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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

SEE SCHEDULE O

2

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

☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3

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

☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 962,194,000 including grants of \$ 66,667,736) (Revenue \$ 537,035,000)

THE UNIVERSITY IS RENOWNED FOR ITS UNDERGRADUATE, GRADUATE, PROFESSIONAL, POST-DOCTORAL, AND CONTINUING EDUCATION PROGRAMS THE PRIMARY CAMPUSES ARE IN ITHACA, NEW YORK AND WEILL-CORNELL MEDICAL COLLEGE LOCATED IN NEW YORK CITY THE UNIVERSITY ALSO HAS A SIGNIFICANT INTERNATIONAL PRESENCE IN EDUCATION AND IS NOTED FOR ITS MEDICAL COLLEGE IN QATAR DURING THE FISCAL YEAR, THE UNIVERSITY GRANTED THE FOLLOWING ACADEMIC DEGREES UNDERGRADUATE (3,577), MASTERS (2,348), PHD (561), JD, MD, DVM (409)

4b

(Code) (Expenses \$ 815,166,000 including grants of \$) (Revenue \$ 751,957,000)

MEDICAL SERVICES, INCLUDING THE EDUCATION AND TRAINING OF PHYSICIANS, IS A MAJOR COMPONENT OF THE UNIVERSITY'S MISSION THE PHYSICIAN ORGANIZATION IS AN INTEGRAL PART OF THE MEDICAL SCHOOL AND THE UNIVERSITY IT PROVIDES THE PATIENT BASE ESSENTIAL FOR TEACHING, RESEARCH, AND CLINICAL SERVICES

4c

(Code) (Expenses \$ 539,638,000 including grants of \$ 60,803,441) (Revenue \$ 588,580,000)

RESEARCH, BOTH BASIC AND APPLIED, IS ALSO A CORE MISSION-RELATED ACTIVITY REVENUES FROM SPONSORED AWARDS INCLUDE \$449 MILLION IN DIRECT SUPPORT AND \$139 MILLION IN INDIRECT COST RECOVERIES ALTHOUGH THE REVENUES INCLUDE GRANT AND CONTRACT REVENUE FOR PUBLIC OUTREACH AND INSTRUCTION, THE SINGLE LARGEST PORTION IS RESEARCH RELATED

4d

Other program services (Describe in Schedule O)


























(Expenses \$ 519,407,279 including grants of \$) (Revenue \$ 743,408,929)

4e

Total program service expenses

2,836,405,279

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 Yes	
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 Yes	
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	No
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 Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 	16 Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
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	Yes	
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	Yes	
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	Yes	
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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	Yes	
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	Yes	
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	Yes	
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.	28,237	
1b	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.	37,575	
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?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
b	If "Yes," enter the name of the foreign country: IT, FR, UK, AS, NP, QA 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?	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	Yes	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	Yes	
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?		No
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
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.		
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.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent		
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	No
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
b	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		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	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
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 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	Yes
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA
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	UNIVERSITY CONTROLLER 341 Pine Tree Road ITHACA, NY (607) 255-3581

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

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 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

[illegible]

Part VII

(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			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							25,246,937	0	1,136,854	

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 **3,124**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <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
SKIDMORE OWINGS MERRILL LLP , 14 WALL ST NEW YORK NY 10005	ARCHITECTURE	2,162,100
LECHASE CONSTRUCTION SERVICES LLC , 300 TROLLEY BLVD ROCHESTER NY 14606	CONSTRUCTION	5,720,829
ARCHI-TECHNOLOGY LLC , 15 METRO PARK ROCHESTER NY 14623	NETWORK & TELECOM	909,380
FRIED FRANK HARRIS SHRIVER JAC , 1 NEW YORK PLZ NEW YORK NY 10004	LEGAL	908,249
EDGEROCK TECHNOLOGIES LLC , 260 FRANKLIN ST FL 11 BOSTON MA 02110	IT CONSULT SERVICES	671,482

