for related organizations below line) 37,50 37,50 37,50 37,50 37,50 37,50 37,50 37,50 37,50	Section A Sect	Ustees, Key Employees, and Hi (B) Average hours per week (list any hours for related organizations below line) 37,50 37,50 37,50 37,50 37,50 X 37,50 X 37,50 X X X X X X X X X X X X X	ustees, Key Employees, and Higher (B) Average hours per week (list any hours for related organizations below line) 37,50 37,50 37,50 37,50 37,50 37,50 37,50 37,50 X 37,50	Average hours per week (list any hours for related organizations below line) 37,50 37,50 37,50 37,50 37,50 37,50 X 37,50	Section A Sect	Section A Sect

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

Yes No

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

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

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

5 x

Section B. Independent Contractors

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
FREEMAN AUDIO VISUAL SOLUTIONS		
PO BOX 650519, DALLAS, TX 75265-0519	MEETING AUDIOVISUAL CONSULTING	944,639.
RELIANCE TELESERVICE		
1510 RITCHIE HWY, STE 204, ARNOLD, MD 21012	CUSTOMER SERVICE	927,636.
THE BASTIAN GROUP, 90 MADISON STREET,		
SUITE 103, DENVER, CO 80206	MEETING LOGISTICS CONSULTING	819,595.
MCCARTHY, MCSHERRY & ASSOCIATES, 1700 WEST	MEETING, EVENT & MANAGEMENT	
IRVING PARK ROAD, SUITE 208, CHICAGO, IL	SERVICES	422,802.
QUAD GRAPHICS		
PO BOX 842858, BOSTON, MA 02284-2858	PRINTING SERVICE	363,631.
2 Total number of independent contractors (including but not limited to those	e listed above) who received more than	
\$100,000 of compensation from the organization > 32		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2014)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and (A) (B) (C)				2)			(D)	(E)	(F)	
Name and title	Average Position							Reportable	Reportable	Estimated
	hours	(cl	(check all that apply)				ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	irecto				ешь		organization	(W-2/1099-MISC)	from the
	hours for related	b or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	l trus		986	mpen				organizations
	below	individual trustee or director	Institutional trustee	_	Key employee	Highest compensated employee	is is			Organizations
	line)	Indivi	Institu	Officer	Key e	Highe	Former			
(27) STEPHANIE WASSER	37.50									
SVP, COUNCILS					х			191,588.	0.	14,908
(28) LORI G. HATCHER	37.50									
SVP MEMBERSHIP/MARKETING					Х			188,104.	0.	22,461
(29) MAUREEN L. MCAVEY	37.50									
SENIOR FELLOW						х		217,114.	0.	16,596
(30) FELIX CIAMPA	37.50									
DISTRICT COUNCIL EXECUTIVE DIRECTOR						х		212,443.	0.	11,267
(31) THOMAS MURPHY	37.50								l l	
SENIOR RESIDENT FELLOW						х		208,053,	0.	11,874
(32) DEBRA L. THROCKMORTON	37.50									
SVP, FINANCE						х		202,582,	0.	15,025
(33) GEORGE W. PRIOR	37.50									
SVP, IT		_			_	х		192,310.	0.	6,740
		_			_					
						_				
							_			
	-									
	-	_	-		_	_				
		_			_				1	
					_					
		_	_		_	_	-			
		_								
		_				-				
	 									
			-	_		-	-			
otal to Part VII, Section A, line 1c								1,412,194,		98,871

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under Unrelated Total revenue Related or exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 10 d Related organizations 1d 9,484,572 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 379, 259 g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 9 863 831 Business Code Program Service Revenue 900099 24,406,393 24.406.393 2 a DISTRICT COUNCILS b MEETINGS & CONFERENCES 900099 15,814,156 15,814,156 13,920,927 13,920,927 c MEMBERSHIP DUES 900099 2.798.364 1,034,529 d PUB./URBAN LAND MAG. 541800 1,763,835 900099 1,879,650 1,879,650 e ADVISORY SERVICES f All other program service revenue 900099 4 500 826 4,500,826 q Total. Add lines 2a-2f 63 320 316 Investment income (including dividends, interest, and other similar amounts) 416,852 416,852. Income from investment of tax-exempt bond proceeds 4 Royalties 5 6 a Gross rents b Less: rental expenses Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities assets other than inventory 14,058,068 b Less: cost or other basis and sales expenses 13,317,223 c Gain or (loss) d Net gain or (loss) 740.845 740,845. 8 a Gross income from fundraising events (not Other Revenue including \$ __ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses _____ b c Net income or (loss) from gaming activities ... 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 74 341 844. 61,556,481. 1,763,835 1,157,697. 432009 11-07-14 Form 990 (2014)

Section 501(c)(3) and 501(c)(4) amenizations must complete all columns. All other proprietions must complete column (A)

D:	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	982,841.	982,841.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	98,341.	98,341.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	3,753,734.	1,612,852.	1,997,495.	143,387
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	15,935,859.	12,977,226,	2,473,957.	484,676
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	787,638.	581,512.	180,739.	25,387
9	Other employee benefits	1,766,243.	1,304,014.	405,300.	56,929
10	Payroll taxes	1,252,835.	924,966.	287,488.	40,381
11	Fees for services (non-employees):				
а	Management				
b	Legal	190,078.	1,405.	188,673.	
С	Accounting	236,458.	73,856,	162,602.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	37,470.	37,470.		
g	Other. (If line 11g amount exceeds 10% of line 25,				1888 NOS
	column (A) amount, list line 11g expenses on Sch O.)	11,730,110.	10,458,915.	993,367.	277,828
12	Advertising and promotion	148,279.	107,287.	40,080.	912
13	Office expenses	1,984,600.	1,745,916.	190,559.	48,125
14	Information technology	1,223,975.		1,223,975.	
15	Royalties			101.050	WW DOWN
16	Occupancy	1,651,562.	1,178,002.	404,868.	68,692
17	Travel	3,011,094.	2,500,542.	450,476.	60,076
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	99,392.	99,392.	042 545	20.000
19	Conferences, conventions, and meetings	12,187,988.	11,876,373.	213,516.	98,099
20	Interest Payments to offiliates				
21	Payments to affiliates	807.000.	E46 205	000 001	2277080
22		-	546,397.	222,801. 197,046.	37,802
23	Other expenses. Itemize expenses not covered	244,628.	47,582.	197,046.	
24	above. (List miscellaneous 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 0.)				
а	DISTRICT COUNCIL DUES S	3,777,352.	3,793,044.	-15,692,	
b	DISTRICT COUNCIL ADMINI	2 698 654.	2,698,654.		
c	CREDIT CARD FEES	806 069.	805.549.	520.	
d	MEMBER RECOGNITION	591,008.	579.348.	7,614.	4,046
	A II	777.583.	807.415.	-39,312.	9,480
25	Total functional expenses. Add lines 1 through 24e	66,780,791.	55,838,899.	9.586.072.	1,355,820
26	Joint costs. Complete this line only if the organization	,	, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,1,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

