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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

			C Name of organization	01-2009 and ending 08-31-2010	0	D Employer i	dentification numb	er	
	iress ch	nange use IRS	STANFORD UNIVERSITY BOAR OF THE LELAND STANFORD JU			94-11563	65		
┌ _{Nar}	ne cha		Doing Business As			E Telephone	number		
┌ Inıt	ıal retu			x if mail is not delivered to street addre	ss) Room/suite	(650) 725	-1732		
┌ Ter	mınate	Instruc- d tions.	3145 PORTER DRIVE	A II Mail is not usin side to subset addition	, resin, saits	G Gross receip	ts \$ 12,855,504,094		
┌ Am	ended	return	City or town, state or country,	and ZIP + 4		-			
┌ App	olication	n pending	PALO ALTO, CA 94304						
		F Na	me and address of principal	officer	H(a) is th	▲ us a group retu	rn for		
			dennessy			ates?	⊤Yes 🔽	No	
		Buildi Stanfo	ord, CA 94305		H(h) Are a	ll affiliates inclu	ıded?		
							t (see instruction		
I Ta	x-exem	npt status 🔽 501(c) (3) 4 (insert no)	a)(1) or 527		up exemption r		,	
J W	ebsit e	∷► WWW STANF	ORD EDU						
			ation Trust Association O	her 🕨	L Year of fo	ormation 1885	M State of legal dom	ncile CA	
Pa		Summary Briefly describe t	he organization's mission or	most significant activities					
	-			ECT GROUP OF AMERICAN UN	IVERSITIES	THAT HAVE	ACHIEVED EMIN	IENCE	
e e		IN BOTH UNDER	RGRADUATE AND GRADUA	TE EDUCATION AND IN A BRO	AD RANGE (DFACADEMIC	DISCIPLINES	O'TNO	
Governance		5011 0							
Ě									
8	_		-						
			•	tinued its operations or disposed				2.	
٠ 4	3			ody (Part VI, line 1a)			3		
Activities &	4	·	-	governing body (Part VI, line 1b))		4 5		
ş	5 6		mployees (Part V , line 2a) olunteers (estimate if neces				5 6	30,310	
٠.				Part VIII, column (C), line 12 .			7a	 378 579	
	1		siness taxable income from F		•		'	34,800	
		Tree ameraca bas	The standard medical months		Drie	or Year	Current Yea		
	8	Contributions ar	nd grants (Part VIII, line 1h)			357,086,693			
₫	9		e revenue (Part VIII, line 2g		593,226,281	1,637,34			
Rayenue	10	-	, , ,	ines 3, 4, and 7d)		785,486,733		71,085	
æ	11			5, 6d, 8c, 9c, 10c, and 11e)		66,346,005		 51,297	
	12		add lines 8 through 11 (mus						
	42					231,172,246	3,194,79		
	13			umn (A), lines 1-3)		296,122,743	323,48	89,818	
	14	•		efits (Part IX, column (A), lines 5				0	
\$	15	10)	ompensation, employee ben	ents (Part IX, Column (A), imes s		995,888,847	2,064,37	73,137	
Expenses	16a	Professional fun	draising fees (Part IX, colum	nn (A), line 11e)		0		0	
ੜੇ	ь	Total fundraising ex	penses (Part IX, column (D), line 2						
	17	Other expenses	(Part IX, column (A), lines 1	.1a-11d, 11f-24f)	1,	102,835,223	1,187,13	38,858	
	18	Total expenses	Add lines 13-17 (must equ	al Part IX, column (A), line 25)	3,	394,846,813	3,575,00	01,813	
_	19	Revenue less ex	penses Subtract line 18 fro	m line 12	-1,	163,674,567	-380,20	3,192	
රීලී					_	g of Current	End of Yea	End of Year	
Net Assets or Fund Balances	20	Total accets (Da	art X, line 16)			Year	24 552 22	20.652	
Ass dB	21		(Part X, line 26)			671,549,045	24,553,32 5,118,39		
25 E	22		nd balances Subtract line 2			039,040,645	19,434,92		
Par	t III	Signature B			10)		25,151,52		
		_		ned this return, including accompanying	schedules and s	statements, and to	the best of my know	wledge	
				of preparer (other than officer) is base					
Sign		<u> </u>			2011	07.11			
Here		Signature of office	cer		Date	-07-11			
		M SUZANNE CAL	ANDRA SENIOR ASSOCIATE VP FOR	R FINANCE					
		Type or print nai		CLEWITCE					
		Preparer's		Date	Check If	Preparer's ider	itifying number		
Paid		signature PRIC	EWATERHOUSECOOPERS LLP	5	self- empolyed 🕨 🦵	(see instructio			
Prepa	arer's	Firm's name (or you	rs L PricewaterhouseCoopers LLF		ampolycu F	+			
Use (ıf self-employed),	P			EIN Þ			
	,	address, and ZIP +	125 High Street			Phone no	(617) 530-5000		
			Boston, MA 02110						
Mayt	he IR	S discuss this ret	urn with the preparer shown	above? (see instructions)			▼ Yes		

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

STANFORD UNIVERSITY IS ONE OF A SELECT GROUP OF AMERICAN UNIVERSITIES THAT HAVE ACHIEVED EMINENCE IN BOTH UNDERGRADUATE AND GRADUATE EDUCATION AND IN A BROAD RANGE OF ACADEMIC DISCIPLINES CONT'D SCH O

2	_	on undertake any signif O or 990-EZ?			which were not listed on	Yes ✓ No
	If "Yes," describe	these new services on	Schedule O			
3	Did the organizations services?	on cease conducting, o	r make sıgnıfıcar • • • •	nt changes in how it coi		Yes ✓ No
	If "Yes," describe	these changes on Sch	edule O			
4	Section 501(c)(3)		ations and section	on 4947(a)(1) trusts a	largest program services by ex re required to report the amoui service reported	•
4a	(Code INSTRUCTION AND D) (Expenses \$ DEPARTMENTAL RESEARCH-	1,104,447,062 See Schedule O	including grants of \$	30,269,034) (Revenue \$	873,178,004)
4b	(Code) (Expenses \$	927,699,608	ıncludıng grants of \$	23,424,351) (Revenue \$	187,504,732)
	ORGANIZED RESEAR	CH - REVENUE AMOUNT REI	PORTED ON LINE 4B	DOES NOT INCLUDE \$955,1	56,765 IN FEDERAL RESEARCH SUPP	ORT CONT'D SCH O
4c	(Code) (Expenses \$	640,222,060	ıncludıng grants of \$	1,055,816) (Revenue \$	576,661,204)
	UNIVERSITY AUXILIA	RY ACTIVITIES - See Schedu	ıle 0			
4d	Other program se	ervices (Describe in S	chedule O)			
	(Expenses \$	548,776,535 ı	ncluding grants o	of\$ 268,740,6	517) (Revenue \$)
4e	Total program se	rvice expenses►\$	3,221,145,26	5		

Part IV	Checklist of	Required	Schedules
rart IV	Cnecklist of	Keguirea	Scheaules

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8	Yes	
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	_
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		İ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	Yes	
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		No
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	Yes	
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note: All Form 990 filers are required to complete Schedule O	38	Yes	

art V	Statements	Regarding	Other TR	S Filinas	and Tax	Compliance
	ota to illoito	itegai ailig	OCC. 210	g	ana ian	Compilation

	Juliania kagaranig anarang ana rak asinphana		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		103	
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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	Yes	
Ь	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	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		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νο
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νο
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	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)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

3145 PORTER DRIVE Palo Alto, CA 94304 (650) 725-1732

Part VI
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
				<u></u>
1a b	Enter the number of voting members of the governing body 1a 32 Enter the number of voting members that are independent 1b 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
2	other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, 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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply of which website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	ı)
	CHRISTOPHER CANELLOS	_		

Part VIII 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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Lb Total	>	14,583,404	0	2,573,138

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization -3,823

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	Individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

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

(A) Name and business address	(B)	(C)
name and business address	Description of services	Compensation
THE WHITING-TURNER CONTRACTING CO PO BOX 17596	CONSTRUCTION	134,096,789
BALTIMORE, MD 21297		
VANCE BROWN INC 3197 PARK BOULEVARD PALO ALTO, CA 94306	CONSTRUCTION	103,623,554
HATHAWAY DINWIDDIE CONSTR CO 565 LAURDELWOOD ROAD SANTA CLARA, CA 95954	CONSTRUCTION	88,165,051
TURNER CONSTRUCTION 1625 CLAY STREET OAKLAND, CA 94612	CONSTRUCTION	73,735,641
DEVCON CONSTRUCTION INC 690 GIBRALTAR DRIVE MILPITAS, CA 94035	CONSTRUCTION	35,458,871
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ▶554) who received more than	

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
## #	1a	Federated camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership dues 1b						
ું ⊞	С	Fundraising eve	ents 1c					
<u>≅,≅</u>	d	Related organiz	ations 1d					
Ř.	e	Government grants	s (contributions) 1e	955,156,765				
er. Ser	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	493,675,534				
き	g	Noncash contri	hutions included in					
풀		lines 1a-1f \$	60,511,828		4 440 000 000			
ರ≅	h	Total. Add lines	s 1a-1f	🏲	1,448,832,299			
an				Business Code				
Ken	2a	STUDENT INCOME	-	900,099	657,714,588	657,714,588		
æ	ь	NONGOVERNMENT	RESEARCH	900,099	187,504,732	187,504,732		
45.e	С	PATIENT CARE		900,099	454,191,839	454,191,839		
<u> </u>	d	SPECIAL PROGRAM	IS	900,099	337,070,631	337,070,631		
E	е	DRIVING RANGE		713,910	517,784		517,784	
Program Serwce Revenue	f	All other progra	am service revenue		344,366		344,366	
Δ	g	Total. Add lines	s 2a – 2f		1,637,343,940			
	3	Investment inc	ome (including dividend	ds, interest				
			aramounts)	F	166,210,263		-36,470,266	
	4		tment of tax-exempt bond p	proceeds	144			144
	5	Royalties	() Park	(u) Damanal	0			
	6a	Gross Rents	(ı) Real 59,041,653	(II) Personal				
	ь	Less rental	7,886,679					
	С	expenses Rental income	51,154,974					
		or (loss)	, ,		51,154,974			51,154,974
	d	Net rental incor	me or (loss) (i) Securities	(II) O ther	31,134,974			31,134,974
	7a	Gross amount from sales of	9,500,119,638	38,807,000				
		assets other than inventory						
	ь	Less cost or	9,616,010,852	34,555,108				
		other basis and sales expenses						
	С	Gain or (loss)	-115,891,214	4,251,892	444 620 222		5 720 527	447.250.050
	d 8a		s)		-111,639,322		5,729,537	-117,368,859
Other Revenue	Ga	Gross income fi events (not incl \$ of contributions See Part IV, lin	luding 0 reported on line 1c)	112,816				
<u> </u>	ь	Less direct exp	penses b	353,619				
ŏ	С	Net income or (loss) from fundraising (events •	-240,803			-240,803
	9a	Gross income fi See Part IV, lin	rom gaming activities le 19 a					
	ь	Less direct exi	penses b					
	С		loss) from gaming activ	/ities	0			
	10a	Gross sales of returns and allo	owances .					
	 -	less	a l	5,036,341				
	Ь	-	oods sold b [(loss) from sales of inve	1,899,215	3,137,126			3,137,126
	С	Miscellaneous		Business Code	3,137,120			3,137,120
	11a							
	ь				+			
	c				+			
	d	All other revenu	ue					
	e		s 11a-11d					
				▶	0			
	12	Total revenue.	See Instructions	▶	3,194,798,621	1,636,481,790	-29,878,579	139,363,111
	l			_	5,157,750,021	1,000,401,790		Form 990 (2009)

	990 (2009)				Page 10
Part	Statement of Functional Expenses		-1		
А	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			D).	
Do no	ot include amounts reported on lines 6b, p, 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 U S See Part IV, line 21	1,338,500	1,338,500		<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	211 504 017	211 504 017		
_	Consults and althous accordance to according	311,594,917	311,594,917		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	10,556,401	10,556,401		
4	Benefits paid to or for members	0		1	
5	Compensation of current officers, directors, trustees, and key employees	7,395,703	1,379,046	5,153,640	863,017
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	1,649,772,247	1,515,890,647	95,112,319	38,769,281
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	99,563,499	88,130,774	8,459,297	2,973,428
9	Other employee benefits	213,937,990	189,237,131	18,309,535	6,391,324
10	Payroll taxes	93,703,698	82,760,527	8,118,609	2,824,562
11	Fees for services (non-employees)				
а	Management	214,209		214,209	
b	Legal	8,539,722		8,539,722	
с	Accounting	912,680		912,680	
d	Lobbying	20,437		20,437	
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	27,836,201		27,836,201	
g	Other	144,693,911	113,443,969	24,198,001	7,051,941
12	Advertising and promotion	222,463		137,751	84,712
13	Office expenses	203,667,278	185,031,739	14,280,484	4,355,055
14	Information technology	17,452,626	11,170,027	5,959,790	322,809
15	Royalties	5,962,772	1,642,403	4,320,155	214
16	Occupancy	130,558,983	111,371,070	17,468,750	1,719,163
17	Travel	46,040,132	43,430,587	1,279,632	1,329,913
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			· · · · · · · · · · · · · · · · · · ·
19	Conferences, conventions, and meetings	7,445,356	7,135,325	271,579	38,452
20	Interest	60,419,549	52,699,077	7,325,782	394,690
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	234,016,796	198,413,007	33,774,101	1,829,688
23	Insurance	17,368,180	12,725,262	4,627,321	15,597
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	EQUIPMENT RENTAL & MAINTENANCE	4,444,999	3,728,439	580,974	135,586
ь	PRINTING & PUBLICATION	10,551,863	8,337,751	1,224,676	989,436
С	SLAC NON-SALARY EXPENSE	175,819,173	175,757,682	61,491	
d	RESEARCH SUBAWARDS	54,367,858	54,367,858		
e	EMPLOYEE RELATED EXPENSES	36,925,666	29,534,252	3,757,653	3,633,761
f	All other expenses	-341,996	11,468,874	-12,453,441	642,571
25	Total functional expenses. Add lines 1 through 24f	3,575,001,813	3,221,145,265	279,491,348	74,365,200
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				· , ·

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			290,086	1	221,835
	2	Savings and temporary cash investments			1,334,855,154	2	1,529,632,970
	3	Pledges and grants receivable, net			782,522,827	3	764,662,131
	4	Accounts receivable, net			238,554,287	4	305,908,025
	5	Receivables from current and former officers, directors, trust highest compensated employees Complete Part II of	ees, key	y employees, and			
		Schedule L			3,808,771	5	4,706,059
	6	Receivables from other disqualified persons (as defined unde and persons described in section $4958(c)(3)(B)$ Complete P					
		Schedule L				6	
stess	7	Notes and loans receivable, net			489,618,017	7	513,055,135
SS	8	Inventories for sale or use			6,359,196	8	6,594,431
⋖	9	Prepaid expenses and deferred charges	and deferred charges				
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	6,340,800,781			
	ь	Less accumulated depreciation	d depreciation 10b 2,756,804,517				
	11	Investments—publicly traded securities		4,310,821,720	11	3,788,899,686	
	12	Investments—other securities See Part IV, line 11	12,189,847,794	12	14,014,460,975		
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	$\textbf{Total assets.} \ Add lines \ 1 \ through \ 15 \ (must equal line 34) \textbf{.}$			22,671,549,045	16	24,553,320,653
	17	Accounts payable and accrued expenses .	1,119,774,523	17	1,382,407,968		
	18	Grants payable		18			
	19	Deferred revenue			378,495,919	19	370,573,166
	20	Tax-exempt bond liabilities	•		1,167,506,905	20	1,376,031,361
è	21	Escrow or custodial account liability Complete Part IV of Schee	dule D		316,403,754	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, k employees, highest compensated employees, and disqualified $\frac{1}{2} \left(\frac{1}{2} \right) \left(\frac{1}$	•				
ä		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third part	ies .		1,349,077,011	23	1,439,901,380
	24	Unsecured notes and loans payable to unrelated third parties	· .			24	
	25	Other liabilities Complete Part X of Schedule D			301,250,288	25	549,484,286
	26	Total liabilities. Add lines 17 through 25			4,632,508,400	26	5,118,398,161
Fund Balances		Organizations that follow SFAS 117, check here ► $\overline{\checkmark}$ and co through 29, and lines 33 and 34.	mplete	lines 27			
ลท	27	Unrestricted net assets			8,286,639,279	27	9,131,844,886
Ва	28	Temporarily restricted net assets			5,094,032,811	28	5,526,835,975
'n	29	Permanently restricted net assets			4,658,368,555	29	4,776,241,631
Ē		Organizations that do not follow SFAS 117, check here \blacktriangleright	and co	mplete			
ě		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other	r funds			32	
Net	33	Total net assets or fund balances			18,039,040,645	33	19,434,922,492
	34	Total liabilities and net assets/fund balances	22,671,549,045	34	24,553,320,653		

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis 🔽 Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

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. See separate instructions.