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 ►102

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	1,147,286				
	c	Fundraising events	1c	2,265,986				
	d	Related organizations	1d	6,467,595				
	e	Government grants (contributions)	1e	69,683,875				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	399,048,646				
	g	Noncash contributions included in lines 1a-1f \$		11,880,706				
	h	Total. Add lines 1a-1f		478,613,388				
Program Service Revenue			Business Code					
	2a	EDUCATION TUITION NET OF DISCOUNT	900099	537,035,084	537,035,084			
	b	GRANTS & CONTRACTS FOR RESEARCH	900099	588,579,940	588,579,940			
	c	MEDICAL SERVICES	900099	751,956,806	751,956,806			
	d	LAND GRANT MISSION GOVT APPROP	900099	152,189,666	152,189,666			
	e	AUXILIARY ENT -ROOM AND BOARD	900099	139,828,522	139,828,522			
	f	All other program service revenue		451,736,955	450,172,486	1,564,469		
	g	Total. Add lines 2a-2f		2,621,326,973				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		64,647,171	0	4,706,217	59,940,954	
	4	Income from investment of tax-exempt bond proceeds . . .		563	0	0	563	
	5	Royalties		12,100,304	0	0	12,100,304	
	6a	(i) Real		(ii) Personal				
		Gross rents		4,191,473				
		b	Less rental expenses	4,464,560				
		c	Rental income or (loss)	-273,087	0			
	d	Net rental income or (loss)		-273,086	0	0	-273,086	
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory		7,447,077,000	237,564			
		b	Less cost or other basis and sales expenses	7,250,356,436	237,564			
		c	Gain or (loss)	196,720,564				
	d	Net gain or (loss)		196,720,564	0	0	196,720,564	
	8a	Gross income from fundraising events (not including \$ 2,265,986 of contributions reported on line 1c) See Part IV, line 18						
	a			249,631				
	b	Less direct expenses		1,436,825				
	c	Net income or (loss) from fundraising events . . .		-1,187,194		0	-1,187,194	
	9a	Gross income from gaming activities See Part IV, line 19						
	a							
	b	Less direct expenses						
c	Net income or (loss) from gaming activities . . .		0		0	0		
10a	Gross sales of inventory, less returns and allowances							
a			22,153,487					
b	Less cost of goods sold		21,782,323					
c	Net income or (loss) from sales of inventory . . .		371,164	0	157,697	213,467		
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		0					
12	Total revenue. See Instructions		3,372,319,847	2,619,762,504	6,428,383	267,515,572		

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.	60,803,441	60,803,441		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	65,162,328	65,162,328		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	1,505,408	1,505,408		
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	8,620,730	862,073	4,310,365	3,448,292
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7	Other salaries and wages.	1,552,193,251	1,345,631,660	171,689,538	34,872,053
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	86,779,344	66,452,696	16,895,071	3,431,577
9	Other employee benefits.	306,988,379	267,079,890	33,768,721	6,139,768
10	Payroll taxes.	68,744,748	59,807,931	7,561,922	1,374,895
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	9,147,326	8,141,120	1,006,206	
c	Accounting.	1,103,517	1,103,517		
d	Lobbying.	522,706			522,706
e	Professional fundraising services. See Part IV, line 17.	126,093			126,093
f	Investment management fees.	2,169,747	2,169,747		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	138,897,913	121,045,737	15,331,168	2,521,008
12	Advertising and promotion.	0			
13	Office expenses.	42,780,921	37,219,401	4,705,902	855,618
14	Information technology.	34,205,592	29,758,864	3,762,616	684,112
15	Royalties.	3,046,986	3,046,986		
16	Occupancy.	110,662,183	96,276,099	12,172,840	2,213,244
17	Travel.	38,151,778	29,376,869	5,722,766	3,052,143
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	10,512,785	9,146,122	1,156,407	210,256
20	Interest.	92,465,126	92,465,126		
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	207,630,740	184,791,359	22,839,381	
23	Insurance.	47,045,916	45,072,870	1,669,501	303,545
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	Other Supplies (Lab, Computer)	51,165,438	45,537,240	5,628,198	
b	Sub Contracts	50,037,698	50,037,698		
c	Costs Other Than Campus Store	49,251,268	49,251,268		
d	Communic, Membersh, Empl Trg	18,746,444	18,558,980	187,464	
e	All other expenses	153,354,441	146,100,849	7,253,592	
25	Total functional expenses. Add lines 1 through 24e.	3,211,822,247	2,836,405,279	315,661,658	59,755,310
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) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			52,598,376	1	77,807,281
	2	Savings and temporary cash investments			210,055,803	2	178,781,163
	3	Pledges and grants receivable, net			950,934,834	3	916,191,504
	4	Accounts receivable, net			231,812,987	4	256,359,171
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0	5	0
	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			0	6	0
	7	Notes and loans receivable, net			69,441,000	7	69,393,124
	8	Inventories for sale or use			8,466,000	8	10,254,129
	9	Prepaid expenses and deferred charges			32,816,000	9	45,671,903
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	5,990,692,039			
	b	Less: accumulated depreciation	10b	2,446,227,018	3,321,898,000	10c	3,544,465,021
	11	Investments—publicly traded securities			1,068,868,000	11	1,401,035,000
	12	Investments—other securities. See Part IV, line 11			4,847,965,000	12	4,902,758,328
	13	Investments—program-related. See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			105,557,000	15	103,291,050
16	Total assets. Add lines 1 through 15 (must equal line 34)			10,900,413,000	16	11,506,007,674	
Liabilities	17	Accounts payable and accrued expenses			623,396,000	17	605,906,229
	18	Grants payable			48,067,000	18	49,201,426
	19	Deferred revenue			205,973,000	19	223,365,826
	20	Tax-exempt bond liabilities			1,312,620,000	20	1,277,410,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			0	21	0
	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			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			583,938,000	23	577,995,000
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	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			648,749,000	25	677,508,341
	26	Total liabilities. Add lines 17 through 25			3,422,743,000	26	3,411,386,822
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			2,409,552,000	27	2,750,702,852
	28	Temporarily restricted net assets			2,616,355,000	28	2,776,621,000
	29	Permanently restricted net assets			2,451,763,000	29	2,567,297,000
	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			7,477,670,000	33	8,094,620,852
34	Total liabilities and net assets/fund balances			10,900,413,000	34	11,506,007,674	

