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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

1

Briefly describe the organization's mission

TO SERVE THE NATIONAL INTEREST IN APPLIED RESEARCH, ENGINEERING DEVELOPMENT, EDUCATION, AND TECHNOLOGY TRANSFER BY HELPING OUR SPONSORS CLARIFY THEIR REQUIREMENTS AND CONCEPTUALIZE INNOVATIVE SOLUTIONS TO THEIR PROBLEMS DEMONSTRATING THOSE SOLUTIONS THROUGH THE DESIGN AND DEVELOPMENT OF FIELDABLE ENGINEERING PROTOTYPES TRANSITIONING OUR PRODUCTS AND PROCESSES TO INDUSTRY FOR PRODUCTION, AND PROVIDING FOLLOW-ON SUPPORT PROMOTING AND SUPPORTING ADVANCED TECHNICAL EDUCATION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 320,654,473 including grants of \$ 206,850) (Revenue \$ 348,349,456)

STRATEGIC SYSTEMS TO HELP THE NAVY'S STRATEGIC GUIDANCE PROGRAM ACHIEVE HIGHER RELIABILITY AND LOWER LIFE-CYCLE MAINTENANCE COSTS THROUGH MK6 LIFE EXTENSION (MK6LE) EFFORTS DRAPER HAS BEEN DEVELOPING NEW DESIGNS FOR CRITICAL SENSORS

4b

(Code) (Expenses \$ 132,907,973 including grants of \$ 391,093) (Revenue \$ 146,376,018)

NATIONAL SECURITY & SPACE PROGRAMS THE NATIONAL SECURITY & SPACE PROGRAMS INCLUDE TACTICAL SYSTEMS, SPACE SYSTEMS, AIR WARFARE & ISR, AND SPECIAL PROGRAMS TACTICAL SYSTEMS FOCUS DRAPER'S CAPABILITIES IN AUTONOMY, ACCURACY, AND AWARENESS IN THE DOMAINS OF SOLDIER SYSTEMS, PRECISION CARGO DELIVERY, PRECISION GUIDED WEAPON DELIVERY, PRECISION TARGETING, ADVANCED MISSION PLANNING, AUTONOMOUS SYSTEMS, AND MISSILE DEFENSE SPACE SYSTEMS PROVIDE TECHNOLOGY SOLUTIONS FOR THE NATION'S SPACE PROGRAMS DRAPER PROTOTYPES AND BUILDS ADVANCED OPERATIONAL FLIGHT SYSTEMS FOR MISSIONS THAT REQUIRE HIGH LEVELS OF PERFORMANCE, RELIABILITY, AND SAFETY IN THE AREAS OF HUMAN AND ROBOTIC EXPLORATION, COMMERCIAL TRANSPORTATION, MILITARY SPACE, SPACE SCIENCE, AND SCIENCE AIR WARFARE & ISR PROVIDES COMPREHENSIVE PROBLEM-CENTRIC ANALYSIS, DESIGN, AND RAPID PROTOTYPING TO ENHANCE EMBEDDED AIRBORNE INTELLIGENCE, SURVEILLANCE, RECONNAISSANCE (ISR) PROCESSING, SENSING, CONTROL, AND SYSTEMS OPERATION SPECIAL PROGRAMS PROVIDE CONCEPT DEVELOPMENT, PROTOTYPES, LOW-RATE PRODUCTION, AND FIELD SUPPORT FOR FIRST-OF-A-KIND SYSTEMS FOR OUR SPONSORS IN COMMUNICATION, NAVIGATION AND MINIATURIZATION, SMART COLLECTION, PROCESSING AND EXPLOITATION, HUMAN SYSTEMS, SENSORS AND DELIVERY, AND CYBER OPERATIONS

4c

(Code) (Expenses \$ 20,160,973 including grants of \$ 3,238,892) (Revenue \$ 21,693,438)

CIVIL PROGRAMS THE CIVIL PROGRAMS INCLUDE ENERGY SYSTEMS AND BIOMEDICAL SYSTEMS ENERGY SYSTEMS APPLY DRAPER'S EXPERTISE IN SENSORS AND CONTROLS TO IMPROVE THE EFFICIENCY, SAFETY, AND SECURITY OF ENERGY PRODUCTION, DISTRIBUTION, TRANSMISSION, AND USAGE BIOMEDICAL SYSTEMS FOCUS ON NEW TOOLS AND TECHNOLOGIES FROM THE PHYSICAL SCIENCES AND ENGINEERING TO CREATE NOVEL SOLUTIONS TO TODAY'S CRITICAL ISSUES IN HEALTHCARE DRAPER'S ANALYTICAL EXPERTISE CAN BE USED FOR SENSOR SYSTEMS AND CLINICAL DECISION SUPPORT OUR EXPERTISE IN MEMS, MICROFLUIDICS, AND ELECTRONICS MINIATURIZATION IS ENABLING SOLUTIONS FOR SMART MEDICAL DEVICES AND ORGAN-ASSIST DEVICES

