Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A F	or th	e 201	2 calendar year, or tax year begir	nning 0	7/01, 2012	, and endin	g		06/30 , 20	13			
			C Name of organization				1	D Employer iden	tification numb	er			
3 CI	heck if ap	plicable:	UBF CORPORATION					51-01644	154				
	Addre		Doing Business As										
	7	change	Number and street (or P.O. box if mail is	not delivered to street addre	ess)	Room/suite	1	E Telephone nun	nber				
	Initial	return	вох 900					(716) 645-3011					
	Term	Terminated City, town or post office, state, and ZIP code											
		Amended BUFFALO, NY 14226-0900						G Gross receipts	\$ 3	374,	259.		
		cation	F Name and address of principal officer:	EDWARD P. SC	HNEIDER			H(a) Is this a group		Yes	X No		
	_ pendi	ng	BOX 900 BUFFALO, NY 1					affiliates? H(b) Are all affiliates	s included?	Yes	─ _{No}		
1	Tax-ex	empt st		2) ◀ (insert no.)	4947(a)(1)	or 527		` '	a list. (see instruction				
			WWW.UBFOUNDATION.BUFFAL		1017(4)(1)	0. 02.		H(c) Group exemption		,			
				Association Other		I Vear of		n: 1978 M St		icile.	NY		
	rt I		mmary	713300Idiloi1 Otiloi		L rear or	Tomatic	WII. 1970 W O	ate or regar dom	TOILC.			
ı	1		y describe the organization's mission o	r most significant activiti	001								
		•	HOLD TITLE TO, ACQUIRE,	•									
8													
Governance			LDINGS, AND OTHER REAL F										
Ver			Y AT BUFFALO AND UNIVERS										
တိ	2		k this box if the organization d						- 1		0		
න් ග	3		per of voting members of the governing						3		<u>9.</u>		
Ħ.	4		per of independent voting members of t						4		8.		
Activities	5		number of individuals employed in cale						5		0		
Ä	6	Total	number of volunteers (estimate if neces	sary)					6		8.		
			unrelated business revenue from Part V								333.		
	b	Net ur	nrelated business taxable income from	Form 990-T, line 34 .	<u>.</u>			7	'b -	-19,	783.		
								Prior Year	Curre	nt Ye	ar		
<u>a</u>	8	Contri	ibutions and grants (Part VIII, line 1h)						0		0		
enn	9	Progra	am service revenue (Part VIII, line 2g)						0		0		
Revenue	10		tment income (Part VIII, column (A), line						0		0		
_	11		revenue (Part VIII, column (A), lines 5,					293,509). 2	266,	060.		
	12	Total	revenue - add lines 8 through 11 (must	t equal Part VIII, column	(A), line 12) .			293,509).	266,	060.		
	13	Grant	s and similar amounts paid (Part IX, colu	umn (A), lines 1-3)				293,161	2	264,	848.		
	14		fits paid to or for members (Part IX, colu						0		0		
Ś	15		ies, other compensation, employee bene						0		0		
Expenses	16a		ssional fundraising fees (Part IX, column						0		0		
ę,			fundraising expenses (Part IX, column (
Ш			expenses (Part IX, column (A), lines 11					3,968	3.	4,	832.		
	18		expenses. Add lines 13-17 (must equal					297,129			680.		
	19		nue less expenses. Subtract line 18 fron	, , , , , , , , , , , , , , , , , , , ,	/			-3,620	_		620.		
es o							Beginn	ing of Current Yea	ar End o	f Year			
Net Assets or Fund Balances	20	Total :	assets (Part X, line 16)				<u> </u>	2,882,216		341.	770.		
Ass Ba	21		liabilities (Part X, line 26)					387,440			614.		
₹ĕ	22		ssets or fund balances. Subtract line 21					2,494,776			156.		
	rt II		gnature Block	THOM INC 20	<u>.</u>		l						
			of perjury, I declare that I have examined th	is return including accom	panying sched	ules and staten	nents an	d to the best of n	ny knowledge a	nd hel	ief it is		
true	e, corre	ct, and	complete. Declaration of preparer (other than	n officer) is based on all inf	ormation of wh	ich preparer ha	s any kno	wledge.	,				
Sig	n		Signature of officer					l Date					
Hei		'			EVECTI	יידעה הדהו	raman						
			EDWARD P. SCHNEIDER Type or print name and title		EAECU.	TIVE DIR	LCIUR						
			Type or print name and title (Type preparer's name	Preparer's signature		Date			PTIN				
aic	ı	' ''''	1,700 proparor s name	1 Toparoi 3 Signature		Date		Check if		4 - 4 -			
	oarer							self-employed			<u> </u>		
	Only		s name ► KPMG LLP					Firm's EIN 1					
			s address ► 60 SOUTH STREET	•			I	Phone no. 6	17-988-10				
Иav	the I	RS dis	scuss this return with the preparer show	n above? (see instruction	ns)				X Yes	.	No		

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization For calendar year 2012, or fiscal year beginning 0.7/0.1____, 2012, and ending 0.6/3.0____, 20_13_