Public Charity Status and Public Support

Inspection **Employer identification number**

STANE	ORD U		zation BOARD OF TRU DRD JUNIOR UN		330 O. T.	71111 330 EE1	oce separa		Employer ide		umber		
Pa	rt I	Reas	on for Pul	olic Charity State	us (All orga	anızatıons	must compl						
The	rganı			foundation because									
1	Γ	A churc	h, conventio	on of churches, or as:	sociation of d	churches se	ction 170(b)((1)(A)(i).					
2	<u> </u>	A scho	ol described	ın section 170(b)(1)	(A)(ii). (Att	ach Schedul	e E)						
3	Γ	A hosp	tal or a coop	erative hospital serv	vice organiza	ition describ	ed in section	170(b)(1)(A	(iii).				
4	Γ		cal research l's name, cıt	organization operate y, and state	ed in conjunc	tion with a h	ospital descr	ribed in sectio	on 170(b)(1)	(A)(iii). Ente	rthe		
5	Γ	-	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	Г			local government or g		ıl unıt descri	bed in sectio i	n 170(b)(1)(A)(v).				
7	Γ	An orga describ	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	Г			described in section)(vi) (Com	olete Part II))					
9	Ė		•	t normally receives			•		tions. membe	rship fees. a	nd aro	SS	
	•			ties related to its exc									
		ıts supp	() from busin	om businesses									
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)											
10	Γ	Anorga	nızatıon org	anızed and operated	exclusively	to test for pu	ıblıc safety S	ee section 5 0	09(a)(4).				
11	Γ	one or i	more publicly	anized and operated / supported organiza pes the type of suppo b	tions describ orting organiz	ed in section	n 509(a)(1)	or section 50 11e through	9(a)(2) See	•	a)(3).	Check	
e	Γ	other th section	nan foundatio 509(a)(2)	x, I certify that the o	er than one o	r more publi	cly supported	d organization	ns described	ın section 50	9(a)(1) or	
f g		check t Since A	hıs box ugust 17, 2	eceived a written det 006, has the organiz						supporting o	rganız	ation,	
			g persons?	#1									
				ectly or indirectly co joverning body of the	•		-	ersons descr	ibea in (ii)	110/1	Yes	No	
		, ,	,	r of a person describ	• •	-	10117			11g(i) 11g(ii)		<u> </u>	
		` '	•	ed entity of a person	` ,		ove?			11g(ii)		 	
h				g information about t		., .,				rra(m)		<u> </u>	
•		1101140	the followin	g imormation about t	ine supported	a organizatio	11(3)						
(i) Name suppo organiz		e of (ii) (described on orted EIN lines 1-9 above		organizati col (i) list your gove docume	Ic the		(v) Did you notify the organization in col (i) of your support?		on in anized S ?	A m	vii) ount of oport?		
				ınstructions))	Yes	No	Yes	No	Yes	No			
									1	I.			

Total

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	֥ <i>)</i>		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization'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						
5	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
_	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
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						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization'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				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493195003231

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

	, ,, , -	t have NOT filed Form 5768 (election			•						
	ection 501(c)(4), (5), or (6) organi	s," to Form 990, Part IV, Line 5	(Proxy Tax) or For	m 990-E∠, line 35a (regard	ding proxy tax), then						
N a	nme of the organization ANFORD UNIVERSITY BOARD OF TRUSTI	EES		Employer iden	tification number						
	THE LELAND STANFORD JUNIOR UNIVE			94-1156365							
Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.						
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign ac	tivities in Part IV							
2	Political expenditures			▶	\$						
3	V olunteer hours										
Par	rt I-B Complete if the or	ganization is exempt und	er section 501(c)(3).							
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	5 •	\$						
2	Enter the amount of any excise	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$						
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		┌ Yes ┌ No						
4a	Was a correction made?				┌ Yes						
b	If "Yes," describe in Part IV										
Par	tt I-C Complete if the or	ganization is exempt und	er section 501(c) except section 501	l(c)(3).						
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$						
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to	o other organization	s for section 527	\$						
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b ►	\$						
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes ☐ No						
5	were made For each organizat contributions received that we	State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.									
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-						

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a	1)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?	Yes			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?	Yes		4,418	
d	Mailings to members, legislators, or the public?	Yes		188,777	
e	Publications, or published or broadcast statements?	Yes		4,418	
f	Grants to other organizations for lobbying purposes?	Yes		23,089	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		413,275	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		76,727	
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i			710,704	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1 Dues, assessments and similar amounts from members 1

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Ident if ier	Return Reference	Explanation
ART II-B - LOBBYING ACTIVITY (PLANATION	AN INSUBSTANTIAL PORTION OF STANFORD UNIVERSITY'S TOTAL ACTIVITIES	INVOLVED LEGISLATIVE AND REGULATORY MATTERS OF DIRECT CONCERN TO HIGHER EDUCATION OR OF COMPELLING IMPORTANCE TO STANFORD IN PARTICULAR INSTITUTIONAL EFFORTS TO INFLUENCE LEGISLATION AND REGULATION ARE DIRECTED BY THE OFFICE OF GOVERNMENT AND COMMUNITY RELATIONS DURING FISCAL YEAR 2009-2010, THE OFFICE CONSISTED OF FOUR PROFESSIONAL STAFF MEMBERS, ONE INTERN, AND TWO SUPPORT PERSONS THE UNIVERSITY DOES NOT HAVE A LOBBYING OFFICE IN EITHER WASHINGTON, DC OR SACRAMENTO, CA AND DURING THIS PERIOD, THE UNIVERSITY HIRED AN OUTSIDE REGISTERED LOBBYIST IN SACRAMENTO FOR PART-TIME WORK ON STATE ISSUES ACTIVITIES OF GOVERNMENT AND COMMUNITY RELATIONS STAFF INCLUDE CONTACTS BY LETTERS, PHONE CALLS AND MEETINGS WITH LEGISLATORS, MEMBERS OF THEIR STAFFS, OR OTHER GOVERNMENT OFFICIALS, AND MEETINGS WITH LOCAL CITIZENS REGARDING STANFORD ISSUES WITH LOCAL GOVERNMENTS IN FISCAL YEAR 2009-2010, LEGISLATIVE, EXECUTIVE, AND LOCAL REGULATORY ISSUES HANDLED BY THE UNIVERSITY INCLUDED THE FOLLOWING LOCAL ISSUES ZONING AND UNIVERSITY AND CONTIGUOUS TO THE UNIVERSITY'S ACADEMIC CAMPUS STATE ISSUES STUDENT AID, TAXATION, RESEARCH FUNDING ISSUES, PRIVACY ISSUES, ACCOUNTING ISSUES, INTELLECTUAL PROPERT' ISSUES, COMPETENCY EDUCATION ISSUES, STEM CELL RESEARCH SUSS, WATER RIGHTS, FIDUCIARY DUTIES, AND HOSPITAL SEISMIC DEADLINES FEDERAL ISSUES STUDENT AID, TAXATION, REIMBURSEMENT OF FEDERAL RESEARCH COSTS, FUNDING LEVELS OF RESEARCH (E G NIH, DOE, NASA, DOD, NSF), FUNDING FOR SLAC NATIONAL ACCELERATOR LABORATORY, MEDICARE FUNDING FOR TEACHING HOSPITALS, RESEARCH POLICY AND IMMIGRATION POLICY THE TOTAL BUDGET EXPENDED BY THE OFFICE OF GOVERNMENT AND COMMUNITY RELATIONS WAS \$1,132,804 THE EXTEMPLY AND LOCAL CATIONS OF THE ABOVE EXPENDED BY THE OFFICE OF

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As Filed Data

DLN: 93493195003231

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization **Employer identification number** STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY 94-1156365 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 25 24,114,114 Aggregate contributions to (during year) 1,338,500 3 Aggregate grants from (during year) Aggregate value at end of year 179,466,247 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ __ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

Par	1111 Organizations Maintaining Co	llections of Art,	<u> Histo</u>	<u>rical Trea</u>	asures, or	<u>Oth∈</u>	er Similar Ass	sets (co	ontinued)
3	Using the organization's accession and other items (check all that apply)	records, check any o	of the 1	following tha	t are a sıgnıfı	cant (use of its collecti	on	
а	✓ Public exhibition		d F	Loan or	exchange pro	grams	5		
b	Scholarly research		е Г	Other					
С	✓ Preservation for future generations								
4	Provide a description of the organization's co Part XIV	llections and explain	how t	hey further t	he organizatio	n's e	xempt purpose ır	1	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							– Yes	✓ No
Pai	rt IV Escrow and Custodial Arrange Part IV, line 9, or reported an am	•		_		ed "\	es" to Form 9'	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	ary fo	r contributio	ns or other as	sets	not Γ	- Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	g table			Am	ount	
c	Basining balance					1c	Alli	Juni	
d	Beginning balance Additions during the year					1d			
e	J ,					1e			
f	Distributions during the year					1f			
	Ending balance	000 Dawl V I.m.	212				Г	Yes	
2a	Did the organization include an amount on Fo		21/				1	res) NO
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete i		answa	ered "Yes"	to Form 99() Pa	rt IV line 10		
	Endownent Funds. complete	(a)Current Year		Prior Year	(c)Two Years I		(d)Three Years	(e)Four Y	'ears Back
1a	Beginning of year balance	12,619,094,000		,214,373,000	(-,		Back	(-)	
ь	Contributions	517,078,000		155,359,000					
c	Investment earnings or losses	1,569,588,000	-3	,470,843,000					
d	Grants or scholarships	203,694,898		209,983,118					
e	Other expenditures for facilities	650,950,102	1	,069,811,882					
	and programs								
f	Administrative expenses								
g	End of year balance	13,851,115,000	12	,619,094,000					
2	Provide the estimated percentage of the year	r end balance held as							
а	Board designated or quasi-endowment 🕨	38.204 %							
b	Permanent endowment F 61.294 %								
c	Term endowment ► 0.503 %								
За	Are there endowment funds not in the posses	sion of the organizat	ion tha	t are held a	nd admınıster	ed for	the		
	organization by							Yes	No
	(i) unrelated organizations		•				3a(i		
ь	(ii) related organizations		• •	e dulo D2		•	3a(i		<u> </u>
4	Describe in Part XIV the intended uses of the	· · · · · · · · · · · · · · · · · · ·					36	res	<u> </u>
	rt VI Investments—Land, Buildings				, Part X, line	e 10.			
	Description of investment	,,	(a	Cost or other basis	'	her	(c) Accumulated depreciation	(d) Boo	ok value
1a	Land				97,796	,494		9	7,796,494
b	Buildings				4,177,438	3,639	1,494,747,420	2,68	2,691,218
c	Leasehold improvements				146,400	,266	128,892,312	1	7,507,955
d	Equipment		.		1,480,689	,465	1,133,164,782	34	7,524,683
e	Other	<u></u>			438,475	5,917		43	8,475,917

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

3,583,996,267

	Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
	(including name of security)	. ,	Cost or end-of	-year market value
Financial de	rivatives			
Closely-held	d equity interests			
Other				
SEE PAGE 5		14,014,460,975		
Total. (Column	n (b) should equal Form 990, Part X, col (B) line 12) 🕒 🕨	14,014,460,975		
Part VIII	Investments—Program Related. See	Form 990, Part X, line	13.	
				d of valuation
	(a) Description of investment type	(b) Book value		-year market value
			ļ	
Total. (Columi	n (b) should equal Form 990. Part X. col (B) line 13)			
	. (-,, ,			
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
		ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
	Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX	Other Assets. See Form 990, Part X, III (a) Descrip	ne 15. Otion		(b) Book value
Total. (Colum	Other Assets. See Form 990, Part X, III (a) Descrip	ne 15. Otion 5.)		(b) Book value
Total. (Colum Part X	Other Assets. See Form 990, Part X, III (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Colum Part X	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column Part X 1 Federal Inco	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column Part X 1 Federal Inco	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Colum Part X 1 Federal Inco	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) (b) A mount 0 160,024,240		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371	· · · · · •	(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value
Total. (Colum Part X 1 Federal Inco FOR SECUR FUNDS INTEREST A	Other Assets. See Form 990, Part X, In (a) Description (b) should equal Form 990, Part X, col.(B) line 1 Other Liabilities. See Form 990, Part X (a) Description of Liability Ome Taxes ITIES LOANED	5.) (b) Amount 0 160,024,240 53,485,371		(b) Book value

Part XI Reconciliation of C 1 Total revenue (Form 990, Part		rm 990 to Financial Stateme	nts 1	3,194,798,621
2 Total expenses (Form 990, Par	rt IX, column (A), line 25)		2	3,575,001,813
3 Excess or (deficit) for the year4 Net unrealized gains (losses) o			4	1,864,260,985
5 Donated services and use of fa6 Investment expenses	cilities		6	
7 Prior period adjustments			7	99 175 046
8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lii	nes 4 - 8		9	-88,175,946 1,776,085,039
	per financial statements Combine lire evenue per Audited Financia	nes 3 and 9 I <mark>l Statements With Revenue</mark> j	10 per R	1,395,881,847 Leturn
	er support per audited financial staten it not on Form 990, Part VIII, line 12		1	4,686,902,000
	ments	2a 1,864,260,985		
c Recoveries of prior year grants		. 2c		
d Other (Describe in Part XIV)e Add lines 2a through 2d .		2d -315,615,679	2e	1,548,645,306
3 Subtract line 2e from line 1.4 A mounts included on Form 99	O, Part VIII, line 12, but not on line		3	3,138,256,694
a Investment expenses not incl	uded on Form 990, Part VIII, line 7b	. 4a 58,794,306		
b Other (Describe in Part XIV)c Add lines 4a and 4b			4c	56,541,927
	d 4c. (This should equal Form 990, Po xpenses per Audited Financi	art I, line 12)	5 s per	3,194,798,621 Return
1 Total expenses and losses per statements			1	3,291,021,000
A mounts included on line 1 buDonated services and use of fa	t not on Form 990, Part IX, line 25 acilities	2a		
b Prior year adjustmentsc Other losses		2b		
d Other (Describe in Part XIV)		2d 2,252,759	1	2 252 750
e Add lines 2a through 2d3 Subtract line 2e from line 1 .			2e 3	2,252,759 3,288,768,241
	0, Part IX, line 25, but not on line 1: uded on Form 990, Part VIII, line 7b	4a 58,794,306		
b Other (Describe in Part XIV)c Add lines 4a and 4b		4b 227,439,266	4c	286,233,572
	nd 4c. (This should equal Form 990, F	Part I, line 18)	5	3,575,001,813
Complete this part to provide the de	scriptions required for Part II, lines 3	s, 5, and 9, Part III, lines 1a and 4, P XIII, lines 2d and 4b Also complete		
additional information	· · · · · · · · · · · · · · · · · · ·	1		art to provide any
Identifier SCHEDULE D, PART III, LINE 1A	Return Reference WORKS OF ART AND SPECIAL	WORKS OF ART, HISTORICAL TR	EASU	
	COLLECTIONS	WORKS, AND ARTIFACTS, WHICH PROTECTED FOR EDUCATIONAL EXHIBITION PURPOSES, ARE NO	., RES	EARCH AND PUBLIC
		PURCHASES OF SUCH COLLECT: OPERATING EXPENSES IN THE P	ONS	ARE RECORDED AS
SCHEDULE D, PART III, LINE 4		ARE ACQUIRED THE CANTOR ARTS CENTER AT S A MUSEUM COMMITTED TO INT		
		AND THE PURSUIT OF KNOWLED OF DISCOVERY THROUGH DIREC	GE, F	OSTERING A SENSE
		WORKS OF ART THE CENTER CO STUDIES ART FROM ALL CULTUF SERVING THE UNIVERSITY AND	RESAI	ND PERIODS,
		EXHIBITIONS AND PROGRAMS TUNDERSTANDING AND ENJOYME	HAT I	INSPIRE THE FART SCHEDULE D,
		PART V, LINES 1B & 1E "CONTRI INCLUDE CERTAIN INVESTMEN"	LINC	OME, CURRENT YEAR
		GIFTS TO ENDOWMENT, MATURE DIRECTED TO ENDOWMENT, PER ADVISED FUNDS DESIGNATED T	NDING	FUNDS AND DONOR
		OTHER EXPENDABLE FUNDS INV	SLINE	ALSO INCLUDES
		\$58,000,000 OF ENDOWMENT FU THE LUCILE SALTER PACKARD C STANFORD, A RELATED ENTITY	HILD	REN'S HOSPITAL AT
		EXPENDITURES FOR FACILITIES 1E) ARE FUNDS TRANSFERRED F	ROM E	ENDOWMENT
		PRINCIPAL TO SUPPORT SUCH F PROGRAMS AND OTHER TRANSF PRINCIPAL TO EXPENDABLE FUI	ERS F	ROM ENDOWMENT
		LINE 2B APPROXIMATELY HALF 2B REPRESENTS REALIZED AND	UNRE	ALIZED GAINS ON
		TRUSTEES DETERMINES THE PR	UĎEN	T PORTION OF
		EXPENDITURE IN ACCORDANCE UNIFORM PRUDENT MANAGEME	WITH NT OF	THE CALIFORNIA INSTITUTIONAL
		FUNDS ACT SCHEDULE D, PART IN UNIVERSITY ENDOWMENT AF MANAGED BY TRUSTEES NOT RE	RESEV	/ERAL TRUSTS
		UNIVERSITY SCHEDULE D, PAR 3B INCLUDED IN THE ENDOWME	T V , L1 NT BA	INE 3A(II) AND LINE ALANCE ON LINE 1G
SCHEDULE D, PART V, LINE 4	INTENDED USES OF THE	ARE THE ASSETS OF THE FREIDS FOUNDATION, A RELATED ORGA IN 1885, LELAND AND JANE LAT	NIZA	TION
· · · · · · · · · · · · · · · · · · ·	ENDO WMENT FUNDS	THEIR FOUNDING GRANT "IT SH FOUNDATION AND ENDOWMENT	A LL C	ONSTITUTE THE
		HEREIN PROVIDED, AND UPON TO PRINCIPAL THEREOF SHALL FOR AND THAT THE RENTS, ISSUES,	REVER	REMAIN INTACT,
		SHALL BE DEVOTED TO THE FOUNT MAINTENANCE OF THE UNIVERS	JNDA	TION AND
		AND ENDOWED, AND THE USES A MENTIONED "TODAY, STANFOR CONSISTS OF THOUSANDS OF I	D'S E	N D O W M E N T
		OF WHICH ARE RESTRICTED TO SCHOLARSHIP FUNDS FOR UND	PART	ICULAR USES (E G ,
		FELLOWSHIP FUNDS TO SUPPOR RESEARCH FUNDS DIRECTED TO PROGRAM SUPPORT FUNDS, FUN	MAN	Y DIFFERENT AREAS,
		PROFESSORS, FUNDS TO SUPPO PROVIDE BUILDING AND GROUN	RT LE ID MA	CTURES, FUNDS TO INTENANCE, FUNDS
		TO SUPPORT THE UNIVERSITY'S SUPPORT THE ACQUISITION OF THE FUNDS ARE INVESTED IN P	LIBR	ARY MATERIALS)
		TERM GROWTH AND THE PAYOU PURPOSE SET FORTH IN THE GI	TISU	ISED FOR THE
		ENDOWMENT FUNDS DO NOT HARESTRICTIONS AND THE PAYOUUSED TO SUPPORT THE GENERA	JT FRO	M THESE FUNDS IS
		INFRASTRUCTURE OF THE UNIVOTHER PARTS OF THE UNIVERS	ERSIT ITY E	Y AS WELL AS MANY NDOWMENT PAYOUT
		IS A RELIABLE SOURCE OF CON CRUCIAL TO THE FUNDING OF T COMMITMENTS THAT THE UNIV	HE MA	ANY LONG TERM
		ENDOWMENT MAKES STANFORD OTHER MORE VARIABLE SOURC	LESS ES O F	DEPENDENT ON INCOME THE
		ENDOWMENT PAYOUT COVERS (STANFORD'S TOTAL EXPENSES DIRECTING CONSIDERABLE RES	STAN	FORD IS CURRENTLY
		EFFORTS TO WARD ADDRESSING CRUCIAL TO THE WORLD IN PAR	THE	CHALLENGES JLAR, IT IS SEEKING
		SOLUTIONS TO SOME OF THE M PROBLEMS IN HUMAN HEALTH, I AND SECURITY AND THE ENVIR	NTER	NATIONAL PEACE
		SUSTAINABILITY STANFORD CO	ИІТИС	NUES TO BE ONE OF
		THE VERY BEST APPLICANTS, REFAMILIES' INCOME AND PROVIDED AND FOR ALL ADMITTED STUDEN	DE SU	FFICIENT FINANCIAL
		UNIVERSITY ENDOWMENT SUPPORTED TO THE SUCCESS OF T	PORT HESE	CONTRIBUTES EFFORTS AS A
		RESULT OF ENDOWMENT SUPPO STANFORD IS ABLE TO WAIVE T TUITION FOR STUDENTS FROM	НЕТС	TAL COST OF
		INCOMES LESS THAN \$100,000 FAMILIES MAKING LESS THAN \$	STUD 60,00	ENTS FROM MOST O WILL HAVE THE
		FULL COST OF ATTENDANCE (PF ROOM & BOARD, AND BOOKS) CO ENDED AUGUST 31, 2010, ENDO	OVER	ED FOR THE YEAR
		SUPPORTED THE FOLLOWING BE UNIVERSITY INSTRUCTION AN	ROAD D RES	FUNCTIONS OF THE EARCH \$432,152,191
		STUDENT FINANCIAL AID \$203, \$18,506,399 SCHEDULE D, PART REPORTED ON THE UNIVERSITY	VIBA	ALANCES AS
		HAVE BEEN RECLASSIFIED TO C	OMPL HEDU	Y WITH 990 JLE D, PART VII,
		INVESTMENTS - OTHER SECURI EQUIVALENTS \$625,207,662 CC SECURITIES LOANED \$122,565,	LLAT	ERAL HELD FOR
		(\$85,440) FIXED INCOME \$415,6 \$3,402,206,582 NATURAL RESO	551,43 URCE:	33 REAL ESTATE S \$1,532,134,728
		PRIVATE EQUITIES \$3,867,426, \$5,005,170,209 ASSETS HELD B \$152,743,608 OTHER \$151,120,	ү отн	IER TRUSTEES
		\$15,274,141,660 LESS HOSPITA THE UNIVERSITY MERGED POOL	LFUN	IDS INVESTED IN
SCHEDULE D, PART X	STANFORD DID NOT REPORT A	\$14,014,460,975 SCHEDULE D, PART XI, LINE 8 A	DJUST	MENT TO EQUITY
SCHEDULE D, PART XII, LINE 2D	FIN 48 LIABILITY FINANCIAL AID (\$227,439,266)	RELATING TO LIVING TRUSTS A (\$88,175,946) OTHER, INCLUDING ADJUSTMEN		
SCHEDULE D, PART XII, LINE 4B	EXPENSES OF SPECIAL EVENTS	TO LIVING TRUSTS AND DERIVA	TIVE O PAF	S (\$88,176,413) RT VIII, LINE 10B
	FROM 990, PART VIII, LINE 8B (\$353,619)	(\$1,899,215) FINANCIAL STATE	MENT	ROUNDING \$455
,	EXPENSES OF SPECIAL EVENTS FROM 990, PART VIII, LINE 8B \$353,619	COST OF GOODS SOLD FROM 99 \$1,899,215 FINANCIAL STATEM SCHEDULE D, PART XIII LINE 4B	ENT R	OUNDING (\$75)
		\$227,439,266		edule D (Form 990) 2009