4d

Other program services (Describe in Schedule O)






















(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 473,723,419

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	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	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
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	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	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 United States? If "Yes," complete Schedule F, Parts II and IV 	15	No
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 United States? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	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	No
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
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	236	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.	1,773	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
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)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?		No
d	If "Yes," indicate the number of Forms 8822 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	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.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
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.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	13	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	12	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	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	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did 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?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA , MA
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 made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	PATRICIA MCLAUGHLIN 555 TECHNOLOGY SQUARE MS 34 CAMBRIDGE, MA (617) 258-1000

Part VII

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WILLIAM F BALLHAUS JR DIRECTOR	4 00	X						34,250	0	0
(2) DELORES M ETTER DIRECTOR	3 00	X						25,132	0	0
(3) JOHN A GORDON CHAIRMAN	8 00	X		X				73,463	0	0
(4) SHERWIN GREENBLATT DIRECTOR	4 00	X						27,000	0	0
(5) MIRIAM E JOHN DIRECTOR	3 00	X						30,250	0	0
(6) FRANKLIN C MILLER DIRECTOR	3 00	X						31,750	0	0
(7) GEORGE M MILNE JR DIRECTOR	4 00	X						38,159	0	0
(8) M ELISABETH PATE-CORNELL DIRECTOR	3 00	X						23,000	0	0
(9) PETER B TEETS DIRECTOR	3 00	X						23,455	0	0
(10) RICHARD D WHITE DIRECTOR	4 00	X						33,823	0	0
(11) JAMES D SHIELDS PRESIDENT AND CEO	40 00	X		X				651,419	0	199,061
(12) FRANK H AKERS JR DIRECTOR	3 00	X						22,750	0	0
(13) DANIEL E HASTINGS DIRECTOR	3 00	X						32,906	0	0
(14) RICHARD T ROCA DIRECTOR	3 00	X						28,625	0	0
(15) JOHN R DOWDLE VP OF ENGINEERING	40 00			X				367,686	0	-56,830
(16) ELIZABETH MORA CFO & TREASURER	40 00			X				390,498	0	93,552
(17) LEN POLIZZOTTO VP OF STRAT BUS DEV & MARK	40 00			X				355,747	0	120,789

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DARRYL G SARGENT VP OF PROGRAMS	40 00			X				369,919	0	-78,315
(19) JOHN W STILLWELL THRU 10312 VP OF STRAT SYSTEMS	40 00			X				1,670,903	0	41,950
(20) MELINDA J BROWN DIR OF LEGAL & SECRETARY	40 00			X				221,938	0	25,148
(21) STEVEN DITULLIO SINCE 10412 VP OF STRAT SYSTEMS	40 00			X				358,906	0	664,131
(22) PAUL ROSENSTRACH PROGRAM DIRECTOR	40 00				X			289,202	0	39,617
(23) JACK BARRY PRINCIPAL DIR ADMINISTRAT	40 00				X			243,940	0	37,147
(24) NEIL ADAMS PROGRAM DIRECTOR	40 00					X		265,957	0	42,069
(25) FRANK J SERNA ENGINEERING DIRECTOR	40 00					X		266,973	0	42,283
(26) PHILIP S BABCOCK IV DIR OF ENGINEERING OPS	40 00					X		259,463	0	35,991
(27) DAVID NEYLAND PROGRAM DIRECTOR	40 00					X		292,843	0	23,627
(28) RICHARD JOHN RUSSELL DIRECTOR OF SPECIAL OPERATIONS	40 00					X		255,076	0	38,219
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								6,685,033	0	1,268,439

2

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

878

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

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year		
(A) Name and business address	(B) Description of services	(C) Compensation	
MRAC LLC 19 LINWOLD DR WEST HARTFORD CT 06107	CONSULTING SERVICES	384,420	
GOODWIN PROCTER LLP 53 STATE STREET BOSTON MA 02109	LEGAL SERVICES	297,601	
FROHMAN ASSOCIATES INC 12 TODD ROAD LEXINGTON MA 02420	CONSULTING SERVICES	200,000	
JEFFREY HARRIS PO BOX 497 LUNENBURG MA 01462	CONSULTING SERVICES	191,126	
RICHARD A BASQUE 330 BORDER ROAD CONCORD MA 01742	CONSULTING SERVICES	190,800	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		10

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e	9,753,016		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f			
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f		9,753,016		
Program Service Revenue	2a	PROGRAM SERVICE REVENUE	Business Code 541700	516,418,912	516,418,912	
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f		516,418,912		
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,163,319	
4		Income from investment of tax-exempt bond proceeds . . .				
5		Royalties		1,658,423		1,658,423
6a		(i) Real		5,431,597		
		(ii) Personal				
		Gross rents				
		Less rental expenses				
b		2,748,035				
c		Rental income or (loss)				
d		5,431,597				
d		Net rental income or (loss)		5,431,597		5,431,597
7a		(i) Securities		7,318,151		
		(ii) Other				
		Gross amount from sales of assets other than inventory				
		Less cost or other basis and sales expenses				
b		26,625,722		3,123		
c		7,278,442		39,709		
d		Net gain or (loss)		7,318,151		7,318,151
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18				
a						
b	Less direct expenses					
c	Net income or (loss) from fundraising events . . .					
9a	Gross income from gaming activities See Part IV, line 19					
a						
b	Less direct expenses					
c	Net income or (loss) from gaming activities . . .					
10a	Gross sales of inventory, less returns and allowances					
a						
b	Less cost of goods sold					
c	Net income or (loss) from sales of inventory . . .					
Miscellaneous Revenue			Business Code			
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d					
12	Total revenue. See Instructions		542,743,418	516,418,912	0	16,571,490