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	3,372,319,847
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,211,822,247
3	Revenue less expenses Subtract line 2 from line 1	3	160,497,600
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,477,670,000
5	Net unrealized gains (losses) on investments	5	310,477,105
6	Donated services and use of facilities	6	12,622,912
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	133,353,235
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,094,620,852

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

Additional Data

Software ID:

Software Version:

EIN: 15-0532082

Name: CORNELL UNIVERSITY

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

(A) Name and Title	(B) Average hours 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			
Stephen B Ashley Trustee	1 0 0 0	X						0	0	0
Barbara A Baird Trustee	55 0 0 0	X						217,179	0	24,799
Jessica M Bibliowicz Trustee	1 0 0 0	X						0	0	0
Samuel W Bodman Trustee	1 0 0 0	X						0	0	0
Richard Booth Trustee	1 0 0 0	X						0	0	0
Alexander Bores Trustee	15 0 0 0	X						1,031	0	0
Douglas Braunstein Trustee	1 0 0 0	X						0	0	0
Mario Cilento from 313 Trustee	1 0 0 0	X						0	0	0
Ezra Cornell Trustee	1 0 0 0	X						0	0	0
David D Croll VICE CHAIRMAN	1 0 0 0	X						0	0	0
Andrew Cuomo Trustee	1 0 0 0	X						0	0	0
Diana M Daniels VICE CHAIRMAN	1 0 0 0	X						0	0	0
Gary Davis Trustee	1 0 0 0	X						0	0	0
Darrick Evensen Trustee	1 0 0 0	X						30,480	0	0
David Fischell Trustee	1 0 0 0	X						0	0	0
Gregory Galvin Trustee	1 0 0 0	X						0	0	0
Rana Glasgal Trustee	1 0 0 0	X						0	0	0
Kenneth Goldman Trustee	1 0 0 0	X						0	0	0
Paul Gould Trustee	1 0 0 0	X						0	0	0
Nelson Hairston Trustee	55 0 0 0	X						188,409	0	31,425
Patricia Harns Trustee	1 0 0 0	X						0	0	0
Robert S Harrison Chairman of the Board of Trust	1 0 0 0	X						0	0	0
Denis Hughes thru 313 Trustee	1 0 0 0	X						0	0	0
Robert J Katz VICE CHAIRMAN	1 0 0 0	X						0	0	0
Ruben King-Shaw Trustee	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Peggy Koenig Trustee	10 00	X						0	0	0
Robert Langer Trustee	10 00	X						0	0	0
Linda Macaulay Trustee	10 00	X						0	0	0
Lowell McAdam Trustee	10 00	X						0	0	0
William McAleer Trustee	10 00	X						0	0	0
Ronald McCray Trustee	10 00	X						0	0	0
Howard Milstein Trustee	10 00	X						0	0	0
Alan Mittman Trustee	10 00	X						116,812	0	29,729
Elizabeth Moore Trustee	10 00	X						0	0	0
John Noble Trustee	10 00	X						0	0	0
Peter Nolan Trustee	10 00	X						0	0	0
Barbara G Novick Trustee	10 00	X						0	0	0
Lubna Olayan Trustee	10 00	X						0	0	0
Armando Olivera Trustee	10 00	X						0	0	0
Donald Opatmy Trustee	10 00	X						0	0	0
William Perez Trustee	10 00	X						0	0	0
Leland Pillsbury Trustee	10 00	X						0	0	0
Bruce Raynor Trustee	10 00	X						0	0	0
Philip Reilly Trustee	10 00	X						0	0	0
Gene Resnick Trustee	10 00	X						0	0	0
Meredith Rosenberg Trustee	10 00	X						0	0	0
Irene Rosenfeld Trustee	10 00	X						0	0	0
Robert Ryan Trustee	10 00	X						0	0	0
Paul Salvatore Trustee	10 00	X						0	0	0
Sheldon Silver Trustee	10 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dean Skelos Trustee	1 0 0 0	X						0	0	0
David J Skorton President	55 0 0 0	X						718,351	0	169,912
Dalia Stiller Trustee	1 0 0 0	X						0	0	0
Chiaki Tanuma Trustee	1 0 0 0	X						0	0	0
Ratan Tata Trustee	1 0 0 0	X						0	0	0
Lisa Tatum Trustee	1 0 0 0	X						0	0	0
Andrew H Tisch Vice Chairman	1 0 0 0	X						0	0	0
Sheryl Tucker Trustee	1 0 0 0	X						0	0	0
M Eileen Walker Trustee	1 0 0 0	X						0	0	0
Barton Winokur Trustee	1 0 0 0	X						0	0	0
Sheryl WuDunn Trustee	1 0 0 0	X						0	0	0
Craig Yunker Trustee	1 0 0 0	X						0	0	0
Michael Zak Trustee	1 0 0 0	X						0	0	0
Karen Zimmer Trustee	1 0 0 0	X						0	0	0
Jan Rock Zubrow CHAIRMAN OF THE EXEC COMMITTEE	1 0 0 0	X						0	0	0
Joanne DeStefano VP for Finance & CFO	55 0 1 0			X				375,952	0	45,279
W Kent Fuchs Provost	55 0 0 0			X				605,006	0	43,815
Laurie Glimcher DEAN & PROVOST OF MED AFFAIRS	55 0 0 0			X				1,080,414	0	56,049
James Mingle UNI COUNSEL & SEC OF THE CORP	55 0 0 0			X				467,987	0	43,100
Robert A Buhrman SR VP FOR RESEARCH	55 0 0 0				X			365,186	0	39,900
Stephen M Cohen EXECUTIVE VICE PROVOST	55 0 0 0				X			810,189	0	42,134
Albert Edwards Chief Investment Officer	55 0 0 0				X			1,319,146	0	45,370
Daniel M Knowles MD Chair & Professor of Pathology	55 0 0 0				X			1,760,531	0	67,333
Pak H Chung MD Professor of Obstetrics, Gynec	55 0 0 0					X		2,722,630	0	62,549
Isaac Kligman MD Professor of Obstetrics, Gynec	55 0 0 0					X		2,333,375	0	64,038