ı	ОМВ	No.	1545-1	878

Department of the Treasury Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

Name of exempt organization	Employer Identification number
UBF CORPORATION	51-0164454
Name and title of officer	
Part I Type of Return and Return Information (Whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicable a check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you ente on the applicable line below. Do not complete more than 1 line in Part I.	g filed with this form was blank, then
1a Form 990 check here ► X b Total revenue, if any (Form 990, Part VIII, column (A), line 1 2a Form 990-EZ check here ► b Total revenue, if any (Form 990-EZ, line 9) 3a Form 1120-POL check here ► b Total tax (Form 1120-POL, line 22)	2b
4a Form 990-PF check here ▶	
5a Form 8868 check here ▶	
Part II Declaration and Signature Authorization of Officer	
organization's 2012 electronic return and accompanying schedules and statements and to the best are true, correct, and complete. I further declare that the amount in Part I above is the amount show organization's electronic return. I consent to allow my intermediate service provider, transmitter, or to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of r the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of a authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdra financial institution account indicated in the tax preparation software for payment of the organization return, and the financial institution to debit the entry to this account. To revoke a payment, I must consider at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also involved in the processing of the electronic payment of taxes to receive confidential information necessive issues related to the payment. I have selected a personal identification number (PIN) as my electronic return and, if applicable, the organization's consent to electronic funds withdrawal.	wn on the copy of the electronic return originator (ERO) receipt or reason for rejection of any refund. If applicable, I awal (direct debit) entry to the n's federal taxes owed on this ontact the U.S. Treasury Financial so authorize the financial institutions cessary to answer inquiries and
Officer's PIN: check one box only	
	as my signature as my signature nter five numbers, but o not enter all zeros
on the organization's tax year 2012 electronically filed return. If I have indicated within this r being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program ERO to enter my PIN on the return's disclosure consent screen.	
As an officer of the organization, I will enter my PIN as my signature on the organization's to If I have indicated within this return that a copy of the return is being filed with a state agency the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.	
Officer's signature Date Date	5-8-14
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN.	do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2012 electronically file indicated above. I confirm that I am submitting this return in accordance with the requirements of Pulnformation for Authorized IRS e-file Providers for Business Returns.	ed return for the organization
ERO's signature Date	05/04/14
ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To D)o So
For Panerwork Reduction Act Notice see back of form	Form 8879-FO (2012)

JSA 2E1676 1.000

UBF CORPORATION

Form 990 (2012) Page 2 Part III Statement of Program Service Accomplishments Briefly describe the organization's mission: SEE SCHEDULE O 2 Did the organization undertake any significant program services during the year which were not listed on the If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any programl If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ $_{264,848.}$ including grants of \$ $_{264,848.}$) (Revenue \$ OWN AND OPERATE REAL ESTATE FOR THE BENEFIT OF THE UNIVERSITY AT BUFFALO TO SUPPORT ITS EDUCATIONAL PURPOSE. THE ORGANIZATION LEASES PROPERTY TO FOLLETT, WHO OPERATES A BOOK STORE ON THE UNIVERSITY'S AMHERST CAMPUS. THE STORE PROVIDES TEXTBOOKS, SUPPLIES, TECH ACCESSORIES, AND OTHER NECESSARY EDUCATIONAL PRODUCTS TO UNIVERSITY STUDENTS. THE ORGANIZATION ALSO LEASES PROPERTY TO A REAL ESTATE DEVELOPER THAT OPERATES AN ON-CAMPUS RETAIL COMPLEX PROVIDING NECESSARY SERVICES AND PRODUCTS TO UNIVERSITY STUDENTS.) (Revenue \$) (Expenses \$ 4b (Code: including grants of \$) (Revenue \$ **4c** (Code:) (Expenses \$ including grants of \$ 4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ 4e Total program service expenses ▶ 264,848.

JSA 2E1020 2.000 Form **990** (2012) 0322GG 1592 2490701 PAGE 3 Form 990 (2012)
Part IV Checklist of Required Schedules

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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		
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		3.5
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
_	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	9		Х
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
• •	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If</i> "Yes,"			
а	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	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	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			37
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5		Х
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		Х
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	10		
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 (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	11		21
10	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		Х
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part IV **Checklist of Required Schedules** (continued) No Did the organization report more than \$5,000 of grants and other assistance to any government or organization Χ 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States Χ 22 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated Χ 24 a 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 24a Χ **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the vear 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?..... 25 a Section 501(c)(3) and 501(c)(4) 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 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? 25b If "Yes," complete Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Χ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV...... A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) Χ was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Χ 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Χ

Form 990 (2012)

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Form 990 (2012) Page **5**

Par				
	Check if Schedule O contains a response to any question in this Part V			
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in Box 6 of 1 offin 1000. Enter 6 in not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and			
C	reportable gaming (gambling) winnings to prize winners?	1c	Х	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-10		
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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		Х
b	If "Yes," enter the name of the foreign country: ▶			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		77
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	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	50		
oa	organization solicit 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	- Ou		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
	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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the 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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
122	against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	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			
С	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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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 to any question in this Part VI.