Part IX

Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	3,836,835	3,836,835		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	6,448,310		6,448,310	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	147,827,042	133,153,432	14,673,610	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	15,768,640	13,443,655	2,324,985	
9	Other employee benefits.	30,254,148	27,396,225	2,857,923	
10	Payroll taxes.	10,590,221	8,903,851	1,686,370	
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	2,118,480	1,583,102	535,378	
c	Accounting.	374,757		374,757	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	521,993		521,993	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	14,864,958	10,768,460	4,096,498	
12	Advertising and promotion.	41,917		41,917	
13	Office expenses.	1,258,647	1,085,100	173,547	
14	Information technology.	5,927,639	5,243,408	684,231	
15	Royalties.	189,698	189,698		
16	Occupancy.	7,725,755	2,656,929	5,068,826	
17	Travel.	5,900,841	5,151,293	749,548	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	250,753	93,447	157,306	
20	Interest.	4,174,305	1,405	4,172,900	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	16,046,899	10,307,754	5,739,145	
23	Insurance.	792,510	331,274	461,236	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	SUBCONTRACTS	214,865,479	214,865,479		
b	OTHER INDIRECT	19,800,396	18,961,749	838,647	
c	OTHER MATERIALS	14,409,632	14,409,632		
d	OTHER EQUIPMENT	1,241,881	1,021,785	220,096	
e	All other expenses	345,771	318,906	26,865	
25	Total functional expenses. Add lines 1 through 24e.	525,577,507	473,723,419	51,854,088	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		46,898,012	2	52,110,560
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		32,090,927	4	39,571,589
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		13,652,256	9	19,812,992
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	355,745,955		
	b	Less accumulated depreciation	10b	170,932,616	181,831,421	10c 184,813,339
	11	Investments—publicly traded securities		167,403,369	11	201,866,588
	12	Investments—other securities See Part IV, line 11		153,581	12	306,682
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		54,816,179	15	49,372,998
	16	Total assets. Add lines 1 through 15 (must equal line 34)		496,845,745	16	547,854,748
Liabilities	17	Accounts payable and accrued expenses		69,705,107	17	68,961,443
	18	Grants payable			18	
	19	Deferred revenue		11,416,534	19	26,925,710
	20	Tax-exempt bond liabilities		79,182,924	20	79,240,115
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		54,472,238	25	38,943,752
	26	Total liabilities. Add lines 17 through 25		214,776,803	26	214,071,020
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		282,068,942	27	333,783,728
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		282,068,942	33	333,783,728
	34	Total liabilities and net assets/fund balances		496,845,745	34	547,854,748

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	542,743,418
2	Total expenses (must equal Part IX, column (A), line 25)	2	525,577,507
3	Revenue less expenses Subtract line 2 from line 1	3	17,165,911
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	282,068,942
5	Net unrealized gains (losses) on investments	5	13,143,719
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	21,405,156
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	333,783,728

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization CHARLES STARK DRAPER LABORATORY INC	Employer identification number 04-2505372
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,986,426	3,734,351	6,944,976	7,288,039	9,753,016	29,706,808
2 Tax revenues levied for the 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	4,123,470	14,781,224	3,736,752	3,630,186	3,097,436	29,369,068
4 Total. Add lines 1 through 3	6,109,896	18,515,575	10,681,728	10,918,225	12,850,452	59,075,876
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)						
6 Public support. Subtract line 5 from line 4						59,075,876

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	6,109,896	18,515,575	10,681,728	10,918,225	12,850,452	59,075,876
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,518,887	12,940,432	15,638,595	14,189,345	16,571,490	74,858,749
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						133,934,625

12 Gross receipts from related activities, etc (see instructions)

12

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))

14

44 1/10 %

15 Public support percentage for 2011 Schedule A, Part II, line 14

15

43 1/10 %

16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 purpose						
3 Gross receipts from activities that 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 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 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, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 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.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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.