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Zev Rosenwaks MD Director and physician-in Chie	55 0 0 0					X		4,657,906	0	116,113
Steven D Spandorfer MD Professor of Obstetrics, Gynec	55 0 0 0					X		3,307,188	0	58,549
Philip E Steig Phd MD Professor and Chairman of Depa	55 0 0 0					X		3,289,379	0	71,836
Rosemary J Avery Former Trustee	55 0 0 0						X	226,829	0	41,382
Beth McKinney Former Trustee	55 0 0 0						X	65,875	0	23,669
Anthony Gotto Former Officer	55 0 0 0						X	587,082	0	59,873

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
CORNELL UNIVERSITY

Employer identification number
15-0532082

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 | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

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.")						
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 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
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				
15 Public support percentage for 2011 Schedule A, Part II, line 14		15				
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 CORNELL UNIVERSITY	Employer identification number 15-0532082
--	--

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)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<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)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -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					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
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?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		566,600
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i Other activities?	Yes		
j Total Add lines 1c through 1i			566,600
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to 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
PART 1-A-LINE 1		THE UNIVERSITY DOES NOT PARTICIPATE DIRECTLY OR INDIRECTLY IN ANY POLITICAL CAMPAIGN AND REMINDS THE UNIVERSITY COMMUNITY, AT THE TIME OF ANY IMPORTANT LOCAL, STATE OR NATIONAL ELECTION, ABOUT THE PROHIBITION AGAINST UNIVERSITY PARTICIPATION. THE MESSAGE MAKES CLEAR THAT THIS PROHIBITION DOES NOT IN ANY WAY AFFECT AN INDIVIDUAL'S PERSONAL ACTIVITIES. THE UNIVERSITY DOES NOT DEEM IT NECESSARY TO ISSUE A FORMAL POLICY ON POLITICAL CAMPAIGN PROHIBITIONS THROUGH ITS POLICY OFFICE.
PART II-B-LINE 1 I		IN ADDITION TO MEETING WITH GOVERNMENT OFFICIALS TO ADVANCE THE INTERESTS OF HIGHER EDUCATION IN GENERAL AND UNIVERSITY BASED RESEARCH ACTIVITIES IN PARTICULAR, THE UNIVERSITY IS A MEMBER OF KEY ORGANIZATIONS THAT ALSO LOBBY ON BEHALF OF ISSUES AFFECTING HIGHER EDUCATION.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
CORNELL UNIVERSITY