rt X	Balance Sheet					
	Check if Schedule O contains a response or not	e to any lir	ne in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			400.	1	400,
2				9,614,520.	2	14,337,550.
3	Pledges and grants receivable, net			8 4	3	
4				1,478,102,	4	1,299,421,
5						
	trustees, key employees, and highest compensation	ated emplo	yees. Complete			
	Part II of Schedule L				5	
6	Loans and other receivables from other disquali	fied persor	ns (as defined under			
	section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of sect	ion 501(c)	(9) voluntary			
	employees' beneficiary organizations (see instr).	Complete	Part II of Sch L		6	
7	Notes and loans receivable, net				7	
8				213,217,	8	246,888,
9				1,147,181.	9	1,341,263,
10a						
		10a	11.010.281.			
b			9,090,780.	1,243,033.	10c	1,919,501.
11				3,471,953.	11	10,555,618,
12			800,864,	12	5,035,604,	
13			13			
14				=	14	
15				42,754,308.	15	36,912,408
16				16	71,648,653,	
17	Accounts payable and accrued expenses		2000	5,466,752.	17	6,903,056,
18				18		
19				10.361.962.	19	14,028,976,
20					20	
21					21	
22			CCC944 E2			
	key employees, highest compensated employee	s, and dis	qualified persons.			
					22	
23					23	
24			COLOMBIA STATE		24	
25						
		-				
				439 045.	25	123,213,
26				16 267 759.	26	21,055,245,
27				17,279,711.	27	19,684,673.
						30,908,735,
29					29	
		•				
30					30	
31	Paid-in or capital surplus, or land, building, or ed				31	
II - '		**************************************				
32	Retained earnings, endowment, accumulated in		32			
32 33	Retained earnings, endowment, accumulated in Total net assets or fund balances		227393400	44.455.819.	32	50,593,408.
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 29 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	Check if Schedule O contains a response or not Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and fo trustees, key employees, and highest compense Part II of Schedule L Loans and other receivables from other disqualit section 4958(f)(1)), persons described in section employers and sponsoring organizations of sect employees' beneficiary organizations (see instr). Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 1 Investments - program-related. See Part IV, line 1 Intagnible assets Other assets. See Part IV, line 11 Total assets, Add lines 1 through 15 (must equipment) Rorants payable and accrued expenses Farakempt bond liabilities Escrow or custodial account liability. Complete Responses, highest compensated employees, highest compensated employees, complete Part II of Schedule L Secured mortgages and notes payable to unrelated. Unsecured notes and loans payable to unrelated. Other liabilities (including federal income tax, paparties, and other liabilities not included on lines Schedule D Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 and Unrestricted net assets Permanently restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (A and complete lines 30 through 34. Capital stock or trust principal, or current funds	Check if Schedule O contains a response or note to any lir Cash · non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and former office trustees, key employees, and highest compensated employer at II of Schedule L Loans and other receivables from other disqualified person section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c) employees' beneficiary organizations (see instr). Complete Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments · publicly traded securities Investments · other securities. See Part IV, line 11 Intagnible assets Other assets. See Part IV, line 11 Intagnible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) Total assets. Add lines 1 through 15 (must equal line 34) Taccounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule L Secured mortgages and notes payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and loans payable to unrelated third part of the received onces and	Check if Schedule O contains a response or note to any line in this Part X 1	Check if Schedule C contains a response or note to any line in this Part X Beginning of year	Check if Schedule C contains a response or note to any line in this Part X Cash - non-interest-bearing 400, 1

Form 990 (2014)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2011

Open to Public Inspection

Name of the organization Employer identification number URBAN LAND INSTITUTE 53-0159845 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (ii) EIN listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10			V		<u> </u>	
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	•			•	, , , ,	
200	organization, check this box and storection C. Computation of Publ	here	rcentage	*****************		***************************************	
				a a l. 1909 (6)			
	Public support percentage for 2014 (I					15	<u>%</u>
	Public support percentage from 2013 33 1/3% support test - 2014. If the control of the control o						
108	stop here. The organization qualifies						
h	33 1/3% support test - 2013. If the c						
	and stop here. The organization qual	-					
170	10% -facts-and-circumstances tes						
17 d	and if the organization meets the "fac	•					
	meets the "facts-and-circumstances"			·			
h	10% -facts-and-circumstances tes						
N	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization						
		**************************************	www.communities.com/	erconomonantempe in Tribotic and Na			0 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 URBAN LAND INSTITUTE Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						· · · · · · · · · · · · · · · · · · ·
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	21,071,906.	15 384 567.	18,062,894.	20,000,411.	23 784 758.	98,304,536.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	28,872,908,	36,411,348.	37,001,834.	40,490,225.	47,635,554.	190,411,869.
3	Gross receipts from activities that are not an unrelated trade or business under section 513			-			
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	49,944,814.	51,795,915.	55,064,728.	60,490,636.	71,420,312.	288,716,405.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons				N N		0.
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
(Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6.)						288,716,405.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	49,944,814. 126,749.	51,795,915. 99,687.	55,064,728. 122,305.	60,490,636. 86,107.	71,420,312. 416,852.	288,716,405. 851,700.
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	126,749,	99,687.	122,305.	86,107.	416,852.	851,700.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		51,895,602.	55,187,033.	60,576,743.		
14	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
_							
	ction C. Computation of Publ						
	Public support percentage for 2014 (15	99.71 %
16	Public support percentage from 2013 ction D. Computation of Invest					16	99.76 %
				o 12 column /fl)		17	20 04
17						18	.29 %
	Investment income percentage from 2 a 33 1/3% support tests - 2014. If the					L	
	more than 33 1/3%, check this box a 33 1/3% support tests - 2013. If the	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	▶ x
Ľ	line 18 is not more than 33 1/3%, che	_					
20	Private foundation. If the organization		100000				

Part IV Supporting Organizations

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

Section	A. All	Supporting	Organizations
---------	--------	------------	---------------

sec	tion A. All Supporting Organizations			_
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
_	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	-	
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	_		
_	organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
р	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
_	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	_		
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		-
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations; or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
_	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent	_		
_	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	_		
0-	If "Yes," complete Part I of Schedule L (Form 990).	8		
9а	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
D	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
0-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
υa	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
1.	organizations)? If "Yes," answer (b) below.	10a		
D	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	401		
	determine whether the organization had excess business holdings.)	10b		

Pa	rt IV Supporting Organizations (continued)			
30			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_ c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	8		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	11		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see Instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see institute)	ructions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	l l		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Ty	pe III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	izations	
1 Che	ck here if the organization satisfied the Integral Part Test as a qualifyin	g trust on l	Nov. 20, 1970. See instr u	uctions. All
othe	er Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Section A - Adj	usted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-	term capital gain	1		W.32(11.5) 3.332(1
2 Recoverie	s of prior-year distributions	2		
3 Other gros	ss income (see instructions)	3		
4 Add lines	1 through 3	4		
5 Depreciati	on and depletion	5		
6 Portion of	operating expenses paid or incurred for production or			
	of gross income or for management, conservation, or			
maintenar	nce of property held for production of income (see instructions)	6		
E- 8000	enses (see instructions)	7		
	Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	imum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate	fair market value of all non-exempt-use assets (see			
instruction	ns for short tax year or assets held for part of year):			
	nonthly value of securities	1a		
b Average n	nonthly cash balances	1b		
- Thing was	et value of other non-exempt-use assets	1c	The second second	
d Total (add	l lines 1a, 1b, and 1c)	1d		
e Discount	claimed for blockage or other			
factors (e)	plain in detail in Part VI):			
2 Acquisitio	n indebtedness applicable to non-exempt-use assets	2		
	ine 2 from line 1d	3		
4 Cash deer	ned held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instru	ctions).	4		
5 Net value	of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply lin	ne 5 by .035	6		
	s of prior-year distributions	7		
8 Minimum	Asset Amount (add line 7 to line 6)	8		
Section C - Dis	tributable Amount			Current Year
1 Adjusted i	net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85%		2		4
3 Minimum	asset amount for prior year (from Section B, line 8, Column A)	3		
	ter of line 2 or line 3	4		
	x imposed in prior year	5		
	ible Amount. Subtract line 5 from line 4, unless subject to			
	y temporary reduction (see instructions)	6	2	
	ck here if the current year is the organization's first as a non-functional		ed Type III supporting org	anization (see
	ructions).		J. 11 J-19	,

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014

and 4b from line 1 (if amount greater than zero, see

Excess distributions carryover to 2015. Add lines 3j

instructions).