OMB No 1545-0047

2012

Open to Public Inspection

If the organization answered “Yes” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered “Yes” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization CHARLES STARK DRAPER LABORATORY INC	Employer identification number 04-2505372
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If “Yes,” describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments 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) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		26,707													
c Total lobbying expenditures (add lines 1a and 1b)		26,707													
d Other exempt purpose expenditures		525,550,800													
e Total exempt purpose expenditures (add lines 1c and 1d)		525,577,507													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	8,436	20,011	6,091	26,707	61,245
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

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)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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 carry over 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	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

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

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

Name of the organization CHARLES STARK DRAPER LABORATORY INC	Employer identification number 04-2505372
--	---

Part I

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
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

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

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		32,984,487		32,984,487
b Buildings		180,326,616	58,056,349	122,270,267
c Leasehold improvements		8,132,964	3,695,634	4,437,330
d Equipment		130,051,253	108,093,190	21,958,063
e Other		4,250,635	1,087,443	3,163,192
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				184,813,339

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return					
1	Total revenue, gains, and other support per audited financial statements			1	579,328,637
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	13,143,719		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	24,153,191		
e	Add lines 2a through 2d			2e	37,296,910
3	Subtract line 2e from line 1			3	542,031,727
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	521,993		
b	Other (Describe in Part XIII)	4b	189,698		
c	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5	542,743,418
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
1	Total expenses and losses per audited financial statements			1	527,613,851
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	2,748,035		
e	Add lines 2a through 2d			2e	2,748,035
3	Subtract line 2e from line 1			3	524,865,816
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	521,993		
b	Other (Describe in Part XIII)	4b	189,698		
c	Add lines 4a and 4b		4c		
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5	525,577,507
Part XIII Supplemental Information					

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

Identifier	Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS		FAS 158 PENSION & POST RETIREMENT PLAN 21,405,156 RENTAL EXPENSES NETTED AGAINST REVENUE ON FORM 990 2,748,035
PART XI, LINE 4B - OTHER ADJUSTMENTS		ROYALTIES PAID 189,698
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES NETTED AGAINST REVENUE ON FORM 990 2,748,035
PART XII, LINE 4B - OTHER ADJUSTMENTS		ROYALTIES PAID 189,698
		PART XI LINE 8 - FAS 158 PENSION & POST RETIREMENT PLAN \$21,405,156 PART XII LINE 4B ROYALTIES PAID \$189,689 PART XIII LINE 4B ROYALTIES PAID \$189,689

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
CHARLES STARK DRAPER LABORATORY INC

Employer identification number
04-2505372

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE	0	0	TRAVEL EXPENSES	RESEARCH	443,550
ASIA	0	0	TRAVEL EXPENSES	RESEARCH	21,201
MIDDLE EAST	0	0	TRAVEL EXPENSES	RESEARCH	10,211
NORTH AMERICA	0	0	TRAVEL EXPENSES	RESEARCH	21,435
3a Sub-total	0	0			496,397
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			496,397

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes

☒ No

Supplemental Information
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F (Form 990) 2012

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
CHARLES STARK DRAPER LABORATORY INC

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

Employer identification number
04-2505372

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

17

3

Enter total number of other organizations listed in the line 1 table

1

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.
Part III can be duplicated if additional space is needed.

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

Part IV

Supplemental Information.

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 DRAPER HAS TWO TYPES OF GRANTS SUB-AWARDS AND FELLOWSHIP GRANTS THE MONITORING PROCEDURES FOR THE USE OF GRANT FUNDS FOR EACH TYPE IS DESCRIBED BELOW DRAPER MONITORS GRANT FUNDS EXPENDED THROUGH SUB-AWARDS IN ACCORDANCE WITH ITS SUBCONTRACTS ADMINISTRATION POLICIES AND PROCEDURES MANUAL AUTHORIZED DRAPER PERSONNEL SUBMIT PURCHASE REQUISITIONS FOR SUB-AWARDS TO BE ISSUED WITH GRANT FUNDS, AND SUBCONTRACT ADMINISTRATORS REVIEW THE PURCHASE REQUISITION BEFORE APPROVAL OF THE SUB-AWARD SUBCONTRACT ADMINISTRATORS FLOW DOWN ALL APPLICABLE GRANT TERMS TO THE SUB-AWARDEE AS PART OF THE SUB-AWARD, AND THE PROGRAMS DEPARTMENT AND SUBCONTRACTS MONITOR SUB-AWARDEE PERFORMANCE THROUGH MONTHLY TECHNICAL AND FINANCIAL REPORTS BY THE SUB-AWARDEE DRAPER MONITORS GRANT FUNDS EXPENDED FOR FELLOWSHIP SUPPORT GRANTS TO FIT WITHIN THE OVERALL HIRING PLAN, TECHNOLOGY CONCENTRATION FOCUS AREAS IMPORTANT TO DRAPER AND OUR CUSTOMERS, THE AVAILABILITY OF SUPERVISORS AND GRADUATION RATES OF FELLOWS CURRENTLY ENROLLED IN THE PROGRAM DOLLAR AMOUNTS ARE NEGOTIATED PER DEGREE PROGRAM WITH EACH UNIVERSITY AND UPDATED YEARLY AUTHORIZED DRAPER PERSONNEL SUBMIT PURCHASE REQUISITIONS ALL REQUISITIONS ARE APPROVED BY THE OWNER OF THE PROJECT NUMBER PER DRAPERS BUSINESS PROCESS AN APPROVED PURCHASE ORDER IS PLACED WITH THE UNIVERSITY FOR THE DURATION OF THE STUDENTS TENURE MONTHLY INVOICES ARE SENT BY THE UNIVERSITY TO DRAPER, APPROVED BY THE DRAPER SUPERVISOR AND PAID TO THE UNIVERSITY AT THE END OF THE FISCAL YEAR, A RECONCILIATION IS DONE TO CLOSE OUT THE ORDER