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

STANFORD UNIVERSITY BOARD OF TRUSTEES

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public

OF THE LELAND STANFORD JUNIOR UNIVERSITY 94-1156365 YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain 3 Νo STANFORD MEETS THE CRITERIA OF SECTION 4 03 2(B) OF REV PROC 75-50 THROUGH ADMISSION AND FINANCIAL AID OFFICES OUTREACH PROGRAMS WHICH PUBLICIZE STANFORD UNIVERSITY'S ACADEMIC OPPORTUNITIES AT SECONDARY AND POST-SECONDARY SCHOOLS THROUGHOUT THE UNITED STATES 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? **4a** Yes **b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 🦸 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 7 Yes 990)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493195003231

OMB No 1545-0047

2009

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Totals .

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification nu

	NEODE HNIVERGITY DO	A DD O E T DU CT F				Lilipioyei ide	intil ication number
	NFORD UNIVERSITY BO THE LELAND STANFORD					94-115636!	5
		rmation on Ac	tivities Outsi	de the United States	s. Complete		
1				ecords to substantiate	the amount	of the grant	s or
	assistance, the grant	ees' eligibility fo	or the grants or	assistance, and the se	lection crite	rıa used to a	wa rd
	the grants or assistar	nce?					. 🔽 Yes 🗆 No
2	For grant makers. Descr United States	ibe in Part IV the	organization's pr	ocedures for monitoring th	ne use of grai	nt funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	ıs a progr describe sp	ty listed in (d) am service, pecific type of s) in region	(f) Total expenditures for region
See	e Add'l Data			and region,	,	, ,	

10

49,783,560

Schedule F (Form 99	0) 2009							Page 2
Part IV,	line 15, for any		nizations or Entit eived more than \$5 space is needed.					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
See Add'l Data								

							<u> </u>	
2	Enter total nun	nher of recipi	ent organizations list	ted above that are i	recognized as charit	ies by the foreign o	ountry recogniz	ed as
-					ovided a section 501			

52

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

							1
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data							
-							
-							

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009

Page 4 **Supplemental Information** Part IV Complete this part to provide the information required in Part I, line 2, and any additional information. Identifier ReturnReference Explanation PART I, GENERAL INFORMATION PART I, LINE 2 DESCRIBE THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS ON ACTIVITIES OUTSIDE OF THE UNITED STATES OUTSIDE OF THE UNITED STATES STANFORD UNIVERSITY IS NOT A "GRANTMAKER" PER SE IN THAT ITS FUNDAMENTAL MISSION, AND PURPOSE FOR TAX-EXEMPTION, RELATES TO TEACHING, RESEARCH AND PATIENT CARE ACTIVITIES HOWEVER, IN THE COURSE OF THESE MISSION-BASED ACTIVITIES, THE UNIVERSITY DOES MAKE PAYMENTS THAT MEET THE CRITERIA FOR GRANTMAKING AS DEFINED BY THE INSTRUCTIONS TO IRS 990 SCHEDULE F PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE OF THE U.S. ARE PRINCIPALLY GOVERNED BY THE PURPOSE FOR WHICH THE FUNDS WERE GRANTED FINANCIAL AID SCHOLARSHIPS, STIPENDS AND FELLOWSHIPS FOR MOST US INSTITUTIONS OF HIGHER EDUCATION, PROVISION OF FINANCIAL AID TO STUDENTS IS AN IMPORTANT ACTIVITY ENABLING QUALIFIED STUDENTS TO OBTAIN A COLLEGE EDUCATION AT THE UNDERGRADUATE, GRADUATE OR POSTDOCTORAL LEVEL STANFORD IS COMMITTED TO A "NEED-BLIND" ADMISSION POLICY FOR US CITIZENS AND PERMANENT RESIDENTS. IT ADMITS QUALIFIED STUDENTS WITHOUT REGARD TO THEIR ABILITY TO PAY, AND PROVIDES A COMPREHENSIVE FINANCIAL AID PROGRAM FOR ALL ADMITTED STUDENTS WHO HAVE UNIVERSITY-COMPUTED NEED, AND WHO MEET STATED FINANCIAL AID ELIGIBILITY REQUIREMENTS FOR THE FISCAL YEAR, ENDED AUGUST 31, 2010, 80% OF UNDERGRADUATE STUDENTS RECEIVED SOME FORM OF FINANCIAL AID (5,476 STUDENTS), WITH A TOTAL OF \$312,507,752 OF FINANCIAL AID DISBURSED TO ALL STANFORD STUDENTS APPROXIMATELY 73% OF THIS AID TOOK THE FORM OF TRANSFERS FROM INTERNAL UNIVERSITY FUNDS TO OFFSET TUITION AND OTHER UNIVERSITY CHARGES THAT WOULD OTHERWISE HAVE BEEN RECEIVED BY THE UNIVERSITY THE BALANCE OF \$85,068,486 REPRESENTS DISBURSEMENTS, PRIMARILY TO GRADUATE STUDENTS, FOR STIPENDS, FELLOWSHIPS AND OTHER STUDENT AID, IN SUPPORT OF ACADEMIC EFFORT FOR THE VAST MAJORITY OF ENROLLED STUDENTS, THESE AMOUNTS ARE PAID BY DIRECT DEPOSIT TO STUDENT BANK ACCOUNTS IN THE UNITED STATES AT THE TIME OF CONSTRUCTIVE RECEIPT OF THESE FUNDS IN THE U S , IT IS POSSIBLE THAT STUDENTS (PARTICULARLY DOCTORAL STUDENTS) MIGHT BE TRAVELING, OR "LIVING," OUTSIDE OF THE U.S. DURING THE COURSE OF THEIR ACADEMIC WORK, OR EVEN FOR PERSONAL PURPOSES STANFORD REQUIRES THAT STUDENTS WHO ARE RECEIVING FINANCIAL AID MAINTAIN THEIR REGISTRATION STATUS, AND BE ENROLLED FOR ACADEMIC CREDIT IN UNIVERSITY-APPROVED PROGRAMS THE UNIVERSITY DOES NOT BROADLY CONSIDER FINANCIAL AID DISBURSEMENTS IN THE UNITED STATES TO ENROLLED STUDENTS AS "GRANTS TO FOREIGN INDIVIDUALS," AND HAS ACCORDINGLY REPORTED ON SCHEDULE FTHOSE GRANTS PAID OUTSIDE OF THE UNITED STATES, OR GRANTS FOR USE OUTSIDE THE UNITED STATES FOR PROGRAMS WHICH HAVE A READILY IDENTIFIABLE FOREIGN COMPONENT THAT IS SEPARATELY TRACKED THE FOLLOWING CATEGORIES OF AID ARE PAID DIRECTLY TO STUDENTS OR SCHOLARS OUTSIDE OF THE UNITED STATES, OR FOR INTENDED USE OUTSIDE THE US, AND ARE REPORTED ON SCHEDULE F, PART III RESEARCH GRANTS THE UNIVERSITY FUNDS A SUMMER INDEPENDENT RESEARCH GRANT PROGRAM AVAILABLE ON A COMPETITIVE BASIS TO UNDERGRADUATES AS FOR MOST FINANCIAL AID, THESE GRANTS ARE DISBURSED IN THE UNITED STATES TO ENROLLED STUDENTS OPPORTUNITIES TO FORMALLY PRESENT RESULTING ACADEMIC RESEARCH FINDINGS ARE PROVIDED, WHICH CONTRIBUTES TO THE ASSURANCE THAT MONIES ARE USED FOR THE INTENDED PURPOSE THOSE AWARDS EXCEEDING \$5,000, WHERE THE INTENDED USE OF THE RESEARCH GRANT IS OUTSIDE OF THE U S , ARE REPORTED IN PART III SERVICE LEARNING FELLOWSHIPS STANFORD'S HAAS CENTER FOR PUBLIC SERVICE MANAGES A PROGRAM TO ENGAGE STANFORD STUDENTS IN SERVICE LEARNING OPPORTUNITIES THESE PLACEMENTS ARE CLOSELY MONITORED BY PROGRAM OFFICERS PRIOR TO AND AFTER THEY OCCUR, TO ASSURE THE MAXIMUM BENEFIT OF THE LEARNING EXPERIENCE FELLOWSHIP PLACEMENTS OUTSIDE OF THE U.S. FOR WHICH STUDENTS RECEIVED SUPPORT IN EXCESS OF \$5.000 ARE BEEN REPORTED IN PART III 1 SCHOLARSHIPS STANFORD MANAGES A CONSORTIUM LANGUAGE PROGRAM LOCATED IN THE EAST ASIA/PACIFIC REGION ON BEHALF OF SEVERAL US UNIVERSITIES SCHOLARSHIPS TO ATTEND THIS PROGRAM ARE AWARDED BY THE CONSORTIUM, AND ARE DISBURSED FROM STANFORD DIRECTLY TO THE CONSORTIUM PROGRAM OFFICE OVERSEAS 2 OVERSEAS STUDIES PROGRAM-INTERNSHIP STIPENDS AS PART OF ITS UNDERGRADUATE OVERSEAS STUDY PROGRAM IN EUROPE, THE UNIVERSITY IS ABLE TO PLACE ELIGIBLE STANFORD STUDENTS IN LOCAL INTERNSHIPS FOR 3-6 MONTHS STUDENTS ARE PAID A STIPEND TO COVER THEIR HOUSING, FOOD AND LIVING EXPENSES UNIVERSITY PROGRAM MANAGERS IN THESE COUNTRIES WORK WITH RECIPIENT ORGANIZATIONS TO MONITOR STUDENT PERFORMANCE AND PROVIDE FEEDBACK THESE AMOUNTS ARE REPORTED IN PART III AS GRANTS TO INDIVIDUALS, LIVING OUTSIDE OF THE U.S. THE IN-COUNTRY EXPENDITURES RELATING TO EACH OF THE OVERSEAS STUDIES CENTERS ARE REPORTED IN PART I, LINE 3 AS A PROGRAM ACTIVITY A VERY SMALL PROPORTION OF THOSE EXPENSES ARE REPRESENTED BY CASH PAYMENTS TO STUDENTS FOR PER DIEM MEAL ALLOWANCES THESE HAVE BEEN INCLUDED AS PROGRAM ACTIVITY EXPENSES, NOT AS GRANTS TO INDIVIDUALS 3 FELLOWSHIP INCLUDED IN PART III IS A ONE-TIME STIPEND PAYMENT TO THE EUROPEAN HOME INSTITUTION IN SUPPORT OF A SCHOLAR VISITING STANFORD FOR THE YEAR 4 SENIOR SCHOLAR SUPPORT THESE RESEARCH GRANTS REPRESENT STIPEND PAYMENTS FOR NON-STUDENT FELLOWSHIPS SUCH AS SENIOR FELLOWS WHO MAY BE ASSOCIATED WITH THE UNIVERSITY FOR LIMITED PERIODS OF TIME TO UNDERTAKE A PARTICULAR ACADEMIC PROJECT AMOUNTS REPORTED ON SCHEDULE FPART III REPRESENT SUPPORT PAID TO INDIVIDUALS OUTSIDE OF THE UNITED STATES 5 LOAN FORGIVENESS AMOUNTS REPORTED IN PART III REPRESENT PAYMENT MADE UNDER STANFORD'S GRADUATE SCHOOL OF BUSINESS (GSB) INTERNATIONAL OR NON-PROFIT LOAN FORGIVENESS PROGRAMS THESE PROGRAMS ARE PART OF THE GSB'S BROADER GOAL TO HAVE GREATER INTERNATIONAL IMPACT AND TO INCREASE ACCESS TO GLOBAL OPPORTUNITIES ELIGIBILITY FOR BOTH PROGRAMS IS MONITORED BY THE GSB FINANCIAL AID OFFICE, AND SINCE THE PROGRAMS ARE GIFT-FUNDED, THE UNIVERSITY IS REQUIRED TO DEMONSTRATE THAT IT HAS USED THE FUNDS IN ACCORDANCE WITH DONOR RESTRICTIONS SUB-AWARDS ARE PAYMENTS TO THIRD PARTY RECIPIENTS FOR PERFORMING A PORTION OF A STANFORD RESEARCH PROGRAM, MOST OFTEN A SPONSORED-RESEARCH PROJECT SUB-AWARDS ARE AGREEMENTS FOR CONTRACTUALLY DEFINED DELIVERABLES, USUALLY REQUIRING HIGHLY SPECIFIC EXPERTISE AS SUCH THEY ARE PROBABLY BEST LEGALLY DESCRIBED AS CONTRACTS HOWEVER, SUB-AWARDS MIGHT ALSO BE CATEGORIZED AS EITHER GRANTS OR CONTRACTS, DEPENDING ON THE NATURE OF THE ORIGINATING PRIME FUNDING SOURCE, SINCE THE TERMS AND CONDITIONS OF THE ORIGINATING FUNDING SOURCE GENERALLY FLOW THROUGH TO THE SUB-AWARD ACCORDINGLY, GRANT-FUNDED SUB-AWARDS ARE REPORTED IN PART II CONTRACT-FUNDED SUB-A WARDS TO FOREIGN RECIPIENTS ARE REPORTED IN PART I, LINE 3 AS RESEARCH PROGRAM ACTIVITIES THE PROCEDURES FOR MONITORING BOTH TYPES OF SUB-AWARDS ARE ESSENTIALLY IDENTICAL AN INITIAL RISK ASSESSMENT OF THE SUB-RECIPIENT IS CONDUCTED PRIOR TO THE GRANTING OF THE SUB-AWARD THIS, TOGETHER WITH AN AUDIT/FINANCIALS REVIEW, PROVIDES INSIGHT ON WHETHER IT IS APPROPRIATE AND REASONABLE TO ENTER INTO THE SUB-AWARD, OR WHETHER ADDITIONAL TERMS MUST BE ADDED TO THE SUB-AWARD AGREEMENT FOR GREATER ASSURANCE OF ITS SAFE-HANDLING IN ACCORDANCE WITH US OMB CIRCULAR A-133 REQUIREMENTS, THE SUB-RECIPIENT IS REQUIRED TO ANNUALLY COMPLETE A QUESTIONNAIRE DESIGNED TO ASSESS CERTAIN OF THE ENTITY'S INTERNAL CONTROLS, AND FINANCIAL STATUS THIS INFORMATION IS COLLECTED AND REVIEWED BY SPONSORED RESEARCH SPECIALISTS INVOICES SUBMITTED BY THE SUB-RECIPIENT TO THE UNIVERSITY ARE REVIEWED TO ENSURE THAT CHARGED EXPENSES MEET BOTH INTERNAL ACCOUNTING POLICIES, AS WELL AS STANDARDS ESTABLISHED BY U.S. OMB CIRCULAR A-21 AWARDS ARE MONITORED ON AN ONGOING BASIS BY MEETING, REPORT OR COMMUNICATION, BY BOTH THE AWARD PRINCIPAL INVESTIGATOR AND THE UNIVERSITY'S SUB-RECIPIENT MONITORING OFFICER TO ENSURE THAT PROGRESS IS PROCEEDING AS AGREED Earthquake Relief-a one-time payment was made by the University, on behalf of the School of Medicine, to a hospital in Haiti to support patient care for victims of the January 2010 Haitian earthquake PART I, .INE 3, COLUMN (F) AS A LEADING RESEARCH INSTITUTION, STANFORD UNIVERSITY CONDUCTS ACTIVITIES ALL OVER THE WORLD IN PURSUIT OF ITS ACADEMIC MISSION OF INSTRUCTION, RESEARCH AND PATIENT CARE ITS STUDENT, FACULTY AND ALUMNI COMMUNITIES ARE SIMILARLY INTERNATIONAL IN CHARACTER, AND SEEK TO COLLABORATE IN AN INTERDEPENDENT WORLD TO UNDERSTAND AND SOLVE GLOBAL CHALLENGES IN ACCORDANCE WITH IRS GUIDANCE, THE UNIVERSITY HAS REPORTED ON SCHEDULE F EXPENDITURES RELATING TO FOREIGN ACTIVITIES WHICH ARE SEPARATELY TRACKED IN THE ACCOUNTING SYSTEM ALL UNIVERSITY EXPENDITURES ARE TRACKED AND REPORTED IN THE ACCOUNTING SYSTEM, HOWEVER, THERE HAS PREVIOUSLY BEEN NO PERSUASIVE BUSINESS PURPOSE TO WARRANT THE CATEGORIZATION OF EXPENDITURES GEOGRAPHICALLY GRANTMAKING GRANTS REPORTED ON SCHEDULE FARE SEPARATELY TRACKED IN THE ACCOUNTING SYSTEM, CATEGORI