Section A. Governing Body and Management				
4				
	1.	<u></u>	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. • • • • • • • • • • • • • • • • • • •		9		
If there are material differences in voting rights among members of the governing body, or if the govern	ing			
body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	41-			
b Enter the number of voting members included in line 1a, above, who are independent		9		
2 Did any officer, director, trustee, or key employee have a family relationship or a busine				v
any other officer, director, trustee, or key employee?				X
3 Did the organization delegate control over management duties customarily performed by				Х
supervision of officers, directors, or trustees, or key employees to a management company of	•			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990				X
5 Did the organization become aware during the year of a significant diversion of the organiza				X
6 Did the organization have members or stockholders?				
7a Did the organization have members, stockholders, or other persons who had the power				Х
one or more members of the governing body?				71
b Are any governance decisions of the organization reserved to (or subject to app	= -			Х
stockholders, or persons other than the governing body?		7.5		21
8 Did the organization contemporaneously document the meetings held or written action	s undertaken during			
the year by the following:		8a	Х	
a The governing body?			X	
b Each committee with authority to act on behalf of the governing body?				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who c the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				X
Section B. Policies (This Section B requests information about policies not required by the			 }.)	
			Yes	No
10a Did the organization have local chapters, branches, or affiliates?		10a		Х
b If "Yes," did the organization have written policies and procedures governing the activities				
affiliates, and branches to ensure their operations are consistent with the organization's exe	•			
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body b			Х	
b Describe in Schedule O the process, if any, used by the organization to review this Form 99				
12a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	Х	
b Were officers, directors, or trustees, and key employees required to disclose annually inte				
	_		1 '	
rise to conflicts?		12b	X	
rise to conflicts?			X	
	the policy? If "Yes,"		X	
c Did the organization regularly and consistently monitor and enforce compliance with	the policy? If "Yes,"	12c		
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	the policy? If "Yes,"	12c	Х	
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done Did the organization have a written whistleblower policy? 	the policy? If "Yes,"	12c	Х	
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberation. 	the policy? If "Yes," ew and approval by eration and decision?	12c 13 14	Х	
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberative organization's CEO, Executive Director, or top management official 	the policy? If "Yes," ew and approval by eration and decision?	12c 13 14	Х	X
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done. 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberation and destruction policy? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 	the policy? If "Yes," ew and approval by eration and decision?	12c 13 14	Х	X
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberation of the organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 	the policy? If "Yes," ew and approval by eration and decision?	12c 13 14	Х	
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberation of the organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 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 	the policy? If "Yes," ew and approval by eration and decision? similar arrangement	12c 13 14 15a 15b	Х	X
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberative organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 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 with a taxable entity during the year? 	the policy? If "Yes," ew and approval by eration and decision? similar arrangement	12c 13 14 15a 15b	Х	
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberal The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 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 with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization 	the policy? If "Yes," ew and approval by eration and decision? similar arrangement ation to evaluate its	12c 13 14 15a 15b	Х	X
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberative organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 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 with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steep the process in t	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the	12c 13 14 15a 15b	Х	X
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberal The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization lf "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 with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take ste organization's exempt status with respect to such arrangements? 	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the	12c 13 14 15a 15b	Х	X
 c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of the deliberation of the organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization lf "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 with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take ste organization's exempt status with respect to such arrangements? Section C. Disclosure 	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the	12c 13 14 15a 15b	Х	X
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the	12c 13 14 15a 15b	X X X	X
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the	12c 13 14 15a 15b	X X X	X
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the	12c 13 14 15a 15b	X X X	X
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the and 990-T (Section in Schedule O)	12c 13 14 15a 15b 16a 16b	X X X	x x
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the and 990-T (Section in Schedule O)	12c 13 14 15a 15b 16a 16b	X X X	x x
c Did the organization regularly and consistently monitor and enforce compliance with describe in Schedule O how this was done	ew and approval by eration and decision? similar arrangement ation to evaluate its eps to safeguard the and 990-T (Section in Schedule O) documents, conflict	12c 13 14 15a 15b 16a 16b	X X X	x x

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

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.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (A) (B) (D) (E) (F) (do not check more than one Name and Title Reportable Reportable Estimated Average amount of box, unless person is both an hours per compensation compensation from other week (list any officer and a director/trustee) from related compensation the organizations hours for Individual to Officer Highest employee Institutional trustee from the organization (W-2/1099-MISC) related employee organization (W-2/1099-MISC) organizations and related below dotted compensated organizations l trustee line) (1) RAVINDAR BANSAL 1.00 4.00 0 DIRECTOR X 0 0 (2) SHELDON BERLOW 1.00 3.00 n Λ Λ DIRECTOR X (3) GARY BICHLER 1.00 4.00 0 Λ DIRECTOR Χ 0 (4) THOMAS BLACK 1.00 4.00 0 0 0 DIRECTOR X (5) BEVERLY FOIT-ALBERT 1.00 0 0 CHAIR/DIRECTOR 4.00 Χ X 0 (6) JUDITH ITTIG 1.00 DIRECTOR 4.00 Χ 0 0 0 1.00 (7) JORDAN LEVY DIRECTOR 3.00 Χ 0 0 0 1.00 (8) JEAN POWERS 3.00 0 0 DIRECTOR X (9) RONALD SCHREIBER 1.00 DIRECTOR 3.00 Χ 0 0 0 (10) EDWARD SCHNEIDER 2.00 EXECUTIVE DIRECTOR 58.00 Х 179,441. 45,231. (11) (12) (13)_____ $(14)_{-}$