Software ID:

Software Version:

EIN: 04-2505372

Name: CHARLES STARK DRAPER LABORATORY INC

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS EYE AND EAR INFIRMARY243 CHARLES STREET BOSTON,MA 02114	04-2103591	501(C)(3)	257,067				RESEARCH GRANT SUB-AWARD
NORTHEASTERN UNIVERSITY360 HUNTINGTON AVE 440 DANA RESEARCH CENTER BOSTON,MA 02115	04-1679980	501(C)(3)	30,402				RESEARCH GRANT SUB-AWARD

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MASSACHUSETTS INSTITUTE OF TECHNOLOGY77 MASS AVE CAMBRIDGE,MA 02139	04-2103594	501(C)(3)	548,938				RESEARCH GRANT SUB-AWARD
PARTNERS HEALTHCARE SYSTEM INC221 LONGWOOD AVE BOSTON,MA 02115	04-3230035	501(C)(3)	186,821				RESEARCH GRANT SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF CALIFORNIA SANTA BARBARA3227 CHEADLE HALL SANTA BARBARA, CA 93106	95-6006145	501(C)(3)	63,098				RESEARCH GRANT SUB-AWARD
UNIVERSITY OF MASSACHUSETTS55 LAKE AVE NORTH WORCESTER,MA 01655	04-3167352	501(C)(3)	579,585				RESEARCH GRANT SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF TAMPA 401 W KENNEDY BLVD BOX L TAMPA,FL 33606	59-0624459	501(C)(3)	89,199				RESEARCH GRANT SUB-AWARD
JOHNS HOPKINS UNIVERSITY 3400 N CHARLES STREET 600W WYMAN BUILDING BALTIMORE,MD 21218	52-0595110	501(C)(3)	114,474				RESEARCH GRANT SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF SOUTH FLORIDA3650 SPECTRUM BLVD SUITE 160 TAMPA,FL 33612	59-3102112		19,627				RESEARCH GRANT SUB-AWARD
UNIVERSITY OF MICHIGAN3003 SOUTH STATE STREET ANN ARBOR,MI 48109	38-6006309	501(C)(3)	30,882				RESEARCH GRANT SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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DAVID CLARK COMPANY INCORPORATED360 FRANKLIN STREET WORCESTER,MA 01615	04-2557451		6,250				RESEARCH GRANT SUB-AWARD
BOSTON UNIVERSITY595 COMMONWEALTH AVENUE BOSTON,MA 02215	04-2103547	501(C)(3)	117,811				FELLOWSHIPS SUPPORT

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS INSTITUTE OF TECHNOLOGY77 MASS AVE CAMBRIDGE,MA 02139	04-2103594	501(C)(3)	1,368,201				FELLOWSHIPS SUPPORT
NORTHEASTERN UNIVERSITY360 HUNTINGTON AVE 440 DANA RESEARCH CENTER BOSTON,MA 02115	04-1679980	501(C)(3)	108,144				FELLOWSHIPS SUPPORT

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TUFTS UNIVERSITY169 HOLLAND ST SOMERVILLE,MA 02144	04-2103634	501(C)(3)	108,448				FELLOWSHIPS SUPPORT
UNIVERSITY OF SOUTH FLORIDA3650 SPECTRUM BLVD SUITE 160 TAMPA,FL 33612	59-3102112		132,228				FELLOWSHIPS SUPPORT

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORCESTER POLYTECHNIC INSTITUTE 100 INSTITUTE RD WORCESTER,MA 01609	04-2121659	501(C)(3)	44,419				FELLOWSHIPS SUPPORT
WILLIAM MARSH RICE UNIVERSITY6100 MAIN ST HOUSTON,TX 77005	74-1109620	501(C)(3)	31,240				FELLOWSHIPS SUPPORT

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
CHARLES STARK DRAPER LABORATORY INC