Employer identification number
15-0532082

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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" 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	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or 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 ▶ \$ 1,551,891

(ii) Assets included in Form 990, Part X ▶ \$ 74,330,810

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 ▶ \$

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

d

☒ Loan or exchange programs

b

☒ Scholarly research

e

☐ Other

c

☒ Preservation for future generations

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	4,799,314,000	4,928,070,000	4,259,950,000	3,836,289,000	5,248,009,000
b	Contributions	142,698,495	107,392,000	112,278,000	109,055,000	249,810,000
c	Net investment earnings, gains, and losses	517,725,141	-9,223,000	734,562,000	393,907,000	-1,369,893,000
d	Grants or scholarships	77,885,532	-30,500,080	-22,504,820	-26,326,325	-30,545,000
e	Other expenditures for facilities and programs	201,765,031	-154,846,560	-115,986,380	-129,429,505	-150,170,000
f	Administrative expenses	39,872,323	-49,269,360	-34,622,800	-39,769,170	-46,142,000
g	End of year balance	5,140,214,750	5,260,855,000	5,279,904,000	4,534,776,000	4,354,783,000

2

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

a

Board designated or quasi-endowment

25 000 %

b

Permanent endowment

68 000 %

c

Temporarily restricted endowment

7 000 %

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

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

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		23,289,241		23,289,241
b Buildings		3,596,014,236	1,540,661,729	2,055,352,507
c Leasehold improvements		429,944,843	96,878,195	333,066,648
d Equipment		757,563,880	495,012,644	262,551,236
e Other		1,183,879,839	313,674,450	870,205,389
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,544,465,021

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	3,848,954,951
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			2e	
a	Net unrealized gains on investments	2a	310,477,105		
b	Donated services and use of facilities	2b	12,622,912		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	133,377,561		
e	Add lines 2a through 2d			2e	456,477,578
3	Subtract line 2e from line 1			3	3,392,477,373
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	-20,157,526		
c	Add lines 4a and 4b			4c	-20,157,526
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5	3,372,319,847
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
1	Total expenses and losses per audited financial statements			1	3,232,191,951
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			2e	
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	20,369,704		
e	Add lines 2a through 2d			2e	20,369,704
3	Subtract line 2e from line 1			3	3,211,822,247
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
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	3,211,822,247

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 III, LINE 4		ART COLLECTION THE HERBERT F JOHNSON MUSEUM OF ART IS PARTICULARLY NOTED FOR ITS COLLECTION IN THE AREA OF ASIAN ART, 19TH AND 20TH CENTURY AMERICAN ART AND THE GRAPHIC ARTS THE COLLECTION IS USED FOR TEACHING, RESEARCH, AND PUBLIC OUTREACH THE MUSEUM'S CALENDAR OF EVENTS IS AVAILABLE ON ITS WEB SITE AND PROVIDES INFORMATION TO ENCOURAGE USE OF THE COLLECTION BY THE PUBLIC
Part V, Line 4		ENDOWMENT FUNDS THE UNIVERSITY'S ENDOWMENT CONSISTS PRIMARILY OF PERMANENT ENDOWMENT AND BOARD DESIGNATED ENDOWMENT (I E , FUNDS FUNCTIONING AS ENDOWMENT) THE INCOME FROM THE ENDOWMENT PROVIDES CRITICAL SUPPORT FOR ENDOWED FACULTY CHAIRS, STUDENT FINANCIAL AID, AND SUPPORT FOR VARIOUS INSTITUTIONAL PROGRAMS FOR TEACHING, RESEARCH, AND PUBLIC OUTREACH
PART XI, LINE 2(d)		THIS AMOUNT INCLUDES FAIR MARKET VALUE ADJUSTMENTS INCLUDED IN FINANCIAL STATEMENT REVENUE BUT EXCLUDED ON THE 990 OF \$141,682,055, LOSSES FROM UNCOLLECTIBLE PLEDGES FROM PRIOR YEARS OF \$8,304,494 AND INCOME FROM DISREGARDED LLC OF \$212,178
Part XI, Line 4(b)		THIS AMOUNT INCLUDES EXPENSES INCLUDED ON THE 990 STATEMENT OF REVENUE BUT EXCLUDED IN FINANCIAL STATEMENT REVENUE AND INCOME FROM DISREGARDED LLC INCLUDED ON 990 STATEMENT OF REVENUE BUT EXCLUDED IN FINANCIAL STATEMENT REVENUE
Part XII, Line 2(d)		THIS AMOUNT INCLUDES EXPENSES INCLUDED IN THE STATEMENT OF REVENUE BUT NOT IN PART IX, LINE 25