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	rt VII Section A. Officers, Directors, Tru	ustees, Ke	y En	ıplo	ye	es,	and F	ligl	hest Compensat	ed Employ	yees (c	ontinue		Page o
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle	Pos heck ss pe	rson	o or trust Highest compensated en is or employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensati relate organiza (W-2/1099	on from d tions	com fr org and	(F) stimated nount of other pensatio om the anizatio d related anizatior	of ion on d
							ă							
1 h	Sub-total							_		179	,441.		45,2	 231
	Total from continuation sheets to Part VII, S							\	C		0			0
	Total (add lines 1b and 1c)							>	(,441.		45,2	231.
2	Total number of individuals (including but not reportable compensation from the organization			liste)	d al	bove	e) who	re	ceived more than	\$100,000	of			
													Yes	No
3	Did the organization list any former offic employee on line 1a? <i>If "Yes," complete Schedi</i>											3		Х
4	For any individual listed on line 1a, is the													
	organization and related organizations greindividual	eater than	\$15	0,0	00?	. If	"Yes					4	X	
5	Did any person listed on line 1a receive or							un	related organizati	on or indivi	idual	4	Λ	
Sa	for services rendered to the organization? If "You be called the contractors of the contr											5		Х
1	Complete this table for your five highest com compensation from the organization. Report c year.													
	(A) Name and business add	dress							(B) Description of se	ervices	С	(C) ompens		
								1						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0

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Part VIII Statement of Revenue

		Check if Schedule O contains a res	ponse to any ques	tion in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns		0			
Program Service Revenue	2a b c d e f	All other program service revenue Total. Add lines 2a-2f		0			
Other Revenue	3 4 5 6a b c	Investment income (including dividends, in other similar amounts). Income from investment of tax-exempt bor Royalties (i) Real Gross rents 374,25 Less: rental expenses 108,19 Rental income or (loss) 266,06	nd proceeds	0 0			
	d 7a b	` ,	s (ii) Other	266,060.		-18,333.	284,393
	b c 9a	Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a b	0			
	b c 10a	See Part IV, line 19 Less: direct expenses Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	⊳	0			
	С	Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue	Business Code	0			
	11a b c d	All other revenue	_				
	e 12	Total. Add lines 11a-11d	▶	266,060.		-18,333.	284,393

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Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	ponse to any question i	n this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	264,848.	264,848.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section				
J	401(k) and 403(b) employer contributions (include section	0			
9		0			
	Other employee benefits	0			
10	Payroll taxes				
11	Fees for services (non-employees):	0			
	Management	833.		833.	
	Legal	3,499.		3,499.	
C C		0		3, 100.	
a	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column	0			
12	(A) amount, list line 11g expenses on Schedule O.)	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	U			
18	Payments of travel or entertainment expenses	0			
40	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	U			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
		F00		F00	
	TAXES AND FEES	500.		500.	
b					
C					
d					
	All other expenses	260 600	264 040	4 020	
2 <u>5</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	269,680.	264,848.	4,832.	
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)				
10.1	10110Willing 301 30-2 (A00 300-120)	0			

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Part X **Balance Sheet**

Part X				
	Check if Schedule O contains a response to any question in this Part			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	35,440.	1	311,313
2	Savings and temporary cash investments	0	2	
3	Pledges and grants receivable, net	0	3	
4	Accounts receivable, net	0	4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	
ets 7		0	7	
Assets 8		0	8	
4 9		0	9	
_	a Land, buildings, and equipment: cost or	<u> </u>	-	
''	other basis. Complete Part VI of Schedule D 10a 42,000.			
	b Less: accumulated depreciation	42,000.	100	42,000
11	Investments - publicly traded securities		11	12,000
12	Investor ante ather association Con Doubly/ line 44	0	12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	2,488,457
16	Total assets. Add lines 1 through 15 (must equal line 34)		16	2,841,770
17	Accounts payable and accrued expenses		17	82,712
18	Grants payable		18	02,7.22
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities 22 22 22 22 22 22 22 22 22 22 22 22 22	Loans and other payables to current and former officers, directors,			
ឨ	trustees, key employees, highest compensated employees, and			
≝	disqualified persons. Complete Part II of Schedule L	0	22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	0	24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	296,204.	25	267,902
26	Total liabilities. Add lines 17 through 25		26	350,614
ß	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
27 28 28	Unrestricted net assets	2,494,776.	27	2,491,156
<u>ğ</u> 28	Temporarily restricted net assets		28	
29	Permanently restricted net assets	0	29	
29 10	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
	Capital stock or trust principal, or current funds		30	
30 31 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
	Retained earnings, endowment, accumulated income, or other funds		32	
돌 33	Total net assets or fund balances		33	2,491,156
34	Total liabilities and net assets/fund balances		34	2,841,770