Employer identification number
04-2505372

Part I

Questions Regarding Compensation

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
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, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	FIRST CLASS TRAVEL FOR BOARD MEMBERS, OFFICERS, AT THEIR CHOOSING, HAS BEEN A STANDING POLICY SINCE 1996. TAX INDEMNIFICATION AND GROSS UP PAYMENTS EXIST UNDER OUR NEW HIRE/EMPLOYEE RELOCATION POLICY WHERE CERTAIN COSTS MIGHT BE CHARACTERIZED AS TAXABLE INCOME, THE LABORATORY WILL REIMBURSE THE EMPLOYEE FOR ANY TAX EFFECT ASSOCIATED WITH THE MOVE. GROSS UP PAYMENTS ALSO EXIST FOR SENIOR MANAGEMENT UPON TAKING LUMP SUM DISTRIBUTIONS FROM THEIR RETIREMENT PLANS. THE GROSS UP IS INTENDED TO ENSURE THAT, SHOULD THE EMPLOYEE PURCHASE AN ANNUITY, THAT ANNUITY WILL PROVIDE THE EQUIVALENT OF A PENSION PAYMENT. PART II (C) IN PREVIOUS YEARS, DRAPER HAS REPORTED AMOUNTS PAID TO OFFICERS FROM THE SUPPLEMENTAL RETIREMENT PLAN IN A LUMP SUM WHEN IT WAS PAID. GOING FORWARD, DRAPER WILL REPORT AMOUNTS ON THE 990 AS THEY ARE INCURRED. THE PURPOSE OF THIS PLAN IS TO ASSURE THAT CORPORATE OFFICERS RECEIVE A REASONABLE LEVEL OF RETIREMENT COMPENSATION IN RELATION TO THEIR LEVEL OF COMPENSATION AND LENGTH OF SERVICE AT THE LABORATORY. ALL OFFICERS ARE AUTOMATICALLY ENROLLED IN THIS PLAN AND BENEFITS ARE CALCULATED AS OF THE FIRST DAY OF THE MONTH COINCIDENT WITH OR NEXT FOLLOWING THE OFFICER'S MANDATORY RETIREMENT DATE. THE DEFERRED COMPENSATION FOR THE SUPPLEMENTAL RETIREMENT PLAN IS INCLUDED IN THE FINANCIAL STATEMENTS. THE IRS FORMS 990 FOR FISCAL YEARS 2008 THROUGH 2012 (TAX YEARS 2007 THROUGH 2011) DO NOT INCLUDE DEFERRED COMPENSATION FOR THE SUPPLEMENTAL RETIREMENT PLAN FOR CORPORATE OFFICERS (SRPCO). IF AN OFFICER IS EMPLOYED, THE AMOUNT IS ACCRUED. WHEN AN OFFICER RETIRES, THE AMOUNT IS PAID. THE FOLLOWING AMOUNTS SHOULD HAVE BEEN INCLUDED IN SCHEDULE J, PART II (C): JOHN STILLWELL: YEAR 2008 - \$467,524, YEAR 2009 \$188,763, YEAR 2010 - \$101,096, YEAR 2011 - \$82,788, YEAR 2012 - \$208,786. JOHN STILLWELL, VICE PRESIDENT FOR STRATEGIC SYSTEMS, WHO RETIRED DURING THE YEAR RECEIVED \$1,327,890 FROM THE SUPPLEMENTAL RETIREMENT PLAN FOR CORPORATE OFFICERS. LEN POLIZZOTTO: YEAR 2010, \$198,023, YEAR 2011 - \$82,457, YEAR 2012 - \$131,460. JAMES SHEILDS: YEAR 2008 - \$673,189, YEAR 2009 \$343,512, YEAR 2010 - \$207,467, YEAR 2011 - \$152,274, YEAR 2012 - \$288,530. DARRYL SARGENT: YEAR 2008 - \$348,253, YEAR 2009 \$308,478, YEAR 2010 - \$53,895, YEAR 2011 - \$(123,628), YEAR 2012 - \$208,085. JOHN DOWDLE: YEAR 2010 - \$707,775, YEAR 2011 - \$(73,507), YEAR 2012 - \$170,323. ELIZABETH MORA: YEAR 2009 \$55,703, YEAR 2010 - \$89,954, YEAR 2011 - \$96,959, YEAR 2012 - \$139,488.
	PART I, LINE 5	KEY MEMBERS OF THE TECHNICAL, PROGRAM, FINANCE AND ADMINISTRATIVE STAFF ARE ELIGIBLE TO PARTICIPATE IN THE CORPORATE MANAGEMENT INCENTIVE PROGRAM (CMIP). PARTICIPANTS INCLUDE, BUT ARE NOT LIMITED TO, THE EMPLOYEES LISTED ON SCHEDULE J. APPROXIMATELY 35-45 PERSONNEL MAY BE ELIGIBLE IN A GIVEN YEAR. THE PROGRAM IS BASED ON FOUR METRICS: SPONSOR SATISFACTION, SPONSORED REVENUE GROWTH AND COST MANAGEMENT, HUMAN CAPITAL MANAGEMENT FOCUSED ON RETENTION AND DIVERSITY AND QUALITY OF THE SPONSORED AND INDEPENDENT RESEARCH AND DEVELOPMENT PROGRAMS. ALL PARTICIPANT AWARDS ARE REVIEWED BY THE PRESIDENT OF THE LABORATORY AND REPORTED TO THE BOARD ANNUALLY.