Additional Data	a				6365 DRD UNIVERSITY BO LELAND STANFORD					
Form 990 Schedu (a) Region	(b) l offic	t I - Ac Number oces in the region	f (c) Number of	The United States (d) Activities conducted in region (by type) (i e, fundraising, program services, grants to recipients located in	(e) If activity listed is a program servi describe specific ty service(s) in regi	ıce, pe of	(f) Total ex for re			
East Asia and the Pac Europe (Including Icel and Greenland) North America			5 23 F	the region) Program Services Program Services	STUDY ABROAD STUDY ABROAD STUDY ABROAD			3,202,798 5,400,144 44,020		
Russia and the Newly Independent States South America			1 3 F	Program Services	STUDY ABROAD STUDY ABROAD			572,861 811,976		
Sub-Saharan Africa East Asia and the Pac	ıfıc		1 5 1		STUDY ABROAD STUDY ABROAD EDUCATION CONFERENCES			37,147 786,779 155,147		
Europe (Including Icel and Greenland) Europe (Including Icel and Greenland) North America			F	Program Services	EDUCATION EXECUTIVE EDUCATION TRAV		:	100,137 1,583,969 285,812		
South America East Asia and the Pac Europe (Including Icel			F		EDUCATION TRAV	EL		343,115 382,810 287,012		
South A merica South Asia Sub-Saharan Africa			F	Program Services	RESEARCH RESEARCH			44,346 66,872 145,897		
East Asia and the Pac Europe (Including Icel and Greenland)			F	Program Services Program Services	RESEARCH SUB-AW	'A R D		3,354,470		
East Asia and the Pac			1	Program Services	RESEARCH SUB-AW RESEARCH CONSTRUCTION ACADEMIC CONFERENCE	AKD	:	142,914 1,121,112 351,467		
Europe (Including Icel and Greenland) Middle East and North Africa North America			F		ACADEMIC CONFERENCE ACADEMIC CONFERENCE ACADEMIC CONFERENCE			251,136 21,476 31,433		
South America South Asia Sub-Saharan Africa			F	Program Services	ACADEMIC CONFERENCE ACADEMIC CONFERENCE ACADEMIC CONFERENCE			13,453 9,702 26,557		
Central A merica and the Caribbean East Asia and the Pace Europe (Including Icel and Greenland)	ıfıc		F		EDUCATION EDUCATION			135,883 2,881,806 5,238,493		
Middle East and North Africa North America			F	-	EDUCATION EDUCATION EDUCATION			477,118 994,330 100,041		
South America South Asia Sub-Saharan Africa			F	Program Services Program Services Program Services	EDUCATION EDUCATION EDUCATION			468,021 571,862 418,786		
Central America and the Caribbean East Asia and the Pac Europe (Including Icel	ıfıc		F	Program Services	LIBRARIES LIBRARIES LIBRARIES			2,100 47,007		
and Greenland) Middle East and North Africa North America			į	Program Services Program Services	LIBRARIES			2,490		
Russia and the Newly Independent States South America Sub-Saharan Africa			F	Program Services	LIBRARIES LIBRARIES LIBRARIES			12,598 5,837 2,405		
Central A merica and the Caribbean East Asia and the Pac Europe (Including Icel and Greenland)	ıfıc and		F	Program Services Program Services	RESEARCH RESEARCH			53,811 1,809,200 5,105,654		
Middle East and North Africa North America Russia and the Newly Independent States		-	F	Program Services	RESEARCH RESEARCH			176,944 658,175 98,672		
South A merica South Asia Sub-Saharan Africa			F	Program Services	RESEARCH RESEARCH RESEARCH			193,891 130,911 347,069		
Central America and the Caribbean East Asia and the Pac Europe (Including Icel and Greenland)	ıfıc		F	Program Services Program Services Program Services	CLINICAL ACTIVIT	IES		6,470 41,261 43,996		
Middle East and North Africa North America South Asia			F	Program Services Program Services Program Services	CLINICAL ACTIVITE CLINICAL ACTIVITE CLINICAL ACTIVITE	IES		2,889 63,364 7,523		
Sub-Saharan Africa Central America and ti Caribbean East Asia and the Pac			F		CLINICAL ACTIVIT	NS		4,151 6,285 119,088		
Europe (Including Icel and Greenland) Middle East and North Africa North America	and		F	Program Services	EXTERNAL RELATIO) NS		224,677 3,718 28,787		
South America South Asia			F	Program Services Program Services	EXTERNAL RELATIO) NS) NS		7,359		
Central America and to Caribbean East Asia and the Pac	ıfıc		F	Program Services	RECRUITMENT/ADM	11SSIONS 11SSIONS		47,051 2,328 95,078		
Europe (Including Icel and Greenland) Middle East and North Africa North America			F	Program Services Program Services Program Services	RECRUITMENT/ADM RECRUITMENT/ADM	1ISSIONS		18,331		
Russia and the Newly Independent States South America South Asia			F		RECRUITMENT/ADM RECRUITMENT/ADM	1ISSIONS		5,573 13,399 12,734		
Sub-Saharan Africa Central America and ti Caribbean East Asia and the Pac			F		RECRUITMENT/ADM ADMINISTRATION ADMINISTRATION	ISSIONS		3,148 17,366 53,234		
Europe (Including Icel and Greenland) Middle East and North Africa North America			F	Program Services Program Services Program Services	ADMINISTRATION ADMINISTRATION ADMINISTRATION			120,293 862 11,306		
Russia and the Newly Independent States South America South Asia			F	Program Services Program Services Program Services	ADMINISTRATION ADMINISTRATION ADMINISTRATION			1,856 20,412 10,753		
Central America and the Caribbean East Asia and the Pac Europe (Including Icel	ıfıc]	Investments Investments	FOREIGN TRAVEL FOREIGN TRAVEL FOREIGN TRAVEL			10,268 46,264		
and Greenland) Middle East and North Africa North America]	Investments Investments	FOREIGN TRAVEL			2,615 7,369		
Russia and the Newly Independent States South America South Asia]	Investments Investments	FOREIGN TRAVEL FOREIGN TRAVEL			7,219 16,207 27,643		
Europe (Including Icel and Greenland) Middle East and North Africa	and		1	Fundraising Fundraising Fundraising	FOREIGN TRAVEL FOREIGN TRAVEL			226,777 40,982 109		
North America East Asia and the Pac Europe (Including Icel and Greenland)			F	Fundraising Fundraising Fundraising	FOREIGN TRAVEL FOREIGN TRAVEL			5,231 143,247 59,481		
East Asia and the Pac Europe (Including Icel and Greenland) Middle East and North	and		(Grantmakıng	GRANT-FUNDED SUBAWARDS GRANT-FUNDED SUBAWARDS GRANT-FUNDED		:	940,471 1,181,291 129,908		
North America South America South Asia			(Grantmaking Grantmaking Grantmaking	GRANT-FUNDED SUBAWARDS GRANT-FUNDED SUBAWARDS GRANT-FUNDED		:	30,018		
Sub-Saharan Africa Europe (Including Icel and Greenland) East Asia and the Pac				Grantmaking Grantmaking	SUBAWARDS GRANT-FUNDED SUBAWARDS INTERNSHIP STIPE STIPENDS	NDS		690,924 149,062 279,000		
South Asia Europe (Including Icel and Greenland) East Asia and the Pac	and			Grantmaking Grantmaking	LOAN FORGIVENES FELLOWSHIP RESEARCH	S		5,325 45,000 6,020		
Europe (Including Icel and Greenland) North America				Grantmaking Grantmaking	FELLO WSHIPS RESEARCH FELLO WSHIPS RESEARCH FELLO WSHIPS			5,000		
Central America and the Caribbean	ıfıc		(Grantmaking Grantmaking	RESEARCH FELLOWSHIPS UNDERGRAD RESEA UNDERGRAD RESEA	RCH		5,600 48,725		
Europe (Including Icel and Greenland) Middle East and North Africa North America			(Grantmaking Grantmaking Grantmaking	UNDERGRAD RESEA UNDERGRAD RESEA UNDERGRAD RESEA	RCH		50,046 5,600 5,000		
Russia and the Newly Independent States South America South Asia			(Grantmaking Grantmaking Grantmaking	UNDERGRAD RESEA UNDERGRAD RESEA	RCH		5,600 32,870 5,296		
Sub-Saharan Africa Central America and to Caribbean East Asia and the Pac			(Grantmaking Grantmaking Grantmaking	UNDERGRAD RESEA SERVICE LEARNING	3		37,000 17,000 23,000		
Europe (Including Icel and Greenland) Middle East and North Africa South America				Grantmaking Grantmaking Grantmaking	SERVICE LEARNING SERVICE LEARNING	3		12,750 6,500 5,000		
South Asia Sub-Saharan Africa Central America and ti	he			Grantmaking Grantmaking	SERVICE LEARNING SERVICE LEARNING EARTHQUAKE RELII	6		14,200 64,250 159,500		
Carıbbean	le F Part (b) IRS co section and EIN	ode n (ıf		(d) Purpose of grant	ed States	(f) Mar	nner of oursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV,
	applicabl	Eas	: Asia/Pacific : Asia/Pacific : Asia/Pacific	Sub-award sub-award sub-award	82,439	check/wire	3	- 13110-6		appraisal, other)
		Eas Eas	: Asia/Pacific : Asia/Pacific : Asia/Pacific	sub-award sub-award sub-award	·	check/wire	3			
		Eas Euro	Asia/Pacific pe/Iceland/Greenla		15,000 141,299 25,000	wire check				
		Euro	pe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Iceland/Greenlandpe/Ice	nd sub-award	·	check/wire	3			
		Euro	pe/Iceland/Greenla	nd sub-award	47,443 48,774 72,849	check				
		N ort	th A merica	sub award sub-award	13,199	check check				
		Nort	th A merica	sub-award sub-award	55,093 424,892 235,134	check check				
		N ort	h A merica th A merica	sub-award sub-award	66,909 240,065 6,740	check check				
		N ort	th A merica th A merica	sub-award sub-award	42,000	check/wire	}			
		A frio Sou	th America th Asia	sub-award sub-award sub-award	·	check CHECK/W	TRE			
		Sou	th Asia	sub-award	367,258	wire				

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asıa	sub-award	32,397	check			
		Sub-Saharan Africa	sub-award	60,902	wire			
		Sub-Saharan Africa	sub-award	52,579	wire			
		Sub-Saharan Africa	sub-award	36,647	check/wire			
		Sub-Saharan Africa	sub-award	50,000	wire			
		Sub-Saharan Africa	sub-award	203,196	wire			
		Cent A merica/Caribbean	Earthquake relief- patient care	159,500	check			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number of (d) A mount of cash (e) Manner of cash (f) A mount of non-(g) Description of non-(h) Method of valuation assistance recipients grant disbursement cash assistance cash assistance (book, FMV, appraisal, other) RESEARCH GRANTS -1 5,600 EFT Cent UNDERGRADUATE A merica/Caribbean 9 RESEARCH GRANTS -48,725 EFT East Asia/Pacific UNDERGRADUATE RESEARCH GRANTS -9 50,046 EFT Europe/Iceland/Greenland UNDERGRADUATE RESEARCH GRANTS -1 5,600 EFT Middle East/North UNDERGRADUATE A frica RESEARCH GRANTS -1 5,000 EFT North America UNDERGRADUATE 1 RESEARCH GRANTS -5,600 EFT Russia UNDERGRADUATE RESEARCH GRANTS -6 32,870 EFT South America UNDERGRADUATE RESEARCH GRANTS -1 5,296 EFT South Asia UNDERGRADUATE 6 37,000 EFT RESEARCH GRANTS -Sub-Saharan Africa UNDERGRADUATE 3 17,000 EFT SERVICE LEARNING Cent **FELLOWSHIPS** A merica/Caribbean SERVICE LEARNING 4 23,000 EFT East Asia/Pacific **FELLOWSHIPS** SERVICE LEARNING 2 12,750 EFT Europe/Iceland/Greenland **FELLOWSHIPS** 1 SERVICE LEARNING 6,500 EFT Middle East/North **FELLOWSHIPS** Africa 1 SERVICE LEARNING 5,000 EFT South America **FELLOWSHIPS** 2 SERVICE LEARNING 14,200 EFT South Asia FELLO WSHIPS SERVICE LEARNING 6 64,250 EFT Sub-Saharan Africa FELLO WSHIPS SCHOLARSHIPS 26 279,000 wire East Asia/Pacific INTERNSHIPS STIPENDS 46 149,062 wire Europe/Iceland/Greenland FELLO WSHIP 1 45.000 lwire Europe/Iceland/Greenland RESEARCH GRANTS -1 6,020 check East Asia/Pacific SENIOR SCHOLAR SUPPORT 5 RESEARCH GRANTS -66,316 check Europe/Iceland/Greenland SENIOR SCHOLAR SUPPORT RESEARCH GRANTS -1 5,000 check North America SENIOR SCHOLAR SUPPORT RESEARCH GRANTS -1 24,000 wire South Asia SENIOR SCHOLAR SUPPORT LOAN FORGIVENESS 1 5,325 check South Asia

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DLN: 93493195003231

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

licensing

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

	e of the organization NFORD UNIVERSITY BOA						Employer iden	tification number
	HE LELAND STANFORD JU		Y				94-1156365	
Pai		tivities. Completers are not required			tion answered "Yes" s part.	to Form	990, Part IV	, line 17.
1 a b	Indicate whether the organ Mail solicitations Internet and e-mail so		through a	="	following activities Ch Solicitation of noi Solicitation of gov	n-governn	nent grants	
c d	Phone solicitations In-person solicitations Did the organization have	3	omont w	g	Special fundraisir	ng events		
	or key employees listed in If "Yes," list the ten highes to be compensated at leas	Form 990, Part VII)	or entity entities (ın conne (fundraise	ction with professional ers) pursuant to agreem	fundraisin ents unde	g activities? r which the fur	
	(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contr	er have dy or ol of utions?	(iv) Gross receipts from activity	(or re fundra:	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
Γotal				.▶				
					l .	I		l

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or

Pai	rt II	Fundraising Events. Commore than \$15,000 on Form					repor	ed
			(a) Event #1 UNDER ONE LUNCH (event type)	(b) Event #2 TAILGATES (event type)	(c) O ther Events 6 (total number)	(d) Tot (Add col co		
₽	1	Gross receipts	236,587	28,130	75,186		33	9,903
Revenue	2	Less Charitable contributions	227,087	,			22	7,087
<u>~</u>	3	Gross income (line 1 minus line 2)	9,500	28,130	75,186		11	2,816
	4	Cash prizes						
မှာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs	1,500)	4,200			5,700
ВĞ	7	Food and beverages						
Direct	8	Entertainment						
Δ	9	Other direct expenses .	67,812	94,164	185,943		34	7,919
	10	Direct expense summary Add line	es 4 through 9 in column	(d)	🛌		35	3,619
	11	Net income summary Combine lir						0,803
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1	Gross revenue						
see See	2	Cash prizes						
xpenses	3	Non-cash prizes						
ш	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Г Yes	Г Yes	│ Yes% │ No			
		Direct expense summary Add lines						
	8	Net gaming income summary Comb	bine lines 1, column d, ai	nd line 7	<u> </u>		Yes	No
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain			· · · · · · · · · · · · · · · · · · ·	· 9a		
10a b		re any of the organization's gaming l Yes," Explain	ıcenses revoked, susper	ided or terminated during	the tax year?	10a		
11 12	Is t	es the organization operate gaming a the organization a grantor, beneficiar ned to administer charitable gaming	y or trustee of a trust or	a member of a partnersh	ıp or other entity	12	-FZ\ 20	