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	66,0	060.
2	Total expenses (must equal Part IX, column (A), line 25)	2		2	69,6	680.
3	Revenue less expenses. Subtract line 2 from line 1	3			-3,6	620.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,4	94,	776.
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		2,4	91,1	156.
Part						
	Check if Schedule O contains a response to any question in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	хріаіі	n in			
٥-	Schedule O.					37
Za	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were con	ipiled	a or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			2b	Х	
b	Were the organization's financial statements audited by an independent accountant?			20	Λ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted c	on a			
	separate basis, consolidated basis, or both: Separate basis Separate basis Separate basis Both consolidated and separate basis					
	— · — — ·	. Carlot				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	_	2	2c	X	
	of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, experiences of the second selection process during the tax year, experiences or selection process during the tax year, experiences or selection process during the tax year, experiences or selection process during the tax year.					
	Schedule O.	хріаі	11 111			
2.	As a result of a federal award, was the organization required to undergo an audit or audits as se	fort	h in			
Ja	the Single Audit Act and OMB Circular A-133?	LIUIL	11 111	3a		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	erac	the			
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	_	1116	3b		

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SCHEDULE D (Form 990)

Supplemental Financial Statements

2012

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► 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. ► See separate instructions.

Open to Public Inspection

Name of the organization

Employer identification number

UBF	CORPORATION		51-0164454
Par	Organizations Maintaining Donor Adv	vised Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form	990, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets held in	donor advised
	funds are the organization's property, subject to the	•	
6	Did the organization inform all grantees, donors, a	-	
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		Yes No
Par		if the organization answered "Yes" to F	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th		
	Preservation of land for public use (e.g., rec	reation or education) Preservation of	of an historically important land area
	Protection of natural habitat	·	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization I	neld a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen	ts	2b
С	Number of conservation easements on a certified	I 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, tra	nsferred, released, extinguished, or termin	ated by the organization during the
	tax year ▶		
4	Number of states where property subject to cons	ervation easement is located $ ightharpoonup$	
5	Does the organization have a written policy regar	ding the periodic monitoring, inspection, ha	andling of
	violations, and enforcement of the conservation e		
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation eas	sements during the year
	>		
7	Amount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation easeme	nts during the year
	▶ \$		
8	Does each conservation easement reported on li		
	(i) and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text organization's accounting for conservation easem		cial statements that describes the
Par		s of Art, Historical Treasures, or Othe	r Similar Assots
ı aı	Complete if the organization answered		Jillia Assets.
1a	If the organization elected, as permitted under S works of art, historical treasures, or other simi	lar assets held for public exhibition, edu	revenue statement and balance sheet lication, or research in furtherance of
	public service, provide, in Part XIII, the text of the	footnote to its financial statements that des	scribes these items.
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other simi		ication, or research in furtherance of
	public service, provide the following amounts rela (i) Revenues included in Form 990, Part VIII, line		▶ ¢
•	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of		_ ·
_	following amounts required to be reported under Revenues included in Form 990, Part VIII, line 1.	STAS 1 TO (ASC 936) relating to these item	δ. ▶ Φ
a b	Assets included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		· · · · · · · · · · · · · · · · · · ·

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

Schedule D (Form 990) 2012

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UBF CORPORATION

Schedule D (Form 990) 2012

Par	t III Organizations Maintaining (Collections o	f Art, His	storical	Treasu	res,	or Ot	her Similar	r Asse	ets (con	tinue	ed)_
3	Using the organization's acquisition, accollection items (check all that apply):	ccession, and o	other recor	rds, checl	k any c	of the	follow	ving that are	a sigr	nificant us	se of	its
а	Public exhibition		d	Loan	or exch	ange	progra	ms				
b	Scholarly research		е									
С	Preservation for future generation	ıs										
4	Provide a description of the organizati		and expla	ain how t	they fu	rther	the or	ganization's	exemp	t purpose	in I	Part
	XIII.		•		,				·			
5	During the year, did the organization so	licit or receive of	donations o	of art, hist	orical tr	easu	res, or	other similar				
	assets to be sold to raise funds rather th								[Yes		No
Par	t IV Escrow and Custodial Arrai									n 990, F	Part	IV,
	line 9, or reported an amount	on Form 990), Part X, I	ine 21.								
1a	Is the organization an agent, trustee, cuincluded on Form 990, Part X?			-					Γ	Yes		No
b	If "Yes," explain the arrangement in Part	XIII and compl	ete the foll	owing tab	ole:				• • -			
				J				Amo	ount			
С	Beginning balance					1c						
d	Additions during the year					1d						
е	Distributions during the year					1e						
f	Ending balance					1f						
2a	Did the organization include an amount	on Form 990,	Part X, line	21?						Yes	Х	No
b	If "Yes," explain the arrangement in Part	XIII. Check he	re if the ex	planation	has be	en pr	ovided	in Part XIII				
Par	t V Endowment Funds. Complet	te if the orgar	nization ar	swered	"Yes" t	o Fo	rm 99	0, Part IV, lir	ne 10.			
	(a	a) Current year	(b) Prio	or year	(c) Tw	o year	s back	(d) Three year	s back	(e) Four y	ears b	ack
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains,											
	and losses											
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the			e (line 1g,	column	ı (a))	held as	:				
а	Board designated or quasi-endowment	▶	_%									
b	Permanent endowment ▶											
С	Temporarily restricted endowment ▶	%										
	The percentages in lines 2a, 2b, and 2c	should equal 1	00%.									
3a	Are there endowment funds not in the p	ossession of the	he organiza	ation that	are hel	d and	d admir	nistered for the	е	_		
	organization by:									Υ	es	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	ations listed as	required or	Schedule	e R? .					3b		
4	Describe in Part XIII the intended uses of											
Par	t VI Land, Buildings, and Equipm	ent. See Forr	m 990, Pa	rt X, line	10.							
	Description of property		other basis tment)	(b) Cost (or other ba ther)	asis		cumulated reciation	(c	i) Book valu	е	
1a	Land				42,0	00.				4	2,0	00.
b	Buildings											
С	Leasehold improvements											
d	Equipment											
e	Other											
Tota	I. Add lines 1a through 1e. (Column (d) I	must equal Forn	n 990, Part	X, columi	n (B), lir	ne 10	(c).)	▶		4	2,0	00.