Software ID:

Software Version:

EIN: 04-2505372

Name: CHARLES STARK DRAPER LABORATORY INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JAMES D SHIELDS	(i) (ii)	503,976 0	116,041 0	31,402 0	179,593 0	19,468 0	850,480 0	0 0
JOHN R DOWDLE	(i) (ii)	305,229 0	50,510 0	11,947 0	-70,230 0	13,400 0	310,856 0	0 0
ELIZABETH MORA	(i) (ii)	326,895 0	54,371 0	9,232 0	86,403 0	7,149 0	484,050 0	0 0
LEN POLIZZOTTO	(i) (ii)	295,748 0	49,724 0	10,275 0	103,717 0	17,072 0	476,536 0	0 0
DARRYL G SARGENT	(i) (ii)	306,791 0	51,992 0	11,136 0	-91,735 0	13,420 0	291,604 0	0 0
JOHN W STILLWELL THRU 10312	(i) (ii)	229,742 0	55,665 0	1,385,496 0	20,466 0	21,484 0	1,712,853 0	0 0
MELINDA J BROWN	(i) (ii)	176,954 0	30,308 0	14,676 0	19,400 0	5,748 0	247,086 0	0 0
STEVEN DITULLIO SINCE 10412	(i) (ii)	246,600 0	45,608 0	66,698 0	650,908 0	13,223 0	1,023,037 0	0 0
PAUL ROSENSTRACH	(i) (ii)	231,514 0	39,716 0	17,972 0	25,456 0	14,161 0	328,819 0	0 0
JACK BARRY	(i) (ii)	183,143 0	39,322 0	21,475 0	24,208 0	12,939 0	281,087 0	0 0
NEIL ADAMS	(i) (ii)	204,251 0	39,154 0	22,552 0	23,454 0	18,615 0	308,026 0	0 0
FRANK J SERNA	(i) (ii)	211,670 0	38,072 0	17,231 0	23,658 0	18,625 0	309,256 0	0 0
PHILIP S BABCOCK IV	(i) (ii)	217,459 0	36,705 0	5,299 0	22,964 0	13,027 0	295,454 0	0 0
DAVID NEYLAND	(i) (ii)	183,082 0	0 0	109,761 0	21,463 0	2,164 0	316,470 0	0 0
RICHARD JOHN RUSSELL	(i) (ii)	196,313 0	36,541 0	22,222 0	22,869 0	15,350 0	293,295 0	0 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
CHARLES STARK DRAPER LABORATORY INC

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 in Part VI.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number
04-2505372

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MASSACHUSETTS DEVELOPMENT	04-3431814	57583RB53	10-23-2008	80,000,000	REFINANCING \$72,800,000 SERIES 2000 BONDS		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	78,997,809							
4	Gross proceeds in reserve funds	5,877,809							
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	320,000							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	5,877,809							
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2010							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

				A		B		C		D	
				Yes	No	Yes	No	Yes	No	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?				X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?				X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X						
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
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 00000%							
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%							
6	Total of lines 4 and 5	0%							
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?		X						
c	No rebate due?		X						
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (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?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI

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

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization CHARLES STARK DRAPER LABORATORY INC	Employer identification number 04-2505372
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	SEE RESPONSE TO QUESTION 7A