		Yes	No				
13	Indicate the percentage of gaming activity operated in						
а	The organization's facility						
b	An outside facility						
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records						
	Name 🟲						
	Address -						
15a	Does the organization have a contract with a third party from whom the organization receives gaming						
	revenue?	.					
b	If "Yes," enter the amount of gaming revenue received by the organization 🟲 \$ and the						
	amount of gaming revenue retained by the third party 🟲 \$						
c	If "Yes," enter name and address						
	Name 🟲						
	Address F						
16	Gaming manager information						
10	Gaining manager miormation						
	Name 🟲						
	Gaming manager compensation 🕨 \$						
	Description of services provided 🗠						
	Director/officer Employee Independent contractor						
	bliectoryolicei i Employee i Independent contractor						
L7	Mandatory distributions						
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to						
	retain the state gaming license?						
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent						
	ın the organization's own exempt activities during the tax year 🟲 💲		I				

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DLN: 93493195003231 OMB No 1545-0047

Schedule I

(Form 990)

Governments and Individuals in the United States

Grants and Other Assistance to Organizations,

Department of the Treasury Internal Revenue Service Attach to Form 990						Open to Public Inspection			
Name of the organization		Employer identification number 94-1156365							
STANFORD UNIVERSITY BOARD O OF THE LELAND STANFORD JUNIO									
Part I General Information	on on Grants and	l Assistance				•			
1 Does the organization maintain the selection criteria used to av	vard the grants or as	sistance?					✓ Yes 🗀		
2 Describe in Part IV the organiz	<u> </u>	<u> </u>							
Form 990, Part IV, lin Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000	. Use		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grad or assistance		
See Additional Data Table									
2 Enter total number of section 53 Enter total number of other orga						<u> </u>	22		

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS FOR STUDENTS	12574	311,594,917			
See Addıtıonal Data Table					
			_		
		·	·		

Part IVSupplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.IdentifierReturn ReferenceExplanationGRANTS AND ASSISTANCEPart I, Line 2GRANTS AND ALLO CATIONS REFLECT NON-COMPENSATORY SUPPORT PROVIDED TO STUDENTS IN VARIOUS FORMS STANFORD IS COMMITTED TO A NEED-BLIND ADMISSIONS POLICY, ADMITTING QUALIFIED

7100101711102	TO KITO OT AND TO CONTINUE DE LA MELLO DE LA MONTO DE LO MANTE DE LA MELLO DE LA MONTO DE LO MANTE DE LA MONTO DELLO MONTO DE LA MONTO DELLO MONTO DELLO MONTO DELLO MONTO DE LA MONTO DE LA MONTO DELLO MONTO DELLO MONTO DELLO MONTO DE LA MONTO DE LA MONTO DELLO MONTO DEL
	UNDERGRADUATES WITHOUT REGARD TO THEIR ABILITY TO PAY AND TO PROVIDE A COMPREHENSIVE
	FINANCIAL AID PROGRAM FOR ALL ADMITTED undergraduates WHO HAVE NEED AS DETERMINED BY THE
	UNIVERSITY AND WHO MEET OTHER REQUISITE CONDITIONS FOR FINANCIAL AID MORE THAN 80% OF
	UNDERGRADUATES RECEIVED SOME FORM OF FINANCIAL ASSISTANCE DURING THE TAX YEAR AS WELL AS 85%
	OF ALL GRADuATE STUDENTS from stanford and other sources THE TOTAL FINANCIAL AID INCLUDES \$227,439,266
	IN MERIT AND NEED-BASED SCHOLARSHIPS AND FELLOWSHIPS AN ADDITIONAL \$85,068,486 REFLECTS
	AMOUNTS PAID FOR ADDITIONAL FINANCIAL SUPPORT TO STUDENTS, INCLUDING PAYMENTS FOR HEALTH
	INSURANCE, LIVING EXPENSES, AND SUPPORT OF POSTDOCTORAL FELLOWS GRANT RECOMMENDATIONS FROM
	DONOR ADVISED FUNDS ARE REVIEWED AND APPROVED BY SENIOR OFFICIALS IN THE OFFICE OF DEVELOPMENT
	AND THE CONTROLLER'S OFFICE PRIOR TO PAYMENT SUB-GRANTS Stanford occasionally receives grant support that
	is disbursed to other individuals or entities per the terms of the award. In most cases, prior to the grant to Stanford, the
	University will provide the granting entity with a list of such contemplated recipients. Generally, as work on the grant
	progresses, changes to these recipients must be approved by the granting agency. Due to these review requirements of the
	granting agency, Stanford does not report such payments on Form 990 as sub-grants when made to a domestic recipient

Software ID: Software Version:

EIN: 94-1156365

Name: STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY

Form 990,Schedule I, Par	t II, Grants an	d Other Assistance	e to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR SCHOOL CHOICE1660 L ST NW STE 1000 C/O FONDA ANDERSON Washington, DC 20036	52-2111508	501(c)(3)	25,000				Research and Educ
UCSB FOUNDATIONUCSB DEV OFFICE SANTA BARBARA, CA 93106	23-7314834	501(c)(3)	100,000				public univ support
MAKING WAVES EDUCATION PROGRAM50 S LASALLE STREET c/o Glenn Holsclaw Executive Direc CHICAGO,IL 60603	94-3267851	501(c)(3)	100,000				education assistance program
SANTA BARBARA COTTAGE HOSPITAL FDnPO BOX 689 C/O SUZANNE RYAN CURRAN DALSTON Los Angeles,CA 93102	95-3802238	501(c)(3)	250,000				Hospital
SANTA BARBARA CENTER FOR PERFORMING ARTS14 E CARILLO ST SB,CA 931016727	95-3847102	501(c)(3)	20,000				THEATRE
OAKLAND CHILDREN'S FAIRYLAND699 BELLEVUE AVENUE c/o CJ Hirschfield Executive Direc OAKLAND,CA 94610	94-3209054	501(c)(3)	25,000				CHILDREN'S PARK
GIRLS INC OF ALAMEDA COUNTY13666 E 14TH STREET C/O JANELLE CAVANAGH CDO SAN LEANDRO, CA 94578	94-1558073	501(c)(3)	15,000				YOUTH SERVICES
Juvenile diabetes research foundation49 STEVENSON STREET SUITE 1200 SAN FRANCISCO, CA 94105	23-1907729	501(c)(3)	10,000				Research and Educ
ARTHRITIS FOUNDATION- NORTHERN CALIFORNIA 657 MISSION ST SUITE 603 C/O TERRY BYRNES SAN FRANCISCO, CA 94105	94-1212126	501(c)(3)	10,000				GENERAL GRANT
Lincoln Child Center4368 Lincoln ave C/O CRISTINE STONER- MERTZ oakland, CA 94602	94-1156501	501(c)(3)	10,000				YOUTH SERVICES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
VILLANOVA University800 LANCASTER AVE OFFICE OF UNIVERSITY ADVANCEMENT VILLANOVA,PA 19085	23-1352688	501(c)(3)	20,000				SCHOLARSHIP FUND		
EMBRACE20170 THELMA AVE C/O LINUS LIANG SARATOGA,CA 95070	83-0509261	501(c)(3)	20,000				GENERAL GRANT		
SCHWAB CHARITABLE FUND211 MAIN STREET SAN FRANCISCO,CA 94105	31-1640316	501(c)(3)	268,500				GENERAL GRANT		
UNION COLLEGE807 UNION ST C/O STEPHEN DARE VP COLLEGE RELATI SCHENECTADY, NY 12308	20-0163689	501(c)(3)	35,000				ACADEMIC AFFAIRS		
MENLO PARK PRESBYTERIAN CHURCH 950 SANTA CRUZ AVE MENLO PARK, CA 94025	94-1167435	501(c)(3)	100,000				GENERAL GRANT		
PIONEER FUND733 BROAD STREET OFFICE OF COLLEGE ALUMNI RELATIONS GRINNELL, IA 501121690	42-0680387	501(C)(3)	20,000				GENERAL GRANT		
MENLO PARK ATHERTON EDUCATION FOUNDATION PO BOX 584 MENLO PARK, CA 940260584	94-2871701	501(c)(3)	10,000				GENERAL GRANT		
VALLEY PRESBYTERIAN CHURCH945 PORTOLA ROAD PORTOLA VALLEY,CA 94028	94-1556664	501(C)(3)	7,500				TEKAX WATER PROJECT		
COMPUTER HISTORY MUSEUM1401 N SHORELINE BLVD MNT VIEW,CA 94043	77-0507525	501(C)(3)	20,000				GENERAL GRANT		
VENTURE PHILANTHROPY PARTNERS1201 15TH STREETNW SUITE 420 WASHINGTON, DC 20005	31-1713618	501(c)(3)	200,000				GENERAL GRANT		

<u>Form 990,</u> Schedule I, Par	<u>'t II, Grants and</u>	<u>l Other Assistance</u>	to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STRIVE FOR COLLEGE COLLABORATIVE3089 22ND ST 301 SAN FRANCISCO,CA 94110	26-2499144	501(C)(3)	20,000				GENERAL GRANT
GRINNELL COLLEGE733 BROAD STREET OFFICE OF DEVELOPMENT GRINNELL,IA 501121690	42-0680387	501(C)(3)	10,000				ATHLETICS

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization STANFORD UNIVERSITY BOARD OF TRUSTEES	Employer identification number						
OF THE LELAND STANFORD JUNIOR UNIVERSITY	94-1156365						
Part I Questions Regarding Compensation							
	_		Yes	N			
94-1150305				$\overline{}$			

			_		Yes	Νo
1a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	굣	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe			1b	Yes	
2	Did the organization require substantiation prior to reim officers, directors, trustees, and the CEO/Executive Di		· · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that		у			
	Compensation committee		Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Par or a related organization	t V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	mer	nt?	4a	Yes	
Ь	Participate in, or receive payment from, a supplemental	lnor	iqualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-base	d co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must o	com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	e 1 a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	e 1 a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 67 If "Yes," desc			7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re in Part III				V = -	
				8	Yes	
9	If "Yes" to line 8, did the organization also follow the re section 53 4958-6(c)?	butt	able presumption procedure described in Regulations	9	Yes	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name (B) Breakdown of W-2 and/or 1099-MISC compensation (I) Base compensation (I) Davis compensation (II) Davis compensation (III) Other comp								
(i) Base incentive reportable compensation reportable compensation Form 990 or Form 990-EZ	(A) Name	(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and		(E) Total of columns	
See Additional Data Table		(i) Base compensation	ıncentive	(iii) Other reportable compensation		benefits	(B)(ı)-(D)	Form 990 or
	See Additional Data Table							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanat ion
PART I, LINE	TRAVEL POLICY	STAMFORD UNIVERSITY TRAVEL POLICY GENERALLY REQUIRES ALL EMPLOYEES TO USE THE MOST ECONOMICAL MODE OF TRANSPORTATION A VALIABLE CONSISTENT WITH THE AUTHORIZED BUSINESS PURPOSE OF THE TRAVEL IN ORDER TO BE REIMBURSED ON A TAX-FREE BASIS EMPLOYEES ARE REQUIRED TO COMPLY WITH THE ACCOUNTABLE PLAN RULES UNDER IT C SECTION 62 UNIVERSITY OFFICERS AND OTHER INDIVIDUALS ENUMERATED IN SCHEDULE JARE FULLY SUBJECT TO THE SAME POLICIES AND PROCEDURES AS ANY OTHER EMPLOYEE OF THE UNIVERSITY ON RARE OCCASIONS, FIRST CLASS TRAVEL WILL BE AUTHORIZED BASED ON MEDICAL NEED OR OTHER PROVOST AND MUST BE CONSISTENT WITH THE AUTHORIZED BUSINESS PURPOSE OF THE TRAVEL IN ORDER TO BE NON-TAXABLE PRESIDENT AND PROVOST HOUSING AS A CONDITION OF HIS EMPLOYMENT AS PRESIDENT OF THE AUVINE NOTBER TO BE NON-TAXABLE PRESIDENT AND PROVOST HOUSING AS A CONDITION OF HIS EMPLOYMENT AS PRESIDENT OF THE UNIVERSITY AND FOR THE UNIVERSITY, MR HENNESSY IS REQUIRED TO LIVE IN THE PRESIDENT'S HOME ON THE CAMPUS OF THE UNIVERSITY AND FOR THE UNIVERSITY AS A CONDITION OF HIS EMPLOYMENT AS PROVOST OF THE UNIVERSITY AND FOR THE UNIVERSITY OF THE UNIVERSITY AND FOR THE UNIVERSITY
7 AND PART II, COLUMN B (II)	COMPENSATION OF FACULTY IN THE STANFORD SCHOOL OF MEDICINE	TOTAL COMPENSATION TOTAL COMPENSATION FOR FACULTY IN THE SCHOOL OF MEDICINE IS MADE UP OF THE FOLLOWING INTEGRAL COMPONENTS SALARY AND BENEFITS, ADMINISTRATIVE SUPPLEMENTS, AND BONUSES AWARDED UNDER DEPARTMENTAL PLANS BASE SALARY IS BASED ON A CADEMIC RANK (E.G., PROFESSOR, ASSISTANT PROFESSOR) A VARIABLE COMPONENT OF SALARY IS DETERMINED PRIMARILY BY THE CONTRIBUTION OF THE INDIVIDUAL TO THE DEPARTMENT/DIVISION AND SECONDARILY BY THE CLINICAL SPECIALTY OF THE FACULTY MEMBER OTHER SALARY SUPPLEMENTS ARE OCCASIONALLY USED TO PROVIDE FOR COMPENSATION GIVEN UP BY A FACULTY MEMBER WHEN ASSUMING A POSITION AT STANFORD ADMINISTRATIVE SUPPLEMENTS ARE PAID TO FACULTY WHO TAKE ON DUTIES WHICH ARE OUTSIDE THEIR USUAL FACULTY RESPONSIBILITIES AND OUTSIDE NORMAL COMMITTEE WORK INCENTIVE BONUSES ARE CONSIDERED A FUNDAMENTAL COMPONENT OF TOTAL COMPENSATION THEY ARE PAID OUT BY THE DEPARTMENTS BASED ON THE DEPARTMENT'S INCENTIVE BONUS PLAN MEASURING THE FACULTY'S EFFORTS IN RESEARCH, TEACHING, CLINICAL, AND/OR ADMINISTRATIVE LEADERSHIP AREAS AS DEFINED BY THE PLAN IN ADDITION, THE DEAN HAS A BONUS PLAN FOR CLINICAL CHAIRS BASED ON A CHIEVEMENT OF LEADERSHIP GOALS SOME DEPARTMENTS HAVE "ON-CALL" AND "COVERAGE" BONUSES TO PROVIDE COMPENSATION FOR A FACULTY MEMBER'S PROVIDING OFF-HOURS COVERAGE VARIABLE COMPENSATION OF INVESTMENT PROFESSIONALS A PORTION OF THE COMPENSATION PAID TO LISTED INVESTMENT PROFESSIONAL EMPLOYEES IS BASED ON A COMBINATION OF THREE FACTORS THREE YEAR ANNUALIZED PERFORMANCE VERSUS THE PERFORMANCE OF THE NINETEEN LARGEST COLLEGE AND ENDOWMENT INVESTMENT POOLS IN THE UNITED STATES, AND INDIVIDUAL PERFORMANCE VARIABLE COMPENSATION OF OFFICERS AND OTHERS OFFICERS AND OTHERS ARE ELIGIBLE TO RECEIVE BONUSES AND INCENTIVE COMPENSATION BASED ON PERFORMANCE, AS ENUMERATED IN PART II, COLUMN B(II) PART I, LINE 8 CERTAIN OFFICERS ARE SERVING UNDER THE PROVISIONS OF THEIR INITIAL CONTRACTS TO SERVE AS OFFICERS OF THE UNIVERSITY, WHICH PRINCIPALLY ESTABLISHES THEIR COMPENSATION, RESPONSIBILITIES, AND DUTIES
,	HOUSING ASSISTANCE	OTHER REPORTABLE COMPENSATION IN PART II, COLUMN B(III) INCLUDES HOUSING ASSISTANCE AND OTHER MISCELLANEOUS COMPENSATION IN ADDITION, STANFORD HAS PROVIDED VARIOUS ITEMS OF "LISTED PROPERTY" (E.G. CELLULAR PHONES, COMPUTERS, AND PERIPHERALS) TO THE ABOVE LISTED EMPLOYEES PRINCIPALLY FOR THEIR BUSINESS USE Part II, Columns C AND D STANFORD OFFICERS ACCRUE FUTURE BENEFITS THAT ARE AVAILABLE TO ALL STANFORD EMPLOYEES, SUCH AS POST-RETIREMENT MEDICAL INSURANCE AND TUITION BENEFITS, AND listed persons WHO ARE ALSO FACULTY ACCRUE FUTURE FACULTY BENEFITS SUCH AS SABBATICAL AND TENURE BUYOUT PROVISIONS THESE BENEFITS ARE SUBJECT TO CERTAIN ELIGIBILITY REQUIREMENTS SUCH AS AGE, YEARS OF SERVICE, AND EMPLOYEE CLASSIFICATION FOR SOME BENEFIT PLANS, THE UNIVERSITY RESERVES THE RIGHT TO CHANGE ELIGIBILITY REQUIREMENTS AND/OR THE NATURE AND EXTENT OF THE BENEFIT BEING PROMISED THE VALUE OF THESE BENEFITS IS REPORTED FOR EACH OFFICER IN THE YEAR, IF ANY, SUCH BENEFITS ARE RECEIVED INCLUDED IN PROFESSOR FEREJOHN'S COMPENSATION IS A PAYMENT OF \$750,357 IN RETIREMENT INCENTIVES

Software ID: Software Version:

EIN: 94-1156365

Name: STANFORD UNIVERSITY BOARD OF TRUSTEES

OF THE LELAND STANFORD JUNIOR UNIVERSITY

Form 990, Schedule J	, Part I	I - Officers, Direc	tors, Trustees, Ke	y Employees, and	l Highest Compens	sated Employees		
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
John Hennessy	(I) (II)	652,423 0	0	18,353 0	184,231 0	130,562	985,569 0	0
John etchemendy	(1) (11)		0	150 0	204,634	69,849 0	743,994 0	0
randall livingston	(ı) (ıı)		0	150	84,500	23,208	582,516	0
John B Ford	(1)	11,000	511,595	2,721	0	9,967	535,283	406,088
martın shell	(1)	375,325	20,000	10,073	104,500	26,244	536,142	0
debra zumwalt	(1)	489,244	0	150	153,250	26,726	669,370	0
robert c reidy	(1)	335,664	270,000	0	173,223	28,224	807,111	0
davıd demarest	(1)	308,960	10,000	1,621	74,500	26,757	421,838	0
howard wolf	(1)	283,430	46,950	0	23,813	48,798	402,991	0 0
william madia	(1)	197,054	40,000	300	10,474	3,384	251,212	0
Diane Peck	(1)	285,280	26,000	250	24,500	17,774	353,804	0
John Powers	(1)	756,367	366,216	0	250,711	21,895	1,395,189	0
Philip A Pizzo	(1)	582,187	0	19,583	229,500	24,615	855,885	0
Rıchard Saller	(1)	431,815	10,000	49,107	15,877	10,529	517,328	0
Frank Hanley	(1)	392,301	1,075,000	0	224,500	19,449	1,711,250	0
Gary Steinberg	(1)	565,930	628,536	0	23,510	19,549	1,237,525	0
Thomas M Krummel	(1)	501,560	472,638		24,500	35,879	1,035,616	0
Mıchael Edwards	(1)	410,063	535,011	0	25,447	19,465	989,986	0
Vadılaya M Reddy	(1)	272,135	535,410	9,444	24,500	19,039	860,528	0
Edward E Manche	(1)	445,033	129,000	7,539	23,655	27,146 0	632,373	0
Amın A Mılkı	(1)	295,780	268,426	9,292	24,500	25,734 0	623,732	0
JOHN A FEREJOHN	(1)		801,357	0	21,253	12,767	1,007,300	750,357

DLN: 93493195003231

Open to Public

Inspection

OMB No 1545-0047

Schedule K **Supplemental Information on Tax Exempt Bonds** (Form 990)

Department of the Treasury Internal Revenue Service

3

7

10

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Employer identification number

94-1156365

187,550,000

Name of the organization STANFORD UNIVERSITY BOARD OF TRUSTEES

OF THE LELAND STANFORD JUNIOR UNIVERSITY Part I Bond Issues (h) O n (g) Defeased Behalf of (f) Description of Purpose (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price Issuer Yes No Yes No CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY CP 52-1705592 13018AAA8 05-22-2008 300,000,000 | SEE SCHEDULE 0 Х Χ CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY S 181,200,000 SEE SCHEDULE O Х 52-1705592 130175P89 06-24-2004 Χ CALINFORNIA EDUCATIONAL SEE SCHEDULE O FACILITIES AUTHORITY T-1&3 52-1705592 130178JD9 09-06-2007 153,277,097 Χ Х CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY T-4 188,501,621 SEE SCHEDULE O Χ Х 52-1705592 130178NH5 05-15-2008 CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY T-5 52-1705592 130178TQ9 08-04-2009 59,147,724 SEE SCHEDULE O Х Χ Part II **Proceeds** С Ε В D Total proceeds of issue 59,148,032

300,218,010 182,432,950 156,107,104 188,507,302 Gross proceeds in reserve funds

Other unspent proceeds 4 Issuance costs from proceeds 5 992,205 992,205 661,216 951,621 1,644 Working capital expenditures from proceeds 6

125,619,314 8 Year of substantial completion 2010 2006 2009 2009 2003

Yes No Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Х Χ Х Х Х

Were the bonds issued as part of an advance refunding issue? Χ Χ Χ Χ Χ Has the final allocation of proceeds been made? Χ Χ Х Χ Χ

11 Does the organization maintain adequate books and records to support 12 Х Χ Χ Χ the final allocation of proceeds?

Private Business Use Part III

Proceeds in refunding or defeasance escrows

Capital expenditures from proceeds

		Α		В		С		D		E	
		Yes	No								
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		х		х		х				
2	Are there any lease arrangements with respect to the financed property which may result in private business use?	х		х		х					

180,207,795

152,615,881

Χ

58,644,018

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

Department of the Treasury Internal Revenue Service

► Attach to Form 990. See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

STANFORD UNIVERSITY BOARD OF TRUSTEES Name of the organization Employer identification number OF THE LELAND STANFORD JUNIOR UNIVERSITY 94-1156365 Part I **Bond Issues** (h) On (b) Issuer EIN (c) CUSIP# (d) Date issued (g) Defeased (a) Issuer name (e) Issue price (f) Description of purpose behalf of issuer Yes No Yes No. A - alif file ED0 att hal facilitie - auth fit. U-1 F_-170FF --EE HEDULE В С D **Proceeds** Part II В C D Ε Α 251,702,539. 3 Proceeds in refunding or defeasance escrows 60,262,784. 1,631,228. 189,737,216. 2010 Yes No Yes Yes Yes Nο Nο Nο Yes No Χ **9** Were the bonds issued as part of a current refunding issue? 10 Were the bonds issued as part of an advance Χ Χ 12 Does the organization maintain adequate books and Χ records to support the final allocation of proceeds? Part III **Private Business Use** Α В С D Ε 1 Was the organization a partner in a partnership, or a Yes No Yes No Yes No Yes No Yes No member of an LLC, which owned property financed by Χ tax-exempt bonds?............ 2 Are there any lease arrangements with respect to the

Χ

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

financed property which may result in private business use?

Schedule K (Form 990) 2009

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

	Α		В		С		D		E	
3a Are there any management or service contracts with	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
respect to the financed property which may result in private business use?		Х								
b Are there any research agreements with respect to the financed property which may result in private business use?	Х									
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х									
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0.0000%		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0.0000%		%		%		%		%
6 Total of lines 4 and 5		0.0000%		%		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X									
Part IV Arbitrage										
	Α			В		С	ļ	D	I	E
Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	No X	Yes	No	Yes	No	Yes	No	Yes	No
		X								
2 Is the bond issue a variable rate issue?		X								
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?		X								
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair										
market value of the GIC satisfied?										
Were any gross proceeds invested beyond an										
available temporary period?		X								
6 Did the bond issue qualify for an exception to rebate?		Х								

Schedule K (Form 990) 2009

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

			A	E	В		С)		E
		Yes No Yes No Y		Yes	Yes No		No	Yes	No		
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х		х		Х				
3b	Are there any research agreements with respect to the financed property which may result in private business use?	Х		х		х					
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х	x x			х					
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %	0 %			0 %				
6	Total of lines 4 and 5	0 %			0 %		0 %				
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	х		х		Х					
Do	4 TV Arbitrage		<u> </u>	ı	I	I	I	l	1	1	<u> </u>

Part IV Arbitrage

	Arbitrage		A		В		С	D		E	
		Yes	No								
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x		х		x		x		X
2	Is the bond issue a variable rate issue?	Х		Х			Х		Х		Х
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		х		х		х		х		x
b	Name of provider										l
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х		Х
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		х		х
6 Did the bond issue qualify for an exception to rebate?		Х			×		x		x	x	

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DLN: 93493195003231

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY

Employer identification number 94-1156365

Part I Excess Benefit Train Complete if the organizat										e 40b	
1 (a) Name of disq				•	(b) Desci				•		rrected?
1 (a) Name of alsq	aannea	person			(b) Desci	триоп	UI LIAIISA	Ction		Yes	No
2 Enter the amount of tax impos	ed on th							ear under			
section 4958	• •								\$		
3 Enter the amount of tax, If any	, on line	2, abo	ve, reimbursed	by th	ie organization .			. •	\$		
Part II Loans to and/or	From	Intere	sted Perso	ns.							
Complete if the organi	zation a	nswered	"Yes" on For	m 990	, Part IV, line 26,	or For	m 990-E			_	
	(b) Lo	oan to				(0)	In	(f) Appro		(g)Writte	s n
(a) Name of interested person and	or fro		(c)O riginal		(d)Balance due		ult?	by boar		agreemer	
purpose	organiz	1	principal am	ount				commit	tee?		
	То	From				Yes	No	Yes	No	Yes	No
See Additional Data Table											
									+		
									+		
Total				- \$	4,706,059						
Part IIII Grants or Assista											
Complete if the orga	ınızatıc						27.				
(a) Name of interested pers	on	(1			een interested pers ganization	ion	(c) A m	ount of gr	ant or typ	e of assist	ance
					3						
Part IV Business Transact	tions 1	involv	ing Intoros	to d	Darconc						
Complete if the orga						line 2	28a, 28t	o, or 280	C.		
) Relationship		,		,	,		(e) Sh	arıng of
(a) Name of interested person			veen interested	d	(c) A mount of	10	d) Descr	ption of t	ransactio	n I -	zation's
(1)	••	1	rson and the organization		transaction	`	.,	, p		Teve	nues?
SEE SCHEDULE O		 		+		_				Yes	No
<u> </u>				+							1
		†									1

Additional Data

Software ID: Software Version:

EIN: 94-1156365

Name: STANFORD UNIVERSITY BOARD OF TRUSTEES

OF THE LELAND STANFORD JUNIOR UNIVERSITY

Form 990, Schedule L, Part II - Loans to and from Interested Persons

(a) Name of interested person and purpose	or fro	om the principal amoun station?		(d) Balance due \$	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	То	From			Yes	No	Yes	No	Yes	No
ROBERT REIDY HOUSING		х	200,000	200,000		No	Yes		Yes	
RICHARD SALLER HOUSING		х	600,000	303,515		No	Yes		Yes	
RICHARD SALLER HOUSING		х	300,000	300,000		No	Yes		Yes	
RICHARD SALLER HOUSING		х	300,000	210,000		No	Yes		Yes	
RICHARD SALLER HOUSING		х	25,000	25,000		No	Yes		Yes	
PHILIP PIZZO HOUSING		х	1,500,000	1,500,000		No	Yes		Yes	
PHILIP PIZZO HOUSING		х	590,000	530,044		No	Yes		Yes	
PHILIP PIZZO HOUSING		x	600,000	600,000		No	Yes		Yes	
PHILIP PIZZO HOUSING		х	125,000	37,500		No	Yes		Yes	
MARTIN SHELL HOUSING		x	1,000,000	1,000,000		No	Yes		Yes	

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

94-1156365

Pā	Types of Property							
		(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d Method of d rever	etermı	nıng	
	A	applicable		1 g	N. /A			
	Art—Works of art	X	15		N/A			
	Art—Historical treasures	X	1	0	N/A			
	Art—Fractional interests							
4	Books and publications	X		0	N/A			
	Clothing and household goods							
	Cars and other vehicles							
7	'							
	Intellectual property							
	Securities—Publicly traded .	X	1,349		MARKET VALUE			
	Securities—Closely held stock .	X	10	12,897,147	APPRAISAL			
11	Securities—Partnership, LLC, or trust interests	×	1	20,750	APPRAISAL			
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .	Х		12,294,918	APPRAISAL			
16	Real estate—Commercial	Х		584,738	APPRAISAL			
17	Real estate—Other							
18	Collectibles	Х	1	0	N/A			
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other►(<u>HORSES</u>)	Х	5	0	N/A			
26	Other \blacktriangleright (EQUIPMENT)	X	2	117,197	RETAIL			
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization compl	, ,			29			36
							Yes	No
30a	During the year, did the organization	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holdıng p	period?			30a		No
b	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	tacceptand	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part • • •	ies or related organizations	to solicit, process, or sell i	non-cash	32a		Νο
ь	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	Explanation
PART I, COLUMN (B)	IN COLUMN B, STANFORD IS REPORTING THE NUMBER OF CONTRIBUTIONS	PART I, LINE 33 NON-CASH CONTRIBUTIONS - GENERAL EXPLANATION STANFORD DOES NOT INCLUDE IN GIFT REVENUE TOTALS THE FOLLOWING TYPES OF NON-CASH CONTRIBUTIONS - ART - BOOKS AND PUBLICATIONS - COLLECTIBLES - HORSES IN MANY CASES, VALUES OF SUCH ITEMS ARE DIFFICULT AND EXPENSIVE TO ASCERTAIN AND CONFIRM FOR FINANCIAL STATEMENT PURPOSES

Schedule M (Form 990) 2009

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009

Open to Public Inspection

Name of the organization STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY Employer identification number

94-1156365

ldentifier	Return Reference	Explanation
Index of Responses Appearing in Schedule O		Form Reference Description ====================================

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4A	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS, CONTINUED FROM PAGE 3	(EXPENSES \$1,104,447,062 INCLUDING GRANTS OF \$30,269,034, REVENUE \$673,178,004) INSTRUCTION AND DEPARTMENTAL RESEARCH INCLUDES THE SALARIES, FRINGE BENEFITS AND SUPPLIES NECESSARY TO TEACH ABOUT 15,300 STUDENTS, INCLUDING 8,900 UNDERGRADUATE AND 8,400 INCESSARY TO TEACH ABOUT 15,300 STUDENTS, STALDING 8,900 UNDERGRADUATE AND ROPE ESSIONAL SCHOOL STUDENTS STANPORDS 1,900 PERSON FACULTY NICLUDES 16 NOBEL PRIZE WINNERS AND FOOD REULIZER PRIZE WINNERS STANPORD 1,900 PERSON FACULTY NICLUDES 16 NOBEL PRIZE WINNERS STANPORDS 1,900 PERSON FACULTY SCHOOL PRIZE WINNERS AND SCENCES, LAW, AND MEDICINE CURRENT MULTIDISCIPLINARY Y INITIATIVES FOCUS ON WORLDWIDE PROBLEMS CHANCE AND SCIENCES, LAW, AND MEDICINE CURRENT MULTIDISCIPLINARY Y INITIATIVES FOCUS ON WORLDWIDE PROBLEMS NICLUS TO THE PROBLEMS STANPORD AND SCIENCES, LAW, AND MEDICINE CURRENT MULTIDISCIPLINARY Y INITIATIVES FOCUS ON WORLDWIDE PROBLEMS NICLUS TO THE PROBLEMS STANPORD AND SCIENCES, LAW, AND MEDICINE CURRENT MULTIPLE PROCESS AMONG 50 MAJORS AND ARE ENCOURAGED TO LEARN CRITICAL THINKING SKILLS THEOLOGY REPORTS STANPORD AND SCIENCES. THE PROCESS THE PROCESS AMONG 50 MAJORS AND ARE ENCOURAGED TO LEARN CRITICAL THINKING SKILLS THEOLOGY IN STANPORD AND SCIENCES. THE PROCESS THE PROCESS AND THE PROCESS AND THE PROCESS THE PROCESS AND THE PROCESS THE PROCESS AND THE PROCESS AND THE PROCESS THE PROCESS AND THE PROCESS IN STANPORD AND INVOLVES TEACH CHANCES AND THE PROCESS AND THE PROCESS IN STRUCTION SET COMPUTER AMONG OTHER D ISCOVERES, DISEASE IDENTIFICATION AND MANAGEMENT, INCLINING SECONERS AND THE PROCESS

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4A	STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS, CONTINUED FROM PAGE 3	URES ARE INCLUDED IN STANFORD'S FINANCIAL STATEMENTS, ASSETS AND LIABILITIES ARE CARRIED O N DOE'S BOOKS ACCORDINGLY, CONSTRUCTION EXPENDITURES ARE RECORDED AS EXPENDITURES HEREIN FORM 990 PART IV, LINE 12-12A HOW THE FINANCIAL STATEMENTS WERE AUDITED STANFORD'S CONSOL IDATED FINANCIAL STATEMENTS AS OF AND FOR THE YEARS ENDED AUGUST 31, 2010 AND AUGUST 31, 2009 WERE AUDITED BY THE ACCOUNTING FIRM OF PRICEWATERHOUSECOOPERS ("PWC") AS REQUIRED BY GENERAL ACCEPTED ACCOUNTING PRINCIPLES, THE UNIVERSITY'S FINANCIAL STATEMENTS ARE PREPARED ON A CONSOLIDATED BASIS AND INCLUDE THE UNIVERSITY ACCOUNTS AND THOSE OF STANFORD HOSPITA L AND CLINICS AND THE LUCILE SALTER PACKARD CHILDREN'S HOSPITAL AT STANFORD ("THE HOSPITAL S") THE FINANCIAL STATEMENTS DISCLOSE SEPARATELY THE ACCOUNTS OF THE UNIVERSITY FROM THOS E OF THE HOSPITALS UNDER SEPARATE COVER, THE HOSPITALS PROVIDE AUDITED FINANCIAL STATEMEN TS OF THEIR OWN ACCOUNTS PWC UTILIZES SEPARATE AUDIT TEAMS TO CONDUCT THE AUDIT ENGAGEMEN TS OF STANFORD AND THE HOSPITALS EACH AUDIT IS CONDUCTED BY QUALIFIED PROFESSIONAL ACCOUN TANTS WITH AUDIT PLANS DESIGNED FROM THE SEPARATE ACCOUNTS FOR THE RESPECTIVE ENTITIES, IN ACCORDANCE WITH GENERALLY ACCEPTED AUDITING STANDARDS STANFORD'S FORM 990 REPRESENTS THE ACCOUNTS OF THE UNIVERSITY THE HOSPITALS FILE THEIR OWN SEPARATE 990 FORMS

ldentifier	Return Reference	Explanation
FORM 990, PART V, LINE 4b	STANFORD HAS AN INTEREST IN OR SIGNATURE AUTHORITY OVER BANK ACCOUNTS	IN THE FOLLOWING COUNTRIES AUSTRALIA AUSTRIA BELGIUM BRAZIL CANADA CHANNEL ISLANDS CHILE CHINA DENMARK FINLAND FRANCE GERMANY HONG KONG INDIA INDONESIA ISRAEL ITALY JAPAN LUXEMBOURG MALAYSIA MAURITIUS NETHERLANDS NEW ZEALAND NORWAY PAKISTAN PHILIPPINES POLAND QATAR SINGAPORE SOUTH AFRICA SOUTH KOREA SPAIN SWEDEN SWITZERLAND TAIWAN THAILAND TURKEY UNITED KINGDOM