Additional Data

Software ID:

Software Version:

EIN: 15-0532082

Name: CORNELL UNIVERSITY

Form 990, Schedule D, Part VII - Investments— Other Securities

(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(3)Other		
(A) DOMESTIC EQUITIES	168,381,000	F
(B) FOREIGN EQUITIES	214,107,000	F
(C) HEDGED EQUITIES	543,992,000	F
(D) PRIVATE EQUITIES	1,114,779,000	F
(E) FIXED INCOME ASSET BACKED SEC	40,721,000	F
(F) FIXED INCOME CORPORATE BONDS	347,496,000	F
(G) FIXED INCOME EQUITY PRTSHPS	247,943,000	F
(H) FIXED INCOME OTHER	409,136,000	F
(I) MARKETABLE ALT AND RE	1,754,248,328	F
(J) OTHER	0	F

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
CORNELL UNIVERSITY

Employer identification number
15-0532082

Part I		YES	NO
<div>1</div> <div>Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</div>	1	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
<div>2</div> <div>Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?</div>	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> <div>Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II</div>	5b		No
	5c		No
	5d		No
	5e		No
<div>4</div> <div>Does the organization maintain the following?</div> <div>a Records indicating the racial composition of the student body, faculty, and administrative staff?</div> <div>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</div> <div>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</div> <div>d Copies of all material used by the organization or on its behalf to solicit contributions?</div> <div>If you answered "No" to any of the above, please explain If you need more space, use Part II</div>	5f		No
	5g		No
	5h		No
	6a	Yes	
<div>5</div> <div>Does the organization discriminate by race in any way with respect to</div> <div>a Students' rights or privileges?</div> <div>b Admissions policies?</div> <div>c Employment of faculty or administrative staff?</div> <div>d Scholarships or other financial assistance?</div> <div>e Educational policies?</div> <div>f Use of facilities?</div> <div>g Athletic programs?</div> <div>h Other extracurricular activities?</div> <div>If you answered "Yes" to any of the above, please explain If you need more space, use Part II</div>	6b		No
	7	Yes	
<div>6a</div> <div>Does the organization receive any financial aid or assistance from a governmental agency?</div> <div>b Has the organization's right to such aid ever been revoked or suspended?</div> <div>If you answered "Yes" to either line 6a or line 6b, explain on Part II</div>			
<div>7</div> <div>Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II</div>			

Part III Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

Identifier	Return Reference	Explanation
EXPLANATION FOR LINE 3		THE UNIVERSITY, ORGANIZED IN THE 1860'S, INCLUDED IN ITS CHARTER A COMMITMENT TO NON-DISCRIMINATION BASED ON RELIGION. FROM ITS EARLIEST HISTORY, THE UNIVERSITY ADMITTED A DIVERSE STUDENT BODY IN TERMS OF RACE, GENDER, AND RELIGION. THE STATISTICS ABOUT THE COMPOSITION OF FACULTY, STAFF, AND STUDENTS, AS WELL AS THE UNIVERSITY'S ONGOING EFFORTS TO INCREASE DIVERSITY, REFLECT THE STRONG COMMITMENT TO NON-DISCRIMINATION.
EXPLANATION FOR LINE 6A		CORNELL RECEIVES ASSISTANCE FROM BOTH THE FEDERAL GOVERNMENT AND NEW YORK STATE. THE FEDERAL GOVERNMENT PROVIDES SUPPORT FOR LOANS, STUDENT EMPLOYMENT, AND GRANTS. THE MAJOR LOAN PROGRAMS ARE W D FORD SUBSIDIZED AND UNSUBSIDIZED LOANS, PERKINS LOANS, AND DIRECT PLUS LOANS. EMPLOYMENT INCLUDES FUNDS FOR FEDERAL WORK-STUDY. THE MAJOR GRANTS ARE PELL GRANTS AND SUPPLEMENTAL EDUCATIONAL OPPORTUNITY ASSISTANCE PROGRAM (TAP).

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
CORNELL UNIVERSITY

Employer identification number
15-0532082

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
See Add'l Data					
3a Sub-total	12	541			138,266,042
b Total from continuation sheets to Part I					817,325,222
c Totals (add lines 3a and 3b)	12	541			955,591,264

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

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDENT TRAVEL GRANT/FELLOWSHIP	North America	12	69,162	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	Russia and the Newly Independent States	1	29,948	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	South America	23	125,224	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	South Asia	57	186,200	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	Sub-Saharan Africa	14	36,069	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	Europe (Including Iceland and Greenland)	46	310,469	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	Middle East and North Africa	6	138,033	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	Central America and the Caribbean	6	6,600	CHECK/ACH			
STUDENT TRAVEL GRANT/FELLOWSHIP	East Asia and the Pacific	92	603,683	CHECK/ACH			

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).

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: CORNELL UNIVERSITY

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific		7	Program Services	Education	186,481
Europe (Including Iceland and Greenland)	6	21	Program Services	Education	2,915,316
South Asia	3	16	Program Services	Education	166,872

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	Education & Research	181,342
East Asia and the Pacific	1	3	Program Services	Education & Research	2,266,781
Europe (Including Iceland and Greenland)			Program Services	Education & Research	6,600,655

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa	1	486	Program Services	Education & Research	120,786,801
North America			Program Services	Education & Research	557,039
Russia and the Newly Independent States			Program Services	Education & Research	166,791

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America		1	Program Services	Education & Research	489,522
South Asia			Program Services	Education & Research	524,037
Sub-Saharan Africa		4	Program Services	Education & Research	1,065,783

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean	1	3	Program Services	Medical Srvcs & Rsrch	884,174
East Asia and the Pacific			Program Services	Research	174,246
Europe (Including Iceland and Greenland)			Program Services	Research	699,496

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	Research	516,797
North America			Program Services	Research	83,909
South Asia			Program Services	Research	22,566

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	Research	63,390
Central America and the Caribbean			Program Services	Research Sub-Contracts	6,280
East Asia and the Pacific			Program Services	Research Sub-Contracts	759,532

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	Research Sub-Contracts	701,576
Middle East and North Africa			Program Services	Research Sub-Contracts	613,442
Middle East and North Africa			Program Services	Research Sub-Contracts	3,468,206

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America			Program Services	Research Sub-Contracts	1,257,647
South Asia			Program Services	Research Sub-Contracts	931,255
Sub-Saharan Africa			Program Services	Research Sub-Contracts	3,417,359

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Program Services	Public Srvc & Extnsn	1,515,285
South Asia			Program Services	Instruction	12,500
Central America and the Caribbean			Investments	N/A	716,119,475

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Investments	N/A	88,224,531
Europe (Including Iceland and Greenland)			Fundraising	Foundation	212,178

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
CORNELL UNIVERSITY

Employer identification number
15-0532082

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Grenzenbach Glier Associates	CONSULTING		No	0	126,093	0
JFM Group LLC	Event Management		No	2,153,589	120,750	2,032,839
Community Counseling Service Co	Fundraising Consulting		No	0	480,000	0
Prasad Consulting Research LLC	Donor Rsrch Consulting		No	0	23,000	0
ThomasMartin Events	Event Management		No	0	27,500	0
Total ▶				2,153,589	777,343	2,032,839

3

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

AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>Cabaret Night</u>	<u>Greenberg Dinnr</u>	<u>3</u>	(add col (a) through	
		(event type)	(event type)	(total number)	col (c))	
	1	Gross receipts	2,153,589	236,060	125,968	2,515,617
	2	Less Contributions . . .	2,062,121	171,560	32,305	2,265,986
3	Gross income (line 1 minus line 2)	91,468	64,500	93,663	249,631	
Direct Expenses	4	Cash prizes				
	5	Noncash prizes . . .				
	6	Rent/facility costs . . .	58,250	157,777	6,250	222,277
	7	Food and beverages .	175,058	1,956	98,677	275,691
	8	Entertainment	16,000			16,000
	9	Other direct expenses .	639,646	46,913	236,298	922,857
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(1,436,825)
	11	Net income summary Combine line 3, column (d), and line 10 ▶				-1,187,194

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
------------	------------------	-------------

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

2012

Open to Public Inspection

■ Attach to Form 990

15-0532082

Part I General Information on Grants and 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.

[illegible]

3 Enter total number of other organizations listed in the line 1 table **28**

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
(1) FINANCIAL AID	14717	65,162,328			

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
SCHEDULE I	PART II	THE UNIVERSITY REPORTS ALL GRANT RECIPIENTS INCLUDING SUB-GRANTEES OF WHICH IT IS AWARE THIS INCLUDES SUB RECIPIENT AWARDS, PRIMARILY FOR RESEARCH, TO GOVERNMENT AGENCIES, ORGANIZATIONS EXEMPT UNDER 501(C)(3) AND FOR-PROFIT ENTITIES FOR WHICH NO AUTHORITY FOR EXEMPTION IS PROVIDED
SCHEDULE I	PART III	The financial aid of \$65,162,328 represents the University's grant aid for approximately 14,717 students. This consists of aid of approximately \$20,299,976 attributable to students attending Weill Medical College's Medical or Graduate Schools with the remaining \$44,862,352 of aid being attributable to all other Colleges of Cornell University. The vast majority of financial aid provided by the University to its students is applied to tuition and mandatory fees and is referred to as "scholarship allowance" or "tuition discount". In fiscal year 2013, the scholarship allowance was \$349,142,969.