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	MEMBERSHIP CONSISTS OF BETWEEN 21 AND 52 PERSONS AS DETERMINED BY THE MEMBERS IN OFFICE FROM TIME TO TIME. MEMBERSHIP IS DIVIDED INTO THREE CLASSES. THEIR TERMS OF OFFICE ARE FIXED SO THAT THE TERM OF OFFICE OF ONLY THOSE MEMBERS IN ONE CLASS WILL EXPIRE AT EACH ANNUAL MEETING OF THE MEMBERS. MEMBERSHIP IS NOT ASSIGNABLE BY OPERATION OF LAW OR OTHERWISE. EACH MEMBER SHALL HAVE ONE VOTE. MEMBERS MAY VOTE EITHER IN PERSON OR BY PROXY. WHEN A DULY FORMED QUORUM (AS DETERMINED BY LAW, THE ARTICLES OF INCORPORATION OR THE BYLAWS) IS PRESENT, ANY MATTER BEFORE A DULY CALLED MEETING SHALL BE DECIDED BY A VOTE OF A MAJORITY OF THE MEMBERS EXCEPT WHERE A LARGER VOTE IS REQUIRED BY LAW, THE ARTICLES OF ORGANIZATION OR THE BYLAWS. ANY ELECTION IS DETERMINED BY A PLURALITY OF VOTES CAST EXCEPT WHERE REQUIRED BY LAW, THE ARTICLES OR THE BYLAWS. THE MEMBERS AT EACH ANNUAL MEETING FIX THE NUMBER OF DIRECTORS (NOT LESS THAN 3 OR MORE THAN 17) AND ELECT THE NUMBER OF DIRECTORS SO FIXED. ALL ACTIVITIES OF THE CORPORATION ARE CONDUCTED UNDER THE DIRECTION OF THE DULY ELECTED BOARD OF DIRECTORS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	MFA PREPARES THE FORM 990 USING INFORMATION PROVIDED BY DRAPER. PRIOR TO PROVIDING THE 990 TO THE GOVERNING BODY, THE DIRECTOR OF AUDIT AND COMPLIANCE PERFORMS AN INITIAL REVIEW. THE CFO AND PRESIDENT THEN PERFORM THEIR OWN REVIEWS OF THE DOCUMENT. A COPY OF THE 990 IS THEN MADE AVAILABLE TO THE BOARD OF DIRECTORS VIA THE ORGANIZATIONS INTRANET AND A PRESENTATION IS GIVEN TO THE AUDIT COMMITTEE. A FINAL REVIEW IS PERFORMED BY THE CFO AND CEO, AND THEN THE FORM 990 IS SIGNED AND FILED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	DRAPER SENDS AN ANNUAL DISCLOSURE REQUEST TO EACH BOARD MEMBER WITH AN EXTENSIVE SET OF QUESTIONS PERTAINING TO RELATIONSHIPS AND FINANCIAL INTERESTS WITH THE LABORATORY AND THE BOARD MEMBERS. BASED ON DATA PROVIDED BY DIRECTORS AND OFFICERS, LABORATORY MAINTAINS A MATRIX OF BOARD POSITIONS, AFFILIATIONS AND ORGANIZATIONS WITH WHOM THE DIRECTORS MAY HAVE A RELATIONSHIP REQUIRING DISCLOSURE. COMPLIANCE, AND LEGAL IF NEEDED, REVIEWS DISCLOSURES FOR POTENTIAL RELATIONSHIPS MEETING DISCLOSURE REQUIREMENTS. OUTSIDE TAX FIRM PERSONNEL MAY ALSO BE CONSULTED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	DRAPER MAINTAINS TWO FULL TIME PERSONNEL WHO ARE RESPONSIBLE FOR COMPILATION, ANALYSIS AND MANAGEMENT OF THE COMPENSATION BUDGET PROCESS. THEY PARTICIPATE IN NATIONAL AND LOCAL SURVEYS THAT INCLUDE A BROAD RANGE OF PARTICIPATING COMPANIES. THE RESULTING DATA PROVIDE INFORMATION RELATED TO MARKET RATES, SALARY RANGES, COMPENSATION BUDGET PLANNING, BENEFITS INFORMATION, AND GENERAL WORK LIFE POLICIES AND PRACTICES. PERTINENT SURVEY INFORMATION IS ANALYZED, REVIEWED AND UTILIZED WHEN ASSESSING APPROPRIATE WAGES, GRADING FOR BENCHMARK POSITIONS. THE COMPENSATION BUDGET AS A WHOLE IS PRESENTED TO THE BOARD FOR REVIEW AND APPROVAL AND INCLUDES A PRESENTATION ON HEADCOUNT, UPCOMING RESEARCH ACTIVITIES AND SPONSOR AWARDS BOTH IN PROCESS AND ANTICIPATED. THE COMPENSATION COMMITTEE ALSO VOTES TO APPROVE THE COMPENSATION OF THE CEO AND OFFICERS BASED ON THEIR SURVEYS WHICH INCLUDES THIRD PARTY SURVEYS OF LABORATORIES THROUGHOUT THE COUNTRY.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	DRAPER PUBLISHES AN ANNUAL REPORT AVAILABLE TO THE PUBLIC UPON REQUEST DRAPER ALSO MAINTAINS A LINK ON GOVERNANCE ON ITS WEBSITE AT WWW.DRAPER.COM

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	DRAPER PUBLISHES AN ANNUAL REPORT AVAILABLE TO THE PUBLIC UPON REQUEST DRAPER ALSO MAINTAINS A LINK ON GOVERNANCE ON ITS WEBSITE AT WWW.DRAPER.COM

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	FAS 158 PENSION & POST RETIREMENT PLAN 21,405,156

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR

Identifier	Return Reference	Explanation
	TAX YEAR	THE ORGANIZATION FISCAL CALENDAR ENDS ON THE FRIDAY CLOSEST TO JUNE 30TH AND AS A RESULT A YEAR WILL CONTAIN EITHER 52 OR 53 WEEKS THIS TAX YEAR ENDED ON JUNE 28, 2013 AND CONTAINED 52 WEEKS

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2012

Open to Public Inspection

Name of the organization
CHARLES STARK DRAPER LABORATORY INC

Employer identification number
04-2505372

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)							
(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 section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling 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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) ONE HAMPSHIRE CONDO TRUST C/O 555 TECH SQ MS 34 CAMBRIDGE, MA 02139 56-6655561	REAL ESTATE	MA	THE CHARLES STARK DRAPER LABORATORY INC	T			80 150 %		No

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ONE HAMPSHIRE CONDO TRUST	P	2,714,737	
(2) ONE HAMPSHIRE CONDO TRUST	Q	2,450,085	

Schedule R (Form 990) 2012

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.

[illegible]

Software ID:

Software Version:

EIN: 04-2505372

Name: CHARLES STARK DRAPER LABORATORY INC

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation	
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