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Page 3 Schedule D (Form 990) 2012

Part VII	Investments - Other Securities. See F	orm 990, Part X, Iin	ne 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(<u>H)</u>				
<u>(l)</u>				
	n (b) must equal Form 990, Part X, col. (B) line 12.)	000 D V II	7 - 40	
Part VIII	Investments - Program Related. See F	1		
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X, I	ine 15		
T GITTIM		Description		(b) Book value
(1) REAL	ESTATE DEVELOPMENT COSTS			161,207
(2) RECE	IVABLES FROM AFFILIATE			2,327,250
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Cold	umn (b) must equal Form 990, Part X, col. (B)			2,488,457
Part X	Other Liabilities. See Form 990, Part	K, line 25.		
1.	(a) Description of liability	(b) Book valu	ue	
	ral income taxes			
	BLE TO AFFILIATE	267,	,902.	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	nn (h) must squal Form 000. Part V and (D) line of	267	902	
	nn (b) must equal Form 990, Part X, col. (B) line 25.			auto the over-i
∠. rin 48 (A	ASC 740) Footnote. In Part XIII, provide the text	or the roothote to the o	organization's financial statements that repo	ons the organiza <u>tion'</u> 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. JSA 2E1270 1.000 0322GG 1592

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UBF CORPORATION 51-0164454

Schedule D (Form 990) 2012 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Total revenue, gains, and other support per audited financial statements 374,259. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments 2a **b** Donated services and use of facilities Recoveries of prior year grants Other (Describe in Part XIII.) e Add lines 2a through 2d Subtract line 2e from line 1 3 374,259. Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIII.) -108,199. c Add lines 4a and 4b -108,199. 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 266,060. Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 377,879. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c Other (Describe in Part XIII.) 108,199 e Add lines 2a through 2d 2e 108,199. Subtract line 2e from line 1 269,680. 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 269,680. Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. SEE PAGE 5

Schedule D (Form 990) 2012

JSA 2E1271 1.000

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Schedule D (Form 990) 2012 UBF CORPORATION 51-0164454 Page **5**

Part XIII Supplemental Information (continued)

FIN 48 (ASC FOOTNOTE)

PART X, LINE 2

UBF CORPORATION IS QUALIFIED UNDER SECTION 501(C)(2) OF THE INTERNAL REVENUE CODE, AND IS, THEREFORE, GENERALLY NOT SUBJECT TO TAX ON RELATED INCOME UNDER PRESENT FEDERAL INCOME TAX LAWS. UBF CORP FOLLOWS THE PROVISIONS OF ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHEREBY THEY RECOGNIZE INCOME TAX POSITIONS WHEN IT IS MORE-LIKELY THAN-NOT THAT THE POSITION WILL BE SUSTAINABLE BASED ON THE MERITS OF THE POSTION. MANAGEMENT HAS CONCLUDED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT NEED TO BE RECORDED AT JUNE 30, 2013.

OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN $\ensuremath{\mathrm{F/S}}$

PART XI, LINE 4B

RENTAL EXPENSE.....\$(108,199)

OTHER EXPENSE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

PART XII, LINE 2D

RENTAL EXPENSE.....\$108,199

Schedule D (Form 990) 2012

JSA 2E1226 2.000

0322GG 1592 2490701 PAGE 18

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

Open to Public Inspection

Schedule I (Form 990) (2012)

name	or the organization						Employer identificati	on number
UBF	CORPORATION						51-0164454	:
Part	General Information on Grants and	Assistance						
t	Does the organization maintain records to sul he selection criteria used to award the grants Describe in Part IV the organization's procedu	or assistance	?			• •	· · · · · · · · · · · · · · · · · · ·	X Yes No
Part	Grants and Other Assistance to G Part IV, line 21, for any recipient the	overnments at received	and Organization and St., more than \$5,	ations in the Unit 000. Part II can b	ed States. Come duplicated if a	plete if the organiz dditional space is n	ation answered "Y eeded.	es" to Form 990,
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
_(1) ±	NUB, INC.							UNIVERSITY
	30X 900 BUFFALO, NY 14226	16-1537468	501(C)(3)	264,848.				SUPPORT
(2)								
_(3)								
_(4)								
_(5)								
_(6)								
(7)								
_(8)								
<u>(9)</u>								
(10)								
(11)								
(12)								
2 F	Enter total number of section 501(c)(3) and g	overnment o	⊥ rganizations list	ed in the line 1 tabl	<u> </u> e		<u> </u>	1.
	Enter total number of other organizations liste							

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

UBF CORPORATION 51-0164454

Schedule I (Form 990) (2012)

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	_
	Part III can be duplicated if additional space is needed.	