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11A	PREPARATION AND REVIEW OF THE FORM 990	EACH YEAR, THE UNIVERSITY HAS ITS FINANCIAL STATEMENTS AUDITED BY THE INDEPENDENT ACCOUNTING FIRM OF PRICEWATERHOUSECOOPERS (PWC) DATA FOR THE 990 IS EXTRACTED FROM THE AUDITED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION COMPENSATION DATA IS EXTRACTED FROM PAYROLL RECORDS, AND IN EACH CASE CONFIRMED BY THE REPORTED INDIVIDUAL THIS RETURN IS PREPARED BY THE TAX DEPARTMENT AND REVIEWED BY SENIOR MANAGEMENT AND THE BOARD OF TRUSTEES OF THE UNIVERSITY THE FINAL VERSION IS THEN SIGNED BY THE SENIOR ASSOCIATE VICE PRESIDENT FOR FINANCE AND PWC AS PAID PREPARER

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2, SECTION B, LINE 12C,	AND SCHEDULE L, PART IV	CONFLICT OF INTEREST MEMBERS OF THE UNIVERSITY IS BOARD OF TRUSTESS ("TRUSTESS"), OFFICERS AND FACULTY MAY, FROM TIME TO TIME, BEASOCIATED, ENTER DIRECTLY ON INDRECTLY, WITH ENTITIES DOING BUSINESS WITH THE UNIVERSITY IN ELUNIVERSITY HAS CONFLICT OF INTEREST POLICES THAT ARE STRICTLY PURPORCED TO ENSURE THAT ALL TRANSACTIONS WITH THE THESE PARTIES ARE AREA MEDICAL SHIPH, AND THERE IS NO FAVORABLE TREATMENT AS A RESULT OF THESE REATTONSHIPS CONFLICTS OF INTEREST ARE REGULARLY MONITORED, AND THE WRITTEN CONFLICT OF INTEREST POLICY IS CONSIST ENTLY ENFORCED UNIVERSITY, WIDE COMPLIANCE INITIATIVES INCLUDE TRAINING AND DOCUMENTATION, REQUIRED ANNUAL DISCLOSURE AND FOLLOW-UP, MANAGEMENT CONTROLS, ENTERPRISE RISK MANAGEMENT. REGULAR INTERNAL AND EXTERNAL INTERNAL EXPLAINMENT THE LINE OF THE WIND EXPLAINMENT OF CONSULT ING RELATIONSHIPS WITH ENTITIES DOING BUSINESS WITH THE UNIVERSITY. AND ACCURATE AND EXPLAINMENT OF THE WIND EXPLAINMENT OF TH

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2, SECTION B, LINE 12C,	AND SCHEDULE L, PART IV	IRECT FINANCIAL INTEREST AS GENERAL PARTNER, THE UNIVERSITY MADE NO ADDITIONAL INVESTMENTS AND RECEIVED DISTRIBUTIONS OF \$5,200,000 WITH RESPECT TO STANFORD INVESTMENTS WHERE ANN LAMONT, A TRUSTEE, HAD A DIRECT OR INDIRECT FINANCIAL INTEREST AS A GENERAL PARTNER, THE U NIVERSITY INVESTED \$3,400,000 (0 04% OF TOTAL INVESTMENTS) AND RECEIVED DISTRIBUTIONS OF \$1,800,000 IN AGGREGATE, REPORTABLE TRANSACTIONS RELATING TO ALL SUCH INVESTMENT RELATIONS HIPS WITH TRUSTEES AMOUNTED TO AN INVESTMENT BY STANFORD OF \$51,900,000 (0 59% OF TOTAL IN VESTMENTS) AND A RETURN TO STANFORD OF \$34,900,000 PARTNERSHIPS IN WHICH MR BASS OWNS A DIRECT OR INDIRECT GENERAL PARTNERSHIP INTEREST RENTED FACILITIES DIRECTLY OR INDIRECTLY O WNED BY STANFORD UNIVERSITY AND PAID RENT AT FAIR MARKET RATES TO STANFORD IN THE AMOUNT OF \$4,409,140 THESE DISCLOSURES DO NOT INCLUDE TRANSACTIONS IN WHICH A TRUSTEE OR TRUSTEE FAMILY MEMBER PAYS TUTTION, ROOM AND/OR BOARD COSTS FOR A STUDENT AT THE UNIVERSITY JOHN HENNESSY, PRESIDENT AND A TRUSTEE, IS A MEMBER OF THE BOARD OF DIRECTORS OF CISCO SYSTEMS, INC (CISCO) AND GOOGLE INC (GOOGLE) THE UNIVERSITY PURCHASES GOODS AND SERVICES FROM C ISCO AND GOOGLE IN THE NORMAL COURSE OF BUSINESS AND ALL PURCHASES ARE MADE, AT ARM'S LENG TH, IN ACCORDANCE WITH STANFORD PROCUREMENT POLICES AND PROCEDURES MR HENNESSY DOES NOT PARTICIPATE IN ANY DECISIONS WITH RESPECT TO THESE COMPANIES DURING THE YEAR ENDED AUGUS T 31, 2010, STANFORD PURCHASES FROM CISCO AND GOOGLE AMOUNTED TO \$4,803,000 AND \$103,000 R ESPECTIVELY KAVITARK RAM SHRIRAM, A TRUSTEE, IS ALSO A DIRECTOR AT GOOGLE, JERRY YANG, A TRUSTEE, IS ALSO A DIRECTOR AT GOOGLE, JERRY YANG, A TRUSTEE, IS ALSO A DIRECTOR OF CISCO CONSISTENT WITH THE UNIVERSITY MISSION OF SHARING AND DISSEMINATING KNOWLEDGE, STANFORD SUPPORTS THE GOOGLE BOOK SEARCH PROJECT, WHICH IS CURR ENTILY THE SUBJECT OF LITIGATION OVER THE PAST SIX YEARS GOOGLE HAS SCANNED ABOUT 3 MILLION BOOKS OWNED BY STANFORD PRESIDENT HENNESSY IS A MEMBER OF THE GOOGLE BOOK SEARCH PROJECT IN FIRE FIRE A SCH

ldentifier	Return Reference	Explanation
		THE ANNUAL PROCESS FOR DETERMINING COMPENSATION OF BOTH THE TOP MANAGEMENT OFFICIAL (PRESIDENT OF THE UNIVERSITY) AND OF OTHER OFFICERS/KEY EMPLOYES IN CALDES REVIEW AND APPROVALE IS IN INDEPENDENT PERSONS, USE OF COMPARABILITY DATA AND CREATION OF COMPENDATION OF THE DELIBERATION AND DECISION IN THE CASE OF THE UNIVERSITY'S PRESIDENT. THE YES OF EMPLOYED TO FLIMAN RESOURCES, AT A PRELIMINARY MEETING WITH A SUBCOMMITTEE OF THE COMMITTEE ON COMPENSATION, PRESENTS AN ANALYSIS OF CURRENT FROM THE CASE OF THE COMMITTEE ON COMPENSATION, PRESENTS AN ANALYSIS OF CURRENT FROM THE SAME MATERIALS ARE SENT TO THE FULL COMMITTEE AT THE MEETING OF THE FULL COMMITTEE AND IN THE ASSENSE OF THE PRESIDENT, DISCUSSION COURS PROR TO A VOTE MINUTES OF BOTH MEETINGS AND ON THE CASE OF THE PRESIDENT, DISCUSSION COURS PROR TO A VOTE MINUTES OF BOTH MEETINGS AND ON THE CASE OF THE WISE OF THE VICE OF SEDERN OF HUMAN RESOURCES IN THE CASE OF OTHER OFFICERS/KEY EMPLOYEES, PER GUIDELINES IN THE COMMITTEE SEXEUTIVE COMPENSATION POLICY AND PROCEDURES DOCUMENT, EACH YEAR THE VICE OF RESIDENT OF HUMAN RESOURCES WITH COMPENSATION FOR THE RESIDENT AND THE CASE OF OTHER OFFICERS/KEY EMPLOYEES, PER GUIDELINES IN THE COMMITTEE SEXEUTIVE COMPENSATION FOR THE RESIDENT AND THE CASE OF THE WISE OF THE VICE OF RESIDENT OF HUMAN RESOURCES WITHOUT SEXEUTIVE COMPENSATION FOR THE RESIDENT AND THE CASE OF THE RESIDENT AND THE PRESIDENT OF THE PROPERTIES OF THE RESIDENT AND THE RESIDENT AND THE RESIDENT AND THE RESIDENT AND PROVOST THE RESIDENT AND PROVOST THE RESIDENT OF THE PROPERTIES DESIDENT OF THE PROPERTIES OF THE VICE PRESIDENT OF THE PRESIDENT ON THE PRESIDENT OF THE PROPERTIES OF THE VICE PRESIDENT OF THE VICE PRESIDENT OF THE VICE PRESIDE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION DETERMINATION	W AND OTHER GRADUATE STUDENTS IT IS A SIGNIFICANT INVESTMENT BY STANFORD IN MITIGATING TR AFFIC AND OTHER ENVIRONMENTAL CONCERNS AS IT GREATLY REDUCES THE NUMBER OF PEOPLE DRIVING TO CAMPUS DAILY

Identifier	Return Reference	Explanation
FORM 990, SCHEDULE K, PART I, COLUMN c	CUSIP NUMBER	CEFA TAX EXEMPT COMMERICAL PAPER ("TECP") DATED 5/22/08 WAS A SSIGNED A UNIQUE BLOCK OF 900 CUSP NUMBERS UPON ISSUANCE. A NEW CUSP NUMBER IS A SSIGNED TO EACH TRAUNCH OF TECP THAT IS ISSUED THE CUSP NUMBER LISTED IS THE FIRST CUSP NUMBER. IN THE SERIES AND WAS A SSIGNED AT THE ORIGINAL ISSUANCE DATE, 5/22/08 FORM 990, SCHEDULE K, PART I, COLUMN F DESCRIPTION OF PURPOSE FOR TAX EXEMPT AND

ldentifier	Return Reference	Explanation
SCHEDULE L, PART II	LOANS TO/FROM INTERESTED PERSONS	SEE ATTACHMENT 5 AT END OF THIS RETURN FOR DETAILS REGARDING LOANS TO INTERESTED PERSONS IN EACH CASE THE LOAN IS MADE FROM STANFORD TO THE INDIVIDUAL (COLUMN B) NONE OF THESE LOANS ARE IN DEFAULT (COLUMN E) ALL LOANS HAVE BEEN APPROVED BY THE BOARD OF TRUSTEES (COLUMN F) AND FOR EACH LOAN ISSUED, THERE EXISTS A WRITTEN AGREEMENT BETWEEN STANFORD AND THE BORROWER (COLUMN G) PURSUANT TO PROGRAMS INTENDED TO FACILITATE HOUSING FOR EMPLOYEES, THE UNIVERSITY HOLDS MORTGAGES AND LEASEHOLDS ON CERTAIN HOUSES ON OR NEAR CAMPUS OWNED AND OCCUPIED BY EMPLOYEES AND THEIR FAMILIES, WHICH, FROM TIME TO TIME, COULD INCLUDE OFFICERS AND KEY EMPLOYEES OF THE UNIVERSITY

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SCHEDULE R (Form 990)

Department of the Treasury

Related Organizations and Unrelated Partnerships

▶ 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.

OMB No 1545-0047

DLN: 93493195003231

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY 94-1156365

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) controlling ntity
See Additional Data Table						
Part II Identification of Related Tax-Exempt Organiza or more related tax-exempt organizations during the	tions (Complete ıf tl tax year.)	ne organization ans	swered "Yes" or	n Form 990, Part	IV, line 3	4 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code secti	on Public charity sta (if section 501(c)	atus ((f) Direct controlling entity
STANFORD HOSPITAL AND CLINICS						
300 PASTEUR DRIVE MC 5555	HEALTHCARE	CA	E01/c)/2)		3 NA	
STANFORD, CA 94304 94-6174066	HEALINCARE	CA	501(c)(3)		3	
LUCILE SALTER PACKARD CHILDRENS HOSPITAL						
725 WELCH ROAD MC 5553	HEALTHCARE	CA	501(c)(3)		₃ NA	
PALO ALTO, CA 94304 77-0003859						
THE FREIDENRICH SUPPORT FOUNDATION						
3145 PORT DRIVE	EDUCATIONAL	CA	501(c)(3)	11, T)	YPE 1 NA	
PALO ALTO, CA 94304 30-0519583						
PACIFIC-10 CONFERENCE						
1350 TREAT BOULEVARD	EDUCATIONAL	CA	501(c)(3)	11, T	YPE 1 NA	
WALNUT CREEK, CA 94597 94-1459048				,		
SHR HOLDINGS INC						
3145 PORTER DRIVE	REAL ESTATE	CA	501(c)(25)		N/A NA	
PALO ALTO, CA 94304 94-3187167						
STANFORD Univ TRUST POST RETEMPYNT BEN						
3145 PORTER DRIVE	BENEFITS	CA	501(C)(9)		_{N/A} NA	
PALO ALTO, CA 94304 94-3246199						
	_					

Part III Identification because it	ation of Related had one or more	Organiz related o	z ations Taxable a organizations treate	s a Partnership (C d as a partnership d	Complete if the orguring the tax year	anızatıon ans .)	wered '	'Yes" c	on For	m 990, I	Part IV, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end asset	-of-year	(h Disprop allocat	rtionate	Code amount ir Sched	i) V—UBI n box 20 of ule K-1 n 1065)	(j Gener mana partr	ral or iging
								Yes	No			Yes	No
See Additional Data Table													-
												1	
												-	
				s a Corporation or s treated as a corpor			ar.)		ed "Y	es" on F	orm 990, Pa	art IV,	
(a) Name, address, and EIN of	related organization	(b) Primary ad		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share o Incol	of total	Sh end-	(g) nare of -of-year ssets	(h) Percentage ownership		
See Additional Data Table													

Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 34, 35, or 36.)			
Note	. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV	,			
a Rece	eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b Gift,	grant, or capital contribution to other organization(s)		1b	Yes	
c Gıft,	grant, or capital contribution from other organization(s)		1 c	Yes	
d Loar	ns or loan guarantees to or for other organization(s)		1d		No
e Loar	ns or loan guarantees by other organization(s)		1e		No
f Sale	of assets to other organization(s)		1f		No
g Purc	hase of assets from other organization(s)		1 g		No
h Excl	nange of assets		1h		No
i Leas	e of facilities, equipment, or other assets to other organization(s)		1i	Yes	
j Leas	e of facilities, equipment, or other assets from other organization(s)		1j		No
k Perf	ormance of services or membership or fundraising solicitations for other organization(s)		1k	Yes	
	rmance of services or membership or fundraising solicitations by other organization(s)		11	Yes	
	ing of facilities, equipment, mailing lists, or other assets		1m	Yes	
n Shar	ring of paid employees		1n	Yes	
o Reim	nbursement paid to other organization for expenses		10	Yes	
p Rein	nbursement paid by other organization for expenses		1р	Yes	
q Othe	er transfer of cash or property to other organization(s)		1q	Yes	
r Othe	r transfer of cash or property from other organization(s)		1r	Yes	
	e answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships	and transaction thres	holds		
	(a) Name of other organization	(b) Transaction type(a-r)		(c) nt involv	ed
	tional Data Table				
(2)					
(3)					
(4)					
<u>/E)</u>					
(5)					
(6)					

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Software ID: **Software Version:**

EIN: 94-1156365

Name: STANFORD UNIVERSITY BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY

Form 990, Schedule R, Part I - Identification of Disregarded Entities										
(a) Name, address, and EIN 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					
CARDINAL ARROWPOINT LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025 91-2035195	INVESTMENT	DE	-1,828	0	NA					
CARDINAL CENTREPOINT LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025	INVESTMENT	тх	0	0	N A					
CARDINAL NEWBURY GP LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025	INVESTMENT	DE	25	3,094	N A					
CARDINAL NEWBURY LP LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025	INVESTMENT	DE	140,697	17,275,993	N A					
CARDINAL REGENT GP LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025 91-2116646	INVESTMENT	тх	0	0	N A					
CARDINAL REGENT LP LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025 91-2116398	INVESTMENT	DE	1,515,456	33,188	N A					
FAIRFIELD NORTH SEA ENERGY LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025	INVESTMENT	DE	-4,105,833	34,514,086	N A					
SAND HILL INVESTMENTS GP LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025 41-2262027	INVESTMENT	DE	0	0	N A					
SMC DE LLC C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025	INVESTMENT	DE	133,207	8,139,420	N A					
SAND HILL INVESTMENTS LP C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK, CA 94025 35-1557441	INVESTMENT	DE	124,615	23,197,835	N A					
ALTIRA TECHNOLOGY FUND IV DIRECT INVEST C/O STANFORD MGT CO2770 Sand Hill Menlo Park, CA 94025	Investments	DE	-132,191	17,502,711	N A					
CYPRESS MARINA PARTNERS LLC C/O STANFORD MGT CO2770 Sand Hill MENLO PARK, CA 94025 95-4890334	REAL ESTATE	CA	-609,298	76,663,621	NA					
OTL LLC 3145 PORTER DRIVE PALO ALTO, CA 94304 94-1156365 SU ACQUISITION LLC	TECHNOLOGY	CA	0	42,498	N A					
3145 PORTER DRIVE PALO ALTO, CA 94304 94-1156365 SAA SIERRA PROGRAMS LLC	REAL ESTATE	DE	577,134	2,000,000	N A					
3145 PORTER DRIVE PALO ALTO, CA 94304 94-1156365 ANTS AT WORK LLC	ALUM RELATION	CA	5,451,916	8,686,256	N A					
3145 PORTER DRIVE PALO ALTO, CA 94304 94-1156365 SHR HOTEL LLC	research	NM	0	55,000	N A					
3145 PORTER DRIVE PALO ALTO, CA 94304 41-2277925 SPECIALTY EVENTS LLC	REAL ESTATE	CA	28,183,400	144,211,461	N A					
3145 PORTER DRIVE PALO ALTO, CA 94304 27-3665473 JPS NO 2 LLC	GEN BUS OPS	CA	0	0	N A					
3145 PORTER DRIVE PALO ALTO, CA 94304 94-1347393	REAL ESTATE	СО	0	0	NA					