Software ID:

Software Version:

EIN: 15-0532082

Name: CORNELL UNIVERSITY

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
ME DEPT OF AGRICULTURE CONSERVATION AND FORESTRY 28 STATE HOUSE STATION AUGUSTA, ME 04333	01-6000001	STATE OF ME	14,331				Public Service/Extension
UNVSTY OF MAINE SYSTEM ACTING THROUGH THE UNVSTY 5717 CORBETT HALL ORONO, ME 04469 5717	01-6000769	501(C)(3)	138,602				Research

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
TRUSTEES OF DARTMOUTH COLLEGE OFFICE OF SPONSORED PROJECTS 11 ROP 6210 HANOVER,NH 037551404	02-0222111	501(C)(3)	266,713				Research
DARTMOUTH COLLEGE 6028 KIEWIT COMPUTER CENTER HANOVER,NH 037553523	02-0222111	501(C)(3)	5,288				Research

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
HUBBARD BROOK RESEARCH FOUNDATION PO BOX 282 NORTH WOODSTOCK,NH 03262	02-0474938	501(C)(3)	57,332				Research
UNIVERSITY OF NEW HAMPSHIRE111 SERVICE BLDG 51 COLLEGE RD 2ND DURHAM,NH 03824	02-6000937	501(C)(3)	97,720				Research

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
UNIVERSITY OF VERMONT340 WATERMAN BLDG BURLINGTON,VT 05405	03-0179440	501(C)(3)	117,516				Public Service/Extension/Research
NORTHEAST ORGANIC FARMING ASSOCIATION OF NEW YORK249 HIGHLAND AVE ROCHESTER,NY 14620	03-0259137	501(C)(3)	79,889				Research

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
NORTHEASTERN UNIVERSITY (NU)360 HUNTINGTON AVENUE 960 RENAISSAN BOSTON,MA 021155000	04-1679980	501(C)(3)	101,851				Research
HARVARD SCHOOL OF PUBLIC HEALTH677 HUNTINGTON AVENUE LL-23 BOSTON,MA 02115	04-2103580	501(C)(3)	568,968				Research

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

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PRESIDENT AND FELLOWS OF HARVARD COLLEGE (PFHC)OFFICE FOR SPONSORED RESEARCH 1350 AVE HC600 CAMBRIDGE,MA 02138	04-2103580	501(C)(3)	828,905				Research
TUFTS UNIVERSITYGRANTS AND CONTRACTS ADMINISTRATION AVENUE BOSTON,MA 02111	04-2103634	501(C)(3)	36,576				Research

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

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WELLESLEY COLLEGE106 CENTRAL STREET GRH139 WELLESLEY,MA 02481	04-2103637	501(C)(3)	51,174				Research
WOODS HOLE OCEANOGRAPHIC INST GRANT CONTRACT SERVICES BELL HOUS WOODS HOLE,MA 02543	04-2105850	501(C)(3)	129,895				Research

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

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BRIGHAM & WOMENS HOSPITALONE BRIGHAM CIRCLE SUITE 418 DEPT O BOSTON,MA 02115	04-2312909	501(C)(3)	82,808				Research
COMMUNITY TEAMWORK INC155 MERRIMACK STREET LOWELL,MA 01852	04-2382027	501(C)(3)	14,978				Public Service/Extension

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

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SPAULDING REHABILITATION HOSPITAL C125 NASHUA STREET BOSTON,MA 02114	04-2551124	501(C)(3)	51,949				Research
MASSACHUSETTS GENERAL HOSPITAL50 STANFORD STREET- SUITE 1001 BOSTON,MA 02114	04-2697983	501(C)(3)	45,454				Research

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CHILDRENS HOSPITAL BOSTONPO BOX 414413 BOSTON,MA 02241	04-2774441	501(C)(3)	639,676				Research
UNIVERSITY OF MASSACHUSETTS RESEARCH ADMINISTRATION BUILDING 70 TERRACE AMHERST,MA 010039242	04-3167352	501(C)(3)	244,955				Research

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BOSTON MEDICAL CENTER 660HARRISON AVENUE BOSTON,MA 021182393	04-3314093	501(C)(3)	63,496				Research
REGENTS OF THE UNIVERSITY OF CALIFORNIA DAVISPO BOX 989062 WEST SACRAMENTO,CA 95798