Breakdown of line 7:

d Excess from 2013 e Excess from 2014

and 4c.

8 a b

ichedule A	(Form 990 or 990-EZ) 2014 URBAN LAND INSTITUTE	53-0159845	Page
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line	17a or 17b; and Part III, line	e 12.
	Also complete this part for any additional information. (See instructions).	, , , , , , , , , , , , , , , , , , , ,	
	Also complete this part for any additional information. (See instructions).		
	0		
	4		

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

UDDAN	LAND THEMTOURS	E2 01E004E					
Organization type (check one):	URBAN LAND INSTITUTE 53-0159845 rganization type (check one):						
Filers of: Se	ection:						
Form 990 or 990-EZ	501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	overed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.					
x For an organization fili	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling e contributor. Complete Parts I and II. See instructions for determining a contributor'	,					
Special Rules							
sections 509(a)(1) and any one contributor, d	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support I 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, luring the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour e 1. Complete Parts I and II.	or 16b, and that received from					
year, total contribution	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
year, contributions exc is checked, enter here purpose. Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a clusively for religious, charitable, etc., purposes, but no such contributions totaled me the total contributions that were received during the year for an exclusively religious plete any of the parts unless the General Rule applies to this organization because it tc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., t received <i>nonexclusively</i>					
out it must answer "No" on Par	is not covered by the General Rule and/or the Special Rules does not file Schedule E rt IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	,					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

URBAN	LAND	INSTITUTE

URBAN LA	AND INSTITUTE	53	-0159845
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$9,484,572.	Person x Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$379 <u>,259</u> .	Person x Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3,1		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>-</u> :		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

URBAN LAND INSTITUTE

53-0159845

Part II	Noncash Property	(see instructions)	. Use duplicate copies	s of Part II if additiona	space is needed
---------	------------------	--------------------	------------------------	---------------------------	-----------------

		rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u></u> 34		\$	1 1 2
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	15 <u></u>
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organ	nization		Employer identification number				
TO DANY TANY) THOMTOHOU		53-0159845				
Part III	Exclusively religious, charitable, etc., contribute vear from any one contributor. Complete or	butions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additiona	, charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info, once.)				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
-							
		(e) Transfer of gift	t				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-							
-							
(a) No.	r						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
		***	12				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to tran						
	- 1 - 100 1 -						
-							
(a) No. from	(b) Purpose of gift (c) Use of g		(d) Description of how gift is held				
Part I							
	<u>.</u>	£					
-		<u> </u>					
		(e) Transfer of gif	t				
		Panas s					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Fulpose of gift	(c) Ose of gift	(d) Description of now girt is need				
_		2-					
		ig.					
	(e) Transfer of gift						
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-		4					

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Internal Revenue Service

Inspection

vaiii	URBAN LAND INSTITUTE		53-0159845
Pai		Similar Funds or	
	organization answered "Yes" to Form 990, Part IV, line 6.		The second complete in the
	(a) Donor advis	sed 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 f	funds
•	are the organization's property, subject to the organization's exclusive legal control		
6	Did the organization inform all grantees, donors, and donor advisors in writing that		
•	for charitable purposes and not for the benefit of the donor or donor advisor, or for		
	impermissible private benefit?		
Pai	rt II Conservation Easements. Complete if the organization answered "Y		
1	Purpose(s) of conservation easements held by the organization (check all that apply		
			ally important land area
		eservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation contr	ibution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements	***************************************	2a
b			
C	Number of conservation easements on a certified historic structure included in (a)	***************************************	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not	on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extinguished, or	r terminated by the org	ganization 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, inspe	ction, handling of	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservations		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation		/
8	Does each conservation easement reported on line 2(d) above satisfy the requirement		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easements in its re-	· · · · · · · · · · · · · · · · · · ·	
	include, if applicable, the text of the footnote to the organization's financial statement	nts that describes the	organization's accounting for
Da	conservation easements.	wasauwaa ay Otha	w Ciucilau Accata
Pai	rt III Organizations Maintaining Collections of Art, Historical T	reasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.		l and balance also be a feet of all
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in		
	historical treasures, or other similar assets held for public exhibition, education, or r	esearch in turtnerance	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		
	treasures, or other similar assets held for public exhibition, education, or research in	n turtnerance of public	service, provide the following amounts
	relating to these items:		•
	(i) Revenue included in Form 990, Part VIII, line 1		
0	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or other similar	_	in, provide
_	the following amounts required to be reported under SFAS 116 (ASC 958) relating to		•
	Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X	***********	• \$
D	MODELO IIIUIUUUU III FUIIII JJU, FAIL A		D D

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

	dule D (Form 990) 2014 URBAN LAND THII Organizations Maintaining C		t Historical Tr	easures or Oth		53-01598 ar Asset		Page 2
3	Using the organization's acquisition, accession							
Ū	(check all that apply):	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o, oo a, o	Tono ting that are a				
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	e						
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	n how they further t	he organization's ex	empt purp	ose in Part	XIII	
5	During the year, did the organization solicit or							
	to be sold to raise funds rather than to be ma						Yes	□ No
Pai	t IV Escrow and Custodial Arrang							
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for contribution	is or other assets n	ot included			
	on Form 990, Part X?					.wm.	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a							
							Amount	
С	Beginning balance		***********		1c			
ď	Additions during the year							
e	Distributions during the year							
f	Ending balance	*******************	***************************************		1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or co	ustodial account lia	bility?		Yes	No No
b	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete if	the organization an	swered "Yes" to Fo	rm 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	35,931,193.	33,866,436.	32,899,541	. 32,	814,722.	27,	994,045.
b	Contributions	34,368,055.	25,440,881,	21,978,119	20,4	458,072.	21,	758,675.
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	29,017,123.	23,376,124.	21,011,224	. 20,	373,253.	16,	937,998.
f	Administrative expenses							
g	End of year balance	41,282,125.	35,931,193.		. 32,	899,541,	32,	814,722.
2	Provide the estimated percentage of the curr		e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment	25.13	_%					
b	Permanent endowment	%						
С	Temporarily restricted endowment ▶		_					
	The percentages in lines 2a, 2b, and 2c shou		•					
За	Are there endowment funds not in the posses	ssion of the organiza	ation that are held a	nd administered for	the organi	zation	г	
	by:						,	Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations			*******************				X
b	If "Yes" to 3a(ii), are the related organizations						3b	Х
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm		D 189 F 44 0	E 666 D 11				
	Complete if the organization answered							
	Description of property	(a) Cost or o			Accumulat		(d) Book	value
**		basis (investn	nent) Dasis	(other) d	epreciation	-		
	Land	56) ()			_			
	Buildings							
	Leasehold improvements			862,163.	2,474			387,667.
	Equipment			1,108,872.	1,880			228,068.
	Other			039 246.	4,735	480.		303 766.
Total	. Add lines 1a through 1e. (Column (d) must ed	quai rorm 990, Part	ʌ, coiumn (ㅂ), line 1	UC.)			1	919,501.

Schedule D (Form 990) 2014

Part VII Investments - Other Securities.			33 3133313
Complete if the organization answered "Yes" t	o Form 990, Part IV, line	11b. See Form 990, Part X, I	ine 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	662,102.	END-OF-YEAR MARKET	VALUE
(3) Other	-		
(A) REAL ESTATE	326,465.	END-OF-YEAR MARKET	VALUE
(B) 382,517,662-PIMCO TOTAL RETURN FD			
(C) INSTL	4,047,037.	END-OF-YEAR MARKET	VALUE
(D)			
(E)			
(F)			
(G)			
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	F 025 C04		
Part VIII Investments - Program Related.	5,035,604.		
Complete if the organization answered "Yes" t	o Form 990 Part IV line	11c See Form 990 Part X II	ine 13
(a) Description of investment	(b) Book value		: Cost or end-of-year market value
(1)			i
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	- F	(4.1.0E	· de
Complete if the organization answered "Yes" to	escription	11d. See Form 990, Part X, I	(b) Book value
TWOM CONTROL C	comption		
(1) ACCRUED INTEREST RECEIVABLE (2) BENEFICIAL INTEREST IN ULI FOUNDATION			23,909
(3) DUE FROM ULI FOUNDATION			30,870,378 6,018,121
(4)			0,010,121
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		36,912,408
Part X Other Liabilities.			
Complete if the organization answered "Yes" to			art X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT		123,213.	
(3)	-		
(5)			
(6)			
(7)			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	123 213.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII x

Schedule D (Form 990) 2014

Part	XI Reconciliation of Revenue per Audited Financial State Complete if the organization answered "Yes" to Form 990, Part IV, line 1		Revenue per F	teturn.	
1	Total revenue, gains, and other support per audited financial statements			1	73,228,814.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				, , , , , , , , , , , , , , , , , , , ,
	Net unrealized gains (losses) on investments	2a	-1,102,249,		
	Donated services and use of facilities		26,689.	7 1	
	Recoveries of prior year grants				
	Other (Describe in Part XIII.)]	
	Add lines 2a through 2d			2e	-1.075.560.
	Subtract line 2e from line 1			3	74,304,374.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	37 470.		
	Other (Describe in Part XIII.)	THE COURSE IN CONTRACT OF THE COURSE OF THE	598.		
	Add lines 4a and 4b			4c	37,470
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	74 341 844
	XII Reconciliation of Expenses per Audited Financial Stat				
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1				
1	Total expenses and losses per audited financial statements			1	67,091,225,
	Amounts included on line 1 but not on Form 990, Part IX, line 25:				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Donated services and use of facilities	2a	26,689.		
	Prior year adjustments		20,000	1	
	Other losses			1	
	Other (Describe in Part XIII.)		321 215.	1	
	Add lines 2a through 2d		- Individual of the little of	2e	347,904.
	Subtract line 2e from line 1			3	66,743,321,
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				00,745,521,
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	37.470		
	Other (Describe in Part XIII.)	027400091	37,470.	1	
				10	27 470
	Add lines 4a and 4b Fotal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			4c 5	37,470. 66,780,791.
	XIII Supplemental Information.				00,700,751,
lines 2	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any V, LINE 4:				
BOARI	DESIGNATED NET ASSETS ARE ASSETS HELD BY THE LOCAL DISTRI	CT/NATIONAL			
COUNC	IL AND PRODUCT COUNCIL PROGRAMS AND ARE USED TO SUPPORT TH	EIR			
PROGR	AMS.				
TEMPO	RARILY RESTRICTED NET ASSETS WHICH ARE PURPOSE RESTRICTED.	REPRESENT			
ASSET	S HELD BY ULIF THAT ARE AVAILABLE FOR ULI PROGRAMS.				
-					
PART	X, LINE 2:				
ULI A	ND ULIF ARE GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UND	ER THE			
PROVI	SIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, I	N ADDITION,			
ULI A 432054 10-01-14	ND ULIF QUALIFY FOR CHARITABLE CONTRIBUTION DEDUCTIONS AN	D HAVE BEEN		Schedule	D (Form 990) 2014

Schedule D (Form 990) 2014 URBAN LAND INSTITUTE	53-0159845	Page 5
Part XIII Supplemental Information (continued)		
CLASSIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS, INCOME WHICH		
CHASSIFIED AS ORGANIZATIONS THAT ARE NOT INIVALE POWDATIONS, INCOME WHICH		
IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT		
TO FEDERAL AND STATE CORPORATE INCOME TAXES, NEITHER ULI NOR ULIF HAD		
UNRELATED BUSINESS INCOME TAX FOR THE YEARS ENDED JUNE 30, 2015 AND 2014.		
ULI AND ULIF ARE NOT AWARE OF ANY UNCERTAIN TAX POSITIONS AND THEREFORE,		
NO TAX LIABILITIES HAVE BEEN RECORDED AT JUNE 30, 2015 AND 2014.		
GENERALLY, ULI AND ULIF ARE NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS		
BY THE U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES BEFORE 2012.		
PART XII LINE 2D - OTHER ADJUSTMENTS:		
UNREALIZED LOSS ON FOREIGN CURRENCY TRANSLATION 321,215.		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

URBAN LAND INSTITUTE				53-0159845	
	rmation on A	ctivities Out	tside the United States. Compl		es" on
Form 990, Part IV	/, line 14b.				
-	-		ds to substantiate the amount of its gr		
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance?	Yes No
2 For grantmakers. Desc United States.	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and other assistance outs	side the
3 Activities per Region. (Ti	ne following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA AND THE				SEE PART V FOR DESCRIPTION OF	2 222 224
PACIFIC	3	4	PROGRAM SERVICES	ACTIVITIES IN THE REGION	2,922,934.
EUROPE (INCLUDING				SEE PART V FOR DESCRIPTION OF	
ICELAND & GREENLAND)	2	14	PROGRAM SERVICES	ACTIVITIES IN THE REGION	5,624,079.
		1			
3 a Sub-total	5	18			8,547,013.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	5	18			8 547 013.
COLUMN COMP.		10			J.J41,V13.

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

Schedule F (Form 990) 2014

Page 2

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

URBAN LAND INSTITUTE

Schedule F (Form 990) 2014

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2014
(h) Description of non-cash assistance						Schedi
(g) Amount of non-cash assistance					kempt by	
(f) Manner of cash disbursement				=	recognized as tax-ex	
(e) Amount of cash grant				_	foreign country,	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	
(c) Region					is listed above that are r I has provided a section r entities	
(b) IRS code section and EIN (if applicable)					recipient organization ne grantee or counse other organizations o	
1 (a) Name of organization		à			 2 Enter total number of recipient organizations listed a the IRS, or for which the grantee or counsel has pro 3 Enter total number of other organizations or entities 	l

53-0159845

URBAN LAND INSTITUTE

Schedule F (Form 990) 2014

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

Part III can be duplicated if additional space is needed.

(g) Description of valuation of valuation of valuation (book, FMV, appraisal, other)					
(f) Amount of non-cash non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of (d) Amount of recipients cash grant					
ussistance (b) Region					
(a) Type of grant or assistance					

Contedi	SIGN (FORM SOS) 2014 ORDAN BAND INSTITUTE	33-0133043	1 000
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the		
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	x No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	x No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	x No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	x No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	x No

Schedule F (Form 990) 2014

Part V Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
Continuos in temporal respondential and applicable in the part to provide any additional information.
SCHEDULE F, PART I, LINE 3(E), DESCRIPTIONS OF ACTIVITIES IN ASIA:
THIS REGION COVERS MANY OF THE SAME PROGRAM AREAS AS EUROPE. THE
FOLLOWING THEREFORE IS A JUST A LISTING OF THE PROGRAM HIGHLIGHTS AS IT
RELATES TO EACH OF THOSE AREAS:
- AS OF JUNE 30, 2015 ASIA MEMBERSHIP TOTALED 1,847.
- IT HAS ACTIVE NATIONAL COUNCILS IN FOUR COUNTRIES.
- IT HELD 1 CONFERENCE IN TOKYO JAPAN, AND 1STUDY TOUR AND THREE
PROFESSIONAL DEVELOPMENT WORKSHOPS.
- IT PUBLISHED AN EMERGING TRENDS IN REAL ESTATE ASIA PACIFIC, WHICH
PROVIDES AN OUTLOOK ON ASIA PACIFIC REAL ESTATE INVESTMENT AND
DEVELOPMENT TRENDS, REAL ESTATE FINANCE AND CAPITAL MARKETS, TRENDS BY
PROPERTY SECTOR AND METROPOLITAN AREA, AND OTHER REAL ESTATE ISSUES
PERTINENT TO THE COUNTRIES IN ASIA.
- AREA OF CONTENT FOCUS IN SUSTAINABILITY AND CAPITAL MARKETS.
,
SCHEDULE F, PART I, LINE 3(E), DESCRIPTIONS OF ACTIVITIES IN EUROPE:
MEMBERSHIP-GROW MEMBERSHIP WHILE MAINTAINING EXISTING MEMBERS,
PROVIDING THEM WITH THE ULI EXPERIENCE WHICH IS AN OPEN EXCHANGE OF
IDEAS, NETWORKING OPPORTUNITIES, AND THE ABILITY TO WORK WITH THE
LEADERS OF THE LAND USE INDUSTRY: DEVELOPERS, BUILDERS, ENGINEERS,
ATTORNEYS, PLANNERS, INVESTORS, FINANCIAL ADVISORS, ACADEMICS,
ARCHITECTS AND PUBLIC OFFICIALS, MEMBERS HAVE ACCESS TO OBJECTIVE
INFORMATION AND THE EXPERIENCE OF THOSE ACTIVE IN EVERY DISCIPLINE OF
REAL ESTATE DEVELOPMENT, INVESTMENT, AND REGULATION. AS OF JUNE 30,
2015, ULI HAD 2,302 MEMBERS IN EUROPE.

NATIONAL COUNCILS-THE PURPOSE OF THE NATIONAL COUNCILS PROGRAM IS TO

Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
(estimated number of recipients), as applicable. Also complete this part to provide any additional information.
PROVIDE ULI'S PRESENCE AT THE LOCAL LEVEL THRU THE DEVELOPMENT AND
PRESENTATION OF PROGRAMS OF WORK THAT ADDRESS LOCAL REAL ESTATE AND
URBAN PLANNING ISSUES. THE ACTIVITIES RECORDED HERE REPRESENT THE
ACTIVITIES PERFORMED DIRECTLY BY THE DISTRICT COUNCILS, ULI HAS 16
NATIONAL COUNCILS IN EUROPE EITHER IN DEVELOPMENT OR GROWING.
PRODUCT COUNCILS-ULI COUNCILS PROVIDE A FORUM FOR INFORMATION EXCHANGE
ON THE STATE-OF-THE-ART OF A VARIETY OF DEVELOPMENT SECTORS. FULL
MEMBERS ARE ELIGIBLE TO SERVE ON THESE COUNCILS.
MEETINGS/CONFERENCES-THIS PROGRAM FOCUSES ON DEVELOPMENT TOPICS OF
IMMEDIATE INTEREST INCLUDING THE ANNUAL CONFERENCE IN PARIS WHICH
COVERS INTERNATIONAL REAL ESTATE FINANCE AND INVESTMENT, AN ANNUAL
LEADERSHIP RETREAT, AND ONE TOPICAL/TRENDS CONFERENCES.
PUBLISHING-PRODUCES AN ANNUAL EMERGING TRENDS IN REAL ESTATE EUROPE
REPORT, THIS REPORT IS PUBLISHED BY THE URBAN LAND INSTITUTE (ULI)
AND PRICEWATERHOUSECOOPERS IS BASED ON SURVEYS AND INTERVIEWS WITH
APPROXIMATELY 600 INDUSTRY EXPERTS, WHICH COVERS 27 MARKETS IN
COUNTRIES THROUGHOUT EUROPE, THE REPORT CONTAINS PREDICTIONS FOR
INDIVIDUAL PROPERTY SECTORS AS WELL AS MARKETS, ALONG WITH INSIGHTS
REGARDING REAL ESTATE CAPITAL MARKETS AND THE ECONOMY IN GENERAL.
ADVISORY SERVICES-ULI PROVIDES TECHNICAL EXPERTISE OF ITS MEMBERS TO
CITIES, PRIVATE DEVELOPERS, AND OTHER ORGANIZATIONS THAT NEED OBJECTIVE
ANALYSIS AND ADVICE ON HOW TO SOLVE DIFFICULT LAND USE, DEVELOPMENT,
AND DEDEUGLODWING DOOD ENG. DUDORS GONDHOMED MUREE ADVITORY GERVIOR

51318721

Schedule F (Form 990) 2014 URBAN LAND INSTITUTE	53-0159845	Page 5
Part V Supplemental Information		*
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account		
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting meth		
(estimated number of recipients), as applicable. Also complete this part to provide any additional infor	mation.	
PANELS IN SOUTH AFRICA AND ONE IN FRANKFURT GERMANY.		
		-
DEVELOPMENT-THIS DEPARTMENT HAS THE RESPONSIBILITY OF RAISING THE		
SPONSORSHIP FUNDS FOR ALL EUROPE'S CONFERENCES/PROGRAMS.		
AREA OF CONTENT FOCUS:		
- ULI'S EUROPEAN RESEARCH CENTER OVERSEES STRATEGY AND DELIVERY FOR		
BROAD RANGE OF TOPICS.		
BROND MANDE OF TOLLOW.		
·		
Xi		
a		
:		

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

► Attach to Form 990.

2014	Open to Publi	Inspection

Public

OMB No. 1545-0047

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

Name of the organization							Employer identification number
TREAT General Information on Grants and Assistance	TITUTE nd Assistance						53-0159845
Ses	o substantiate th		or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion
criteria used to award the grants or assistance? 🔤	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	cedures for moni	toring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Com recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Domestic Organ 85,000. Part II car	izations and Domestic	c Governments. C	omplete if the orga	nization answered "\	Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any sid if additional space is needed.	IV, line 21, for any
1 (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 non-cash assistance	(h) Purpose of grant or assistance
ULI FOUNDATION 1025 THOMAS JEFFERSON ST NW STE 50 WASHINGTON, DC 20007	23-7133957	501(C)(3)	946,341.	*0			GENERAL SUPPORT
WOODALL RODGERS PARK FOUNDATION 1909 WOODALL RODGERS FREEWAY, SUIT DALLAS, TX 75201	87-0741150	501(C)(3)	10,000.	0.0			2014 WINNER URBAN OPEN SPACE AWARD
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government o	rganizations listed in th	e line 1 table	***************************************	***************************************		3.

က

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2014)

7		:			53-0159845 Page 2
Grants and Other Assistance to Domestic Individuals. Complete Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	if the organization answered "Yes" to Form 990, Part IV, line 22.	0, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
AWARDS FOR HINES STUDENT DESIGN COMPETITION	20	75,000.	0		
ULI APGAR AWARD 2015		250,	*0		
ULI WLI FALL MEETING SCHOLARSHIPS	7	10,500,	0		
ULI NORTHWEST PHOTO ESSAY	m	850	Ö		
	, L		c		
URBAN PLAN-MULTIPLE DISTRICT COUNCILS Part IV Supplemental Information. Provide the information required in Part II, line 2, Part III, column (b), and any other additional information.	uired in Part I, line	e 2, Part III, column	(b), and any other ad	ditional information.	
1					
MOST OF THE FUNDING PROVIDED TO INDIVIDUALS AND ORGANIZATIONS ARE AWARDS	ANIZATIONS AR	R AWARDS	4 -	1	
FOR PARTICIPATION IN ULL'S AWARD PROGRAMS (MOST NOTABLY	THE	JC NICHOLS			
PRIZE FOR VISIONARIES IN URBAN DEVELOPMENT AND THE GERALD D	-	HINES STUDENT			
URBAN DESIGN COMPETITION), THE ONE PROGRAM, COMMUN	COMMUNITY ACTION GRANTS	VANTS, IS A			
GRANT PROGRAM. DOCUMENTATION REGARDING COMMUNITY ACTION GRANT PROGRAM	ACTION GRANT	PROGRAM			
PROVIDED WITH 2008 FORM FILING, NO CHANGES TO PROGRAM	RAM, HOWEVER,	THE AWARD			
FOR THE JC NICHOLS PRIZE WAS NOT PAID OUT IN FY15.					

Schedule I (Form 990) (2014)

39

432102 10-15-14

Schedule I (Form 990) URBAN LAND INSTITUTE Part III. Part III. Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)	duals in the Unite	ed States (Schedule	I (Form 990), Part II	7	53-0159845 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ULI CINCINNATI BOLD INFILL COMPRITTION	8	8000	C		10
ULI COLUMBUS HINES COMPETITION SCHOLARSHIP	15.	3 500	0		
ULI NORTHWEST CENTER FOR LEADERSHIP	23.	. 673	0		
ULI NORTH TEXAS IMPACT AWARDS	H	2002	0		
*					Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

URBAN LAND INSTITUTE

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

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

Employer identification number 53-0159845

Pá	art 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 in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	x Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
	n e			
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.			
	x Compensation committee Written employment contract			
	x Independent compensation consultant x Compensation survey or study			
	Form 990 of other organizations x Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
_	not described in lines 5 and 6? If "Yes," describe in Part III	7	Х	-
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			V24
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2014

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benetits	(a)-(n)(a)	ın column (B) reported as deferred in prior Form 990
(1) PATRICK L. PHILLIPS	Ξ	585,398.	101,238.	13,890.	14,406,	0	714,932,	0.
CEO	(0	0	0	.0	0	0	0
(2) CHERYL G. CUMMINS	Ξ	360,525.	50,000,	83,010.	15,606.	5,571.	514,712,	0.
EXECUTIVE OFFICER	⊞	0.	0	0	0.	0	0	0
(3) MICHAEL J. TERSECK	Θ	337,929.	50,000.	14,244.	15,606	555*	418 334	.0
CEO	€	0	0	0	0	0	0	0.
(4) JOHN P. FITZGERALD	Ξ	149,825.	26,142,	149,600.	9,807.	16,722,	352,096,	0.
CHIEF EXECUTIVE ASIA	⊞	0	0	0	0	0.	0	0
(5) KATHLEEN B. CAREY	Ξ	278,585.	28,917.	49, 459	15,606,	25.	372,592.	0
CHIEF CONTENT OFFICER	€	0	0	0.	0	0.	0	0.
(6) MARILEE UTTER	Ξ	257,177.	27,311.	5,334,	15,606,	12,044,	317,472,	0.
EVP. DISTRICT/NATIONAL COUNCILS	Œ	0.	0	0	0.	.0	0	0.
(7) JASON L. RAY	Θ	264 323.	21,263.	51.	4,392,	14,496,	304,525,	0
CHIEF TECHNOLOGY OFFICER	(ii)	0	0	0.	0	0.	0.	0
(8) LELA AGNEW	Ξ	236,823.	24,581.	681.	14,209.	.0	276,294,	.0
EVP, STRATEGIC COMMUNICATIONS	Ξ	0	0	0	0	.0	0.	0.
(9) DAVID HOWARD	Θ	224,311.	24,339.	471.	7,969.	16,996.	274,086.	0.
EVP, DEVELOPMENT	⊞	0	0	.0	.0	0.	0.	.0
(10) MARY BETH CORRIGAN	Θ	199,725.	15,169.	1,017.	11,984.	76.	227,971.	0.
SVP, CONVENINGS	(1)	0	0	0	0	.0	0	0
(11) STEPHANIE WASSER	Ξ	177,539.	11,088.	2,961.	10,550.	4,358,	206,496.	0.
SVP, COUNCILS	⊞	0	0	0	0	.0	0	0
(12) LORI G. HATCHER	Ξ	169,529.	13,313.	5,262.	10,414.	12,047.	210,565.	0.
SVP, MEMBERSHIP/MARKETING	()	0	0	0.	0	0,	0,	0
(13) MAUREEN L. MCAVEY	ε	210,729.	1,000.	5,385,	12,852,	5,744.	235,710.	.0
SENIOR FELLOW	(II)	0	0	.0	0	0	0.	.0
(14) FELIX CIAMPA	Ξ	199,493.	12,320.	630.	7,523.	5,088,	225,054,	.0
DISTRICT COUNCIL EXECUTIVE DIRECTOR	▣	0.	0	0.	.0	.0	0	0.
(15) THOMAS MURPHY	Ξ	197,900.	1,500.	8,653.	11,874,	.0	219,927.	0
SENIOR RESIDENT FELLOW	⊞	ō	0	0.	0	.0	0	0
(16) DEBRA L. THROCKMORTON	Ξ	186,552.	15,013.	1,017.	11,281.	3,744.	217,607.	0
SVP FINANCE	(1)	0.	0	.0	0.	0.	0.	0

Schedule J (Form 990) 2014

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 in Schedule J, report compensation from the organization on row (ii) and from related organizations, described in the instructions, on row (iii). Do not list any individuals that are not listed on Form 990, Part VII.

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(G)-(I)(B)	in column (B) reported as deferred in prior Form 990
1	Ξ	179,080.	12,600.	630.	1,277.	5,463,	199,050.	0
SVP, IT		0	0	0.	0	0	0	0
	Ξ							
	Θ							
	(ii)							
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	E							
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3*	0							
	€							
9.	(ii)							
	€							
	(II)							
	Θ							
	⊞							
	Ξ							
	Œ							
432112				(Sched	Schedule J (Form 990) 2014

Schedule J (Form 990) 2014 URBAN LAND INSTITUTE 53-(53-0159845 Page 3	က
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.	r any additional information.	Ť
PART I, LINE 1A:		T T
HOUSING ALLOWANCE:		
KATHLEEN CAREY - HOUSING ALLOWANCE \$41,977, TAXABLE COMPENSATION		İ
JOHN P. FITZGERALD - FOREIGN HOUSING ALLOWANCE \$74,957, TAXABLE		
COMPENSATION		ř i
JOHN P. FITZGERALD - GROSS UP PAYMENTS \$25,250, TAXABLE COMPENSATION		1 1
PART I. LINE 7:		
ES		1
SHED BY THE INDIVIDUAL'S SUPERVISOR WHICH IS THEN		1 11
AT THE END OF THE FISCAL YEAR. THE SUPER		ĺ
CH IS SIBJECT TO FINAL AF		ľ
EO THE PERFORMANCE CRITERIA IS ESTABLISHED BY THE CHA		Ī
אמ המתעוו.		î
BYALDORIED DI 1115 OLI COMI ENORILON COMILIEDE, IN IND.		1
EEK, OLIF FRESIDENI, CHIEF EAECOIIVE EMEA, AN		1
EXECUTIVE ASIA, THE CRITERIA IS ESTABLISHED BY THE CEO AND EVALUATED BY HIM		ĺ
IN CONJUNCTION WITH THE ULI COMPENSATION COMMITTEE,		ř
		ì
	Schedule J (Form 990) 2014	4

SCHEDULE O

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

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

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

Open to Public Inspection

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

432212 08-27-14

PRODUCTS, DEVELOPMENT PROCESSES, AND INTERNATIONAL ISSUES,

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization URBAN LAND INSTITUTE	Employer identification number 53-0159845
UNITED KINGDOM, HONG KONG, UNITED ARAB EMIRATES, CHINA	
UNITED KINGDOM, HONG KONG, UNITED ANAB EMINATES, CHINA	
	-
FORM 990, PART VI, SECTION A, LINE 6;	
ULI MEMBERS INCLUDE DEVELOPERS, ARCHITECTS, PUBLIC OFFICIALS, PLANNERS,	
REAL ESTATE BROKERS, APPRAISERS, ACCOUNTANTS, ATTORNEYS, ENGINEERS,	2
FINANCIERS, ACADEMICS, AND STUDENTS,	
FORM 990, PART VI, SECTION A, LINE 7A:	
THE TRUSTEES ELECT THE ULI CHAIRMAN, THE ULIF CHAIRMAN, THE ULI BOARD OF	
DIRECTORS, THE ULIF BOARD OF DIRECTORS AND ULI LIFE TRUSTEES. THE BOARD OF	
DIRECTORS APPOINTS/APPROVES COMMENT CONT'D-THE ULI EUROPE CHAIRMAN, THE ULI	
ASIA CHAIRMAN, AND THE ULI OPERATING COMMITTEE MEMBERS. THE FULL MEMBERS	
ELECT THE TRUSTEES (WHO ALSO SERVE AS THE MEMBERS OF ULIF).	
FORM 990, PART VI, SECTION A, LINE 7B:	
THE BOARD OF DIRECTORS IS ULI'S GOVERNING BODY. THE FOLLOWING ARE THINGS	
THEY MUST BRING TO THE TRUSTEES FOR ACTION: THE TRUSTEES HAVE AUTHORITY	
OVER THE ARTICLES OF INCORPORATION; THE BYLAWS (ULI AND ULIF), ADOPTING A	
PLAN OR MERGER OR CONSOLIDATION WITH ANOTHER CORPORATION, AUTHORIZING THE	
VOLUNTARY DISSOLUTION OF THE ORGANIZATION OR REVOKING PROCEEDINGS	
THEREFORE, AUTHORIZING THE SALE, LEASE, EXCHANGE OR MORTGAGE OF ALL OR	
SUBSTANTIALLY ALL OF THE PROPERTY AND ASSETS OF THE ORGANIZATION.	
FORM 990, PART VI, SECTION B, LINE 11:	
PROCESS FOR MAKING THE FINAL 990 AVAILABLE TO THE VOTING MEMBERS OF THE	
GOVERNING BODY PRIOR TO ITS BEING FILED WITH THE IRS	
- AUDITORS WILL REVIEW THE 990 WITH THE AUDIT COMMITTEE	
- THE FINAL 990 WILL BE HOUSED IN A SECURE AREA OF THE ULI WEBSITE.	
432212 08-27-14	Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization URBAN LAND INSTITUTE	Employer identification number 53-0159845
NOTICE OF THE LOCATION OF THE 990 WILL BE EMAILED TO EACH BOARD MEMBER	
AND THEY WILL BE ADVISED THAT THEY HAVE TWO WEEKS IN WHICH TO REVIEW AND	-
PROVIDE ANY COMMENTS TO ULI MANAGEMENT.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ON AN ANNUAL BASIS THE BOARD OF DIRECTORS ARE SENT A COMMUNICATION	
REQUESTING THAT THEY IDENTIFY ANY RELATIONSHIPS DEFINED AS A CONFLICT.	——————————————————————————————————————
RESPONDS ARE SUBMITTED TO THE CFO.	
FORM 990, PART VI, SECTION B, LINE 15:	
ON A REGULAR BASIS ULI RETAINS AN INDEPENDENT, OUTSIDE CONSULTANT TO REVIEW	
THE COMPENSATION FOR ITS EXECUTIVES, AS PART OF THIS PROCESS, THE	
CONSULTANT IDENTIFIES COMPARABLE ORGANIZATIONS AND OBTAINS THE MOST CURRENT	
COMPENSATION DATA AVAILABLE FOR THEM, THEN, THE CONSULTANT PREPARES A	
DETAILED WRITTEN REPORT THAT COMPARES ULI'S CURRENT EXECUTIVE COMPENSATION	
AGAINST SIMILAR POSITIONS IN LIKE ORGANIZATIONS. THE WRITTEN REPORT ALSO	
DESCRIBES THE STUDY METHODOLOGY AND STATES THE CONSULTANT'S OPINION	
REGARDING THE REASONABLENESS OF ULI'S EXECUTIVE COMPENSATION RELATIVE TO	
THE IDENTIFIED MARKET COMPARABLES.	
FORM 990, PART VI, SECTION C, LINE 19:	
URBAN LAND INSTITUTE DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF	<u> </u>
INTEREST POLICY, NOR ITS FINANCIAL STATEMENTS (WHETHER OR NOT AUDITED)	
AVAILABLE TO THE GENERAL PUBLIC AS FEDERAL TAX LAW DOES NOT REQUIRE THAT	
SUCH DOCUMENTS BE MADE PUBLICLY AVAILABLE.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING FEES:	

13250202 703287 5131871_1

Schedule O (Form 990 or 990-EZ) (2014)		Page 2
Name of the organization		Employer identification number
URBAN LAND INSTITUTE		53-0159845
PROGRAM SERVICE EXPENSES	10,458,915.	
MANAGEMENT AND GENERAL EXPENSES	993,367.	
FUNDRAISING EXPENSES	277,828.	
TOTAL EXPENSES	11,730,110.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	11,730,110.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
UNREALIZED LOSS ON FOREIGN CURRENCY TRANSLATION	-321,215.	
	_	
		-
		

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

►Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

2014

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 53-0159845

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

URBAN LAND INSTITUTE

Department of the Treasury Internal Revenue Service Name of the organization

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
ULI SERVICES LIMITED - 98-1123263 SUITE 3418, JARDINE HOUSE, 1 CONNAUGHT PLACE HONG KONG	CONSULTANCY SERVICES	HONG KONG	0	201.004.1	201 004 URBAN LAND INSTITUTE
ULI EXHIBITION & CONSULTING (SHANGHAI) LTD - 98-1183457, ROOM 3663, TOWER II IFC, NO. 8 CENTURY AVENUE, PUDONG NEW DISTRICT,	EXHIBITION MANAGEMENT & CONSULTING	CHINA	160,083.	104,034.	104,034.ULI SERVICES LIMITED

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

(a)	(q)	(၁)	(p)	(e)	(t)	(b)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	Section 512(b)(13) controlled entity?	o)(13)
)		501(c)(3))		Yes	No
ULI FOUNDATION - 23-7133957							
1025 THOMAS JEFFERSON ST NW STE 500	FUNDRAISING IN SUPPORT OF				URBAN LAND		
WASHINGTON, DC 20007	ULI RESEARCH AND EDUCATION	EDUCATION DISTRICT OF COLUMBIA 501(C)(3)	501(C)(3)	LINE 7	INSTITUTE	×	
							ĺ

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

SEE PART VII FOR CONTINUATIONS

432161 08-14-14 LHA

Schedule R (Form 990) 2014

Page 2

53-0159845

Schedule R (Form 990) 2014 URBAN LAND INSTITUTE

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

Primar	Primary activity domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from fax under sections 512-514)	(f) e Share of total income		Share of Disproprent assets Yes	r) ortionate tions? No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing le partner? 5) Yes No	(i) (k) General or Percentage managing ownership partner? Yes No
ns Taxable as a or trust during th	Corl e ta	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	mplete if the organiz	ation answere	d "Yes" on For	m 990, Part IV	/, line 34 b	because it had	one or m	ore relate
	. <u>⊟</u>	(b) Primary activity	(c) Legal domicile Direct c (state or foreign country)	(d) Direct controlling T entity (C	(e) Type of entity (C corp, S corp, or trust)	(t) Share of total income		(g) Share of Fend-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity? Yes No
			55	2			4	Schedu	ule R (For	Schedule R (Form 990) 2014

Page 3

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Υ.	Yes	S
1 During the tax year, did the organization engage in any of the following transaction:	is with one or more re	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	λ			1 a	×	
b Gift, grant, or capital contribution to related organization(s)				1p >	×	Ï
c Gift, grant, or capital contribution from related organization(s)	***************************************	***************************************	200000000000000000000000000000000000000	10 >	×	
d Loans or loan guarantees to or for related organization(s)			100000000000000000000000000000000000000	19	×	
e Loans or loan guarantees by related organization(s)				1e	X	
f Dividends from related organization(s)				+	×	
(9				10	×	
Purchase of assets from related organization(s)				, +	×	
				÷	×	Ι.,
j Lease of facilities, equipment, or other assets to related organization(s)				Ę	×	
k Lease of facilities, equipment, or other assets from related organization(s)				¥	*	
Performance of services or membership or fundraising solicitations for	anization(s)			\vdash	×	
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			_	×	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			- ul	×	
o Sharing of paid employees with related organization(s)	*******************************			10 >	×	1
 P Reimbursement paid to related organization(s) for expenses 				dt	×	
Reimbursement paid by related organization(s) for expenses				19	×	
				11 >	×	
s)				1s	X	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete th	is line, including covered	relationships and transaction thresholds.			1
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	olved		
(1) ULI FOUNDATION	М	946,341.	CASH			Ï
(2) ULI FOUNDATION	υ	5,743,931.	CASH			Ī
(3) ULI FOUNDATION	ĸ	10,000,000.CASH	CASH			
(4)						1
(5)						1
(6)						1
432163 08-14-14	26		Schedule R (Form 990) 2014	Rorm 9	90) 20	4

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

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

inal was not a related organization. See instructions regarding exclusion for certain investment partnerships.	structions regarding exclu	Sion for certain inve	estment partnersnips.						
(a) Name address and FIN	(b) Primary activity	(c)	(d) (e) Are	(f) Share of	(g) Share of	(h) Dispropor-	(i) Code V-HRI	(i)	(k) Derceptage
of entity	riiliai y activity	(state or foreign country)	recommand to the second of the	total income	end-of-year assets	tionate allocations?	to the control of the	managing partner?	ownership
				(
13.41									
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500									
						_			

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014 URBAN LAND INSTITUTE	53-0159845	Page 5
Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R (see instructions).		
PART I, IDENTIFICATION OF DISREGARDED ENTITIES:		
INCLI, IDENTIFICATION OF DISKSONICED ENTITIES.		
NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:		
ULI EXHIBITION & CONSULTING (SHANGHAI) LTD		
EIN: 98-1183457		
ROOM 3663, TOWER II IFC, NO. 8 CENTURY AVENUE		
1001 0000 1 1000		
PUDONG NEW DISTRICT, SHANGHAI, CHINA		
PUDUNG NEW DISTRICT SHANGHAT CHINA		

Form **8868**

(Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	Information about Form 8	808 and its	instructions is at www.irs.gov/forn	18868 -		
 If you are filing for a 	n Automatic 3-Month Extension, comp	lete only Pa	art I and check this box			X
	n Additional (Not Automatic) 3-Month I					
Do not complete Part	l unless you have already been grante	d an automa	atic 3-month extension on a previous	sly filed For	m 8868.	
) . You can electronically file Form 8868					oration
,	, 90-T), or an additional (not automatic) 3-n					
	e forms listed in Part I or Part II with the					
•	acts, which must be sent to the IRS in p					
	and click on e-file for Charities & Nonprof	245	(eee mendenens), i ei mere detaile	011 1110 01001	around mining or and t	01111,
	natic 3-Month Extension of Tin		submit original (no copies ne	eded)		
	to file Form 990-T and requesting an aut			ACCUPATION OF THE PARTY OF THE		
Double only				•		
	including 1120-C filers), partnerships, RE				sion of time	
to file income tax retur	•	iviiOs, and t	rusts must use Form 7004 to reques			E4455217
					's identifying nun	
	kempt organization or other filer, see inst	ructions.		Employer	identification numb	oer (EIN) or
print TIDD AND	TAND INCOMENTAR				E2 01E004	
File by the	LAND INSTITUTE				53-015984	
	treet, and room or suite no. If a P.O. box, I'HOMAS JEFFERSON STRI			Social sec	curity number (SSN	1)
instructions. City, town	or post office, state, and ZIP code. For a NGTON , DC 20007	foreign add	dress, see instructions.			:0
Cotoutha Datuma anda	for the matrix of the state of	file = =====	to application for each return)			0 1
Enter the Return code	for the return that this application is for (ille a separa	tte application for each return)			. [0]-1
Application		Return	Application			Return
ls For		Code	Is For			Code
Form 990 or Form 990	EZ	01	Form 990-T (corporation)			07
Form 990-BL		02	Form 1041-A			08
Form 4720 (individual)	¥;	03	Form 4720 (other than individual)			09
Form 990-PF		04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust othe	than above)	06	Form 8870			12
	MICHAEL TERSE	CK, UL	Ī			
The books are in th	e care of > 1025 THOMAS JI	EFFERS(ON STREET, N. W.,	NO. 50	00 WASH	INGTO
Telephone No. ▶	(202) 624-7000		Fax No.			
	404 024 1000					
		ss in the Ur	nited States, check this box	100-1-1-1		
If the organization of	oes not have an office or place of busine	ss in the Ur t Group Exe	nited States, check this box	If this is for	the whole group, o	heck this
If the organization of If this is for a Group	oes not have an office or place of busine Return, enter the organization's four dig	it Group Exe	emption Number (GEN)	If this is for	the whole group, o	
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