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity
STANFORD HOSPITAL AND CLINICS 300 PASTEUR DRIVE MC 5555 STANFORD, CA94304 94-6174066	HEALTHCARE	CA	501(c) (3)	3	NA
LUCILE SALTER PACKARD CHILDRENS HOSPITAL 725 WELCH ROAD MC 5553 PALO ALTO, CA94304 77-0003859	HEALTHCARE	CA	501(c) (3)	3	NA
THE FREIDENRICH SUPPORT FOUNDATION 3145 PORT DRIVE PALO ALTO, CA94304 30-0519583	EDUCATIONAL	СА	501(c) (3)	11, TYPE 1	N A
PACIFIC-10 CONFERENCE 1350 TREAT BOULEVARD WALNUT CREEK, CA94597 94-1459048	EDUCATIONAL	CA	501(c) (3)	11, TYPE 1	NA
SHR HOLDINGS INC 3145 PORTER DRIVE PALO ALTO, CA94304 94-3187167	REAL ESTATE	СА	501(c) (25)	N/A	N A
STANFORD Univ TRUST POST RETEMPYNT BEN 3145 PORTER DRIVE PALO ALTO, CA94304 94-3246199	BENEFITS	СА	501(C) (9)	N/A	NA

Form 990, Sche	dule R, Pa		[dentifica	(e)	ated Organiza	tions Taxable a		ship	(j)
(a) Name, address, and EIN of related	(b) Primary activity	(c) Legal Domicile (State or	(d) Direct Controlling Entity	Predominant income (related, unrelated,	(f) Share of total Income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproprtionate allocations?	(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?
organization		Foreign Country)	•	excluded from tax under sections 512-514)	,,,	、 ,,	Yes No	(\$)	Yes No
	REAL ESTATE DEV	DE	N A	EXCLUDED	5,002	87,711,472	No		No
MA 02108 20-4222260 ATWATER 12 LP	REAL ESTATE	DE	NA	EXCLUDED	1,360,384	21,581,088	No		No
	INV								
75-2944481 AVENUE ASIA	FOREIGN INV	DE	NA	EXCLUDED	7,261,508	13,535,242	N o		No
535 MADISON AVENUE 15TH FL									
	СОММ	DE	NA	EXCLUDED	327	0	No		No
CENTER 20 LP C/O DRA ADVISORS INC 200 E 42ND S	REAL ESTATE								
TH FL NEW YORK, NY10017 13-4106892 JER R E	REAL	DE	NA	EXCLUDED	-146,888	4,695,832	N o		No
-	ESTATE Inv								
COS 1650 TYSON BL STE MCLEAN, VA22102									
54-2029560 KEB INVESTORS	FOREIGN INV	BD	N A	EXCLUDED	2,156,728	62,723,279	N o		No
COMMERCE	REAL ESTATE	DE	N A	EXCLUDED	888,914	17,955,649	No		No
PARK II LTD PO BOX 1920 DALLAS, TX75221	Dev								
20-4681486 PALO ALTO LP WHITELEY	FOREIGN INV	CU	N A	EXCLUDED	14,826	108,118,119	No		No
CHAMBERS DON STREET ST HELIER XC JE4 9WG									
REALTY FUND II	REAL ESTATE Inv	DE	N A	EXCLUDED	813,549	958,078	N o		No
1111 BRICKELL AVENUE SUITE 2910 MIAMI, FL33131									
20-0973616 REGENT OFFICE CENTER LP	REAL ESTATE Inv	TX	NA	EXCLUDED	1,515,456	33,188	N o		No
2400 FINANCIAL CENTER BLDG SEATTLE,									
WA 98161 91-2116424 SANDPIPER	INV IN SECUR	TX	N A	EXCLUDED	-4,358,764	52,872,632	No		No
2100 MCKINNEY AVENUE SUITE 1770 DALLAS,									
TX75201 26-0341626 SAROFIM MULTIFAMILY	Real Estate Dev	DE	N A	EXCLUDED	-319,011	64,354,942	No		No
PARTNERS LP 8115 PRESTON ROAD SUITE	Dev								
400 DALLAS, TX75225 20-1929002									
LLC	REAL ESTATE Dev	CA	NΑ	unrelated	-909,442	64,321,965	No	- 625,159	No
SAND HIL MENLO PARK, CA94025 30-0312996									
ASSOCIATES LP PO BOX 1920	COMM PROP Inv	DE	NΑ	EXCLUDED	-144,110	6,830,971	No		No
DALLAS, TX75221 20-5803431 SNO WCREEK VI		CA	NA	unrelated	-297,301	3,721,649	No	-	No
C/O STANFORD MGT CO 2770 SAND HIL MENLO PARK,	ESTATE Dev							373,366	
STAMOS REAL	REAL ESTATE INV	DE	NA	unrelated	-194,094	21,912,826	N o	- 390,108	No
(A) LP 250 PARK AVENUE 29TH	IN V								
FLOOR NEW YORK, NY10022 20-3949682									
ARROWPOINT	REAL ESTATE Inv	DE	NΑ	EXCLUDED	-1,828	0	No		No
AVENUE SUITE 3400 DALLAS, TX75201									
	REAL ESTATE INV	DE	NA	EXCLUDED	-1,467,326	25,437,977	No		No
C/O SPAULDING SLYE INV 1 PO S BOSTON, MA02109 04-3446765									
BROWN BARK I LP PO BOX 1068	NOTES REC INV	DE	N/A	EXCLUDED	1,708,704	19,062,361	No		No
STAFFORD, TX774971068 72-1604614 BROWN BARK II		DE	N/A	EXCLUDED	895,287	9,305,753	No		No
PO BOX 1068 STAFFORD,	REC INV				,	,			
TX774971068 20-8727391 BROWN BARK III LP	NOTES REC INV	DE	N/A	EXCLUDED	3,583,669	13,875,128	No		No
PO BOX 1068 STAFFORD, TX774971068 26-1780743									
COLONY KOREA	PORTFOLIO INV	DE	NA	EXCLUDED	89	36,135	No		No
1999 AVENUE OF THE STARS SUITE 120 LOS ANGELES,									
CA 90067 95-4867607 DO WNTO WN	INV IN SECUR	DE	N A	EXCLUDED	- 17,512,423	0	No		No
LP 674 UNIONVILLE RD					, , 23				
STE 105 KENNETT SQUARE, PA19348 23-2956388									
FORTRESS IW COINVESTMENT (FUND B) LP	TRAVEL	CJ	N A	EXCLUDED	325,267	0	No		No
1345 AVE OF THE AMERICAS 23RD FL NEW YORK,									
NY10105 98-0509639 JER REAL ESTATE	REAL ESTATE	UK	ALBERTA	EXCLUDED	-4,459,839	12,981,768	No		No
PARTNERS EUROPE II LP CLARGES HOUSE 6-12	Inv		LP						
CLARGES ST LONDON, EN W1J 8AD UK									
KERN COBALT	ENERGY INV	CA	N A	UNRELATED	103,951	3,249,532	No	- 301,877	No
98-0603937 GRE	DE ^ '	A =	N1 / A	DEL 4 ==		<u>-</u> -			
	REAL ESTATE	AZ	N/A	RELATED	0	39,793	No		No
DRIVE PALO ALTO, CA94304 94-1156365									
STANFORD PET- CT LLC 300 PASTEUR	MED DIAGNOSIS		N/A	RELATED	4,913,223	6,643,368	No		No
DRIVE M/C 5555 STANFORD,									

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

Form 990, Schedule K,				<u> </u>	uxubic (u co. po. u	1 11 11 11 11 11
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership
MARINER VOYAGER INTERNATIONAL LTD C/O STUARTS CORP SVCS PO BOX 2510 GEORGE TOWN CJ	INVESTMENTS	CJ	NA	C CORP	-566,400	25,159,849	60 714 %
NWQ CONCENTRATED FUND LTD WALKER HOUSE 87 MARY STREET GEORGE TOWN KY1- 9002 CJ 68-0661555	INVESTMENTS	CJ	N A	C CORP	-16,563,363	96,785,781	100 000 %
STANFORD SGGS EUROPE INC UGLAND HOUSE S CHURCH ST PO BOX 309GT, GEORGE TOWN CJ 13-1684331	INVESTMENTS	CJ	N A	C CORP	120,281	33,190,169	100 000
BLACK RIVER EMEA INVESTORS FUND LTD UGLAND HOUSE S CHURCH ST GEORGE TOWN CJ 98-0428006	INVESTMENTS	CJ	N A	C CORP	-8,210,295	121,258,961	67 938 %
EAST SAIL C/O INTL FS INC IFS COURT TWENTYEIGHT, CYBERCITY, EBENE MP	INVESTMENTS	МР	NA	C CORP	24,519,264	103,038,955	100 000
GAVEA INVESTMENT FUND II-C LP PO BOX 896GT HARBOUR CENTRE GEORGE TOWN CJ 98-0537952	INVESTMENTS	CJ	NA	C CORP	70,296,878	111,369,815	53 190 %
JER ALBERTA LP C/O JE ROBERT COS 1650 TYSON BLVD MCLEAN, VA22102 98-0423557	INVESTMENTS	CA	N A	C CORP	-4,459,839	11,797,865	100 000
JER ALBERTA III LP c/o JE ROBERT COS 1650 TYSON BLVD MCLEAN, VA22102 98-0493425	INVESTMENTS	CA	N A	C CORP	-4,422,281	2,836,492	100 000
NORTH WEST CAMPUS MIDPOINT 3145 PORTER DRIVE PALO ALTO, CA94304 20-1627958	REAL ESTATE	CA	N A	C CORP	129,319	96,208	100 000 %
MIDPOINT TECHNOLOGY PARK 3145 PORTER DRIVE PALO ALTO, CA94304 94-3287254	REAL ESTATE	CA	N A	C CORP	394,647	287,539	100 000 %
STANFORD HEALTH AFFILIATES 3145 PORTER DRIVE PALO ALTO, CA94304 77-0284664	INACTIVE	CA	N A	C CORP	0	0	100 000 %
MARBLETON PROPERTY FUND (ALBERTA) LP C/O JE ROBERT COMPANIES 1650 TYS MCLEAN, VA22102 98-0531893	Real Estate Inv	CA	NA	C CORP	-327,347	1,383,095	68 888 %

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)
(1)	ARCOLA LP	В	12,057,405
(1)	ARCOLA LP	R	742,994
(2)	ATWATER 12 LP	В	93,300
(3)	ATWATER 12 LP	R	1,244,000
(4)	AVENUE ASIA CAPITAL PARTNERS LP	R	15,659,375
(5)	BLACK RIVER EMEA INVESTORS FUND LTD	R	35,000,000
(6)	BROWN BARK I LP	R	1,979,941
(7)	BROWN BARK II LP	R	1,485,001
(8)	BROWN BARK III LP	В	849,823
(9)	BROWN BARK III LP	R	6,527,402
(10)	DEK PORTFOLIO LLC	В	293,168
(11)	EAST SAIL	В	4,651,684
(12)	EAST SAIL	R	32,000,000
(13)	GAVEA INVESTMENT FUND II-C LP	R	45,000,000
(14)	JER REAL ESTATE QUALIFIED PARTNERS EUROPE LP	R	968,029
(15)	JER ALBERTA LP	В	5,606,423
(16)	JER ALBERTA III LP	В	5,874,37
(17)	JER ALBERTA III LP	R	28,749
(18)	KEB INVESTORS II LP	R	3,013,378
(19)	LINCOLN COMMERCE PARK II LTD	В	121,786
(20)	LINCOLN COMMERCE PARK II LTD	R	1,212,000
(21)	MARBLETON PROPERTY FUND (ALBERTA) LP	В	1,610,116
(22)	MARINER VOYAGER FUND INTERNATIONAL LTD	R	17,057,440
(23)	NWQ CONCENTRATED FUND LTD	R	70,000,000
(24)	PARMENTER REALTY FUND II LP	В	160,168
(25)	PARMENTER REALTY FUND II LP	R	262,623
(26)	REGENT OFFICE CENTER LP	R	6,358,000
(27)	SANDPIPER FUND LP	В	9,000,000
(28)	SIC PARTNERS LLC	В	4,975,041
(29)	SIC PARTNERS LLC	R	156,920

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)
(31)	SKY HARBOR ASSOCIATES LP	В	335,424
(1)	SNO WCREEK VI PARTNERS LLC	R	1,712,181
(2)	STANFORD HOSPITAL AND CLINIC	R	311,977,325
(3)	STANFORD HOSPITAL AND CLINIC	В	2,789,117
(4)	STANFORD HOSPITAL AND CLINIC	С	7,956,320
(5)	STANFORD SGGS EUROPE INC	В	2,805,156
(6)	STANFORD SGGS EUROPE INC	R	1,497,432
(7)	STERLING STAMOS REAL ASSETS FUND (A) LP	В	968,753
(8)	STERLING STAMOS REAL ASSETS FUND (A) LP	R	501,745
(9)	TC ARROWPOINT LP	R	16,118
(10)	LUCILE SALTER PACKARD CHILDRENS HOSPITAL	R	124,969,823
(11)	LUCILE SALTER PACKARD CHILDRENS HOSPITAL	С	5,528,581
(12)	LUCILE SALTER PACKARD CHILDRENS HOSPITAL	В	429,682
(13)	LUCILE SALTER PACKARD CHILDRENS HOSPITAL	С	4,186,773
(14)	LUCILE SALTER PACKARD CHILDRENS HOSPITAL	С	58,213,012

Software ID: Software Version:

EIN: 94-1156365

Name: STANFORD UNIVERSITY BOARD OF TRUSTEES

OF THE LELAND STANFORD JUNIOR UNIVERSITY

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

(A) Name and Title	(B) Average hours	A verage Position (check all hours that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
John Hennessy president/trustee	50 0	х		х				670,776	0	314,793	
William M Barnum JR trustee	2 0	Х						0	0	0	
Robert M Bass trustee	2 0	х						0	0	0	
Mariann Byerwalter trustee	2 0	Х						0	0	0	
James e Canales trustee	2 0	Х						0	0	0	
James g Coulter trustee	2 0	Х						0	0	0	
Mary b Cranston trustee	2 0	Х						0	0	0	
Lauren b Dachs trustee	2 0	Х						0	0	0	
steven a denning trustee	2 0	Х						0	0	0	
bruce w dunlevie trustee	2 0	Х						0	0	0	
yıng-yıng goh trustee	2 0	Х						0	0	0	
john a gunn trustee	2 0	х						0	0	0	
pete higgins trustee	2 0	Х						0	0	0	
leslie p hume trustee	2 0	Х						0	0	0	
ann h lamont trustee	2 0	Х						0	0	0	
goodwin liu trustee	2 0	Х						0	0	0	
hamıd r moghadam trustee	2 0	Х						0	0	0	
wendy munger trustee	2 0	Х						0	0	0	
miriam rivera trustee	2 0	Х						0	0	0	
rıchard a sapp trustee	2 0	Х						0	0	0	
philip g satre trustee	2 0	Х						0	0	0	
john h scully trustee	2 0	Х						0	0	0	
isaac stein trustee	2 0	Х						0	0	0	
thomas fsteyer trustee	2 0	Х						0	0	0	
ross h walker trustee	2 0	Х						0	0	0	

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
vaughn c williams trustee	2 0	Х						0	0	0
jerry yang trustee	2 0	Х						0	0	0
William R Brody Trustee	2 0	Х						0	0	0
Christine U Hazy Trustee	2 0	Х						0	0	0
Susan R McCaw Trustee	2 0	Х						0	0	0
RONALD P SPOGLI TRUSTEE	2 0	Х						0	0	0
KAVITARK RAM SHRIRAM trustee	2 0	Х						0	0	0
john etchemendy provost	50 0			х				469,511	0	274,483
randall livingston vp bus aff/cfo	50 0			х				474,808	0	107,708
martın shell vp development	50 0			х				405,398	0	130,744
debra zumwalt vp general counsel	50 0			х				489,394	0	179,976
robert c reidy vp real estate	50 0			х				605,664	0	201,447
david demarest vp public affairs	50 0			х				320,581	0	101,257
howard wolf pres Of stanford alum Assoc	50 0			х				330,380	0	72,611
william madia VP SLAC NAL	25 0			х				237,354	0	13,858
Diane Peck VP Human Resources	50 0			х				311,530	0	42,274
John Powers President, Stanford Mgmt Co	50 0				Х			1,122,583	0	272,606
Philip A Pizzo Dean, School of Medicine	50 0				Х			601,770	0	254,115
Richard Saller Dean, School of Hum & Sciences	50 0				Х			490,922	0	26,406
Frank Hanley CHIEF, PED CARdIOTHORACIC	50 0					х		1,467,301	0	243,949
Gary Steinberg CHAIR, NEUROSURGERY	50 0					х		1,194,466	0	43,059
Thomas M Krummel CHAIR, Surgery	50 0					х		975,237	0	60,379
Michael Edwards CHIEF, Ped neuro Surgery	50 0					х		945,074	0	44,912
JOHN A FEREJOHN PROFESSOR IN POLITICAL SCIENCE	50 0					х		973,280	0	34,020
Vadılaya M Reddy PROF CARDIOTHORACIC SURGERY	50 0						Х	816,989	0	43,539

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Edward E Manche Professor of O pthalmology	50 0						х	581,572	0	50,801
John B Ford SENIOR VP University Resources	50 0						х	525,316	0	9,967
Amın A Mılkı Prof, Obstetrics & Gynecology	50 0						х	573,498	0	50,234

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
STUDENT INCOME	900,099	657,714,588	657,714,588		
NONGOVERNMENT RESEARCH	900,099	187,504,732	187,504,732		
PATIENT CARE	900,099	454,191,839	454,191,839		
SPECIAL PRO GRAMS	900,099	337,070,631	337,070,631		
DRIVING RANGE	713,910	517,784		517,784	

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
EQUIPMENT RENTAL & MAINTENANCE	4,444,999	3,728,439	580,974	135,586
PRINTING & PUBLICATION	10,551,863	8,337,751	1,224,676	989,436
SLAC NON-SALARY EXPENSE	175,819,173	175,757,682	61,491	
RESEARCH SUBAWARDS	54,367,858	54,367,858		
EMPLOYEE RELATED EXPENSES	36,925,666	29,534,252	3,757,653	3,633,761