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PROCEDURES FOR MONITORING USE OF GRANT FUNDS IN U.S.

PART I, LINE 2

UBF CORPORATION'S ASSISTANCE TO ORGANIZATIONS IN THE U.S. CONSISTS OF

SUPPORT TO CHARITABLE ORGANIZATION'S. WHILE THE ORGANIZATION DOES NOT

MONITOR THE USE OF THESE FUNDS, THE ORGANIZATION ONLY CONTRIBUTES TO

OTHER CHARITABLE ORGANIZATIONS WHOSE MISSION AND WORK ARE WELL KNOWN BY

THE ORGANIZATION AND ARE TRUE TO THEIR CHARITABLE PURPOSES.

SCHEDULE J (Form 990)

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UBF CORPORATION

Employer identification number

51-0164454

Part	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 Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
D	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
•	Indicate which if our of the fellowing the filling consciention would be establish the communication of the			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract Independent compensation consultant Compensation survey or study			
	Independent compensation consultant Form 990 of other organizations Compensation survey or study 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			
а	organization or a related organization: Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	and to any or miles has given and provide and approache amounts to easily norm in a art in			
	Only section 501(c)(3) and 501(c)(4) 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:			
а	The organization?	5a		
b	Any related organization?	5b		
	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		
b	Any related organization?	6b		
	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		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
•	in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2012

UBF CORPORATION 51-0164454

Schedule J (Form 990) 2012

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 W-2 and/or 1099-MIS	C 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	(B)(i)-(D)	reported as deferred in prior Form 990
EDWARD SCHNEIDER	(i)	0	((0	0	(0
1 EXECUTIVE DIRECTOR	(ii)	179,441.	()	26,421.	18,810.	224,672.	0
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)			ļ +				
5	(ii)							
	(i)			ļ 				
_ 6	(ii)							
	(i)			ļ 				
7	(ii)							
	(i)			ļ 				
_ 8	(ii)							
	(i)			 				
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)			ļ				
13	(ii)							
	(i)			 				
_14	(ii)							
	(i)			 	 			
15	(ii)							
	(i)		ļ	 	 			
16	(ii)							1.1.1/5 000) 0010

UBF CORPORATION 51-0164454

Schedule J (Form 990) 2012

Part | Supplemental Information

Complete this part to 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.

COMPENSATION

PART I AND PART II

UBF CORPORATION DOES NOT COMPENSATE ANY OFFICERS, DIRECTORS, OR KEY
EMPLOYEES. CERTAIN INDIVIDUALS RECEIVED COMPENSATION FROM A RELATED
ORGANIZATION AND THE PROCESS OF DETERMINING COMPENSATION IS CONDUCTED AT
THE RELATED ORGANIZATION'S LEVEL, USING A COMPENSATION COMMITTEE,
COMPENSATION SURVEY OR STUDY, AND APPROVAL BY THE BOARD OR COMPENSATION
COMMITTEE.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Name of the organization
UBF CORPORATION

Employer identification number 51-0164454

ORGANIZATION MISSION

FORM 990, PART III, LINE 1

THE MISSION OF THE ORGANIZATION IS TO HOLD TITLE TO, ACQUIRE, SELL,
LEASE, AND IMPROVE AND DEVELOP LAND, BUILDINGS, AND OTHER REAL PROPERTY
IMPROVEMENTS FOR THE BENEFIT OF THE STATE UNIVERSITY OF NEW YORK AT
BUFFALO AND THE UNIVERSITY AT BUFFALO FOUNDATION, INC.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

AFTER THE FORM 990 HAS BEEN PREPARED AND COMPLETED INTERNALLY IT IS
REVIEWED BY THE ORGANIZATION'S MANAGEMENT. AN EXTERNAL REVIEW OF THE FORM
990 IS THEN PERFORMED BY THE ORGANIZATION'S OUTSIDE ACCOUNTANTS (KPMG).
THE ORGANIZATION'S BOARD OF DIRECTORS HAS DELEGATED THE REVIEW PROCESS TO
THE AUDIT COMMITTEE OF THE UNIVERSITY AT BUFFALO FOUNDATION, INC., AN
AFFILIATED ENTITY. THE FORM 990 IS DISCUSSED AT A MEETING OF THE AUDIT
COMMITTEE PRIOR TO FILING THE RETURN. UPON COMPLETION OF THEIR REVIEW, IT
IS PROVIDED TO THE FULL BOARD OF DIRECTORS, ALSO PRIOR TO THE FILING OF
THE RETURN WITH THE INTERNAL REVENUE SERVICE.

EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

FORM 990, PART VI, LINE 12C

ALL DIRECTORS AND OFFICERS OF THE ORGANIZATION ARE REQUIRED TO COMPLETE A
WRITTEN CONFLICT OF INTEREST DISCLOSURE STATEMENT ON AN ANNUAL BASIS. ALL
DIRECTORS AND OFFICERS ARE ALSO REQUIRED TO PROVIDE ANY UPDATED

Name of the organization

UBF CORPORATION

51-0164454

INFORMATION ON POTENTIAL CONFLICTS THAT ARISE PRIOR TO THE COMPLETION OF THE DISCLOSURE STATEMENT. ALL DISCLOSURE STATEMENTS ARE REVIEWED BY THE ORGANIZATION'S MANAGEMENT AND LEGAL COUNSEL. ALL SITUATIONS THAT ARE DEEMED TO REPRESENT A CONFLICT AS DESCRIBED IN THE ORGANIZATION'S CONFLICT OF INTEREST POLICY ARE REPORTED TO THE BOARD CHAIR. THE CONFLICTED INDIVIDUAL MUST RECUSE HIMSELF OR HERSELF DURING THE DISCUSSION OF AND VOTING ON AN ACTION THAT INVOLVES THE IDENTIFIED CONFLICT.

OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

FORM 990, PART VI, LINE 19

THE FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. IN ADDITION, THE FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND THE FORM 990 IS AVAILABLE AT WWW.GUIDESTAR.ORG.

0322GG 1592

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Attach to Form 990. See separate instructions.

Inspection

Name of the organization Employer identification number 51-0164454 UBF CORPORATION

	(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
1)						
2)						
3)						
4)						
5)						
6)						

one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of re	lated organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	(g) 512(b)(13) crolled tity?
							Yes	No
(1) UNIVERSITY AT BUFFALO FOUNDATION, I	NC. 16-0865182							
BOX 900	BUFFALO, NY 14226	EDUCATION SVC	NY	501(C)(3)	7	N/A		X
(2) FNUB, INC.	16-1537468							
BOX 900	BUFFALO, NY 14226	EDUCATION SVC	NY	501(C)(3)	11B	N/A		Х
(3) UNIV AT BUFFALO FOUND INCUBATOR, IN	c. 16-1301210							
BOX 900	BUFFALO, NY 14226	EDUCATION SVC	NY	501(C)(3)	11B	N/A		Х
(4) UBF FACULTY - STUDENT HOUSING CORP.	16-1372560							
BOX 900	BUFFALO, NY 14226	EDUCATION SVC	NY	501(C)(3)	11B	N/A		Х
(5) UNIVERSITY AT BUFFALO	14-6013200							
CROFTS HALL	BUFFALO, NY 14226	EDUCATION	NY	501(C)(3)	6	N/A		Х
<u>(6)</u>								

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

Schedule R (Form 990) 2012

JSA

UBF CORPORATION 51-0164454

Schedule R (Form 990) 2012

Part I	Identification of Relate because it had one or r	ed Organizations more related orga	Taxable inizations	as a Partnersh treated as a pa	ip (Complete if the artnership during the	organization a tax year.)	nswered "Yes"	to F	orm	990, Part IV, I	ine 3	34			
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets	end-of- Disproportion		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	UBI Gen box 20 mar ile K-1 par		-		(k) Percentage ownership
			Country)		sections 512-514)			Yes	No		Yes	No			
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percen- tage ownership	(i) Section 512(b)(13 controlled entity?
(1)								Yes No
<u>(1)</u>								
(2)								
(3)								
(4)								
(5)								
<u>(6)</u>								
<u>(7)</u>								

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012

Page 3

ochedule it (i o	311 330/ 2012	
Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)	

No	ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			ſ				
а				ľ	1a		X	
h	Gift, grant, or capital contribution to related organization(s)	See of the first of contribution to related organization (s)						
C	Gift, grant, or capital contribution from related organization(s)			• •	1b 1c	Х	X	
4	Ligans or loan quarantees to or for related organization(s)			• •	1d		X	
u o	Loans or loan guarantees to or for related organization(s)			• •	1e		X	
-	Loans or loan guarantees by related organization(s).		• • •	• •	16			
f	Dividends from related organization(s)				1f		X	
a	Dividends from related organization(s)		• • •	• •			X	
9 h	,		• • •	• •	1g 1h		X	
: :	Purchase of assets from related organization(s)			• •	1ii		X	
!	Exchange of assets with related organization(s)			• •			X	
J	Lease of facilities, equipment, or other assets to related organization(s)			• •	1j		$\overline{}$	
l,	Lagge of facilities, equipment, or other exects from related ergonization(s)				1k		X	
K	Lease of facilities, equipment, or other assets from related organization(s)			• •			X	
1	Performance of services or membership or fundraising solicitations for related organization(s)			• •	11		X	
m				• •	1m	3.7		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X		
0	Sharing of paid employees with related organization(s)			٠.	10	X		
					_			
р	Reimbursement paid to related organization(s) for expenses				1р	Х		
q	Reimbursement paid by related organization(s) for expenses				1q		X	
r	Other transfer of cash or property to related organization(s)				1r		X	
S	Same and the property was a same and a same and a same and a same and a same a				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 transa	action	thres	holds			
	(a) (b) (c) Name of other organization Transaction Amount involved type (a-s)		Me	thod c	(d) of dete	rminir	na	
				amoui			9	
			 					
(4)								
<u>(1)</u>			┼					
رم،								

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes				Yes	No	(FORM 1065)	Yes	No	
<u>(1)</u>													
(2)													
(3)													
<u>(4)</u>													
<u>(5)</u>													
<u>(6)</u>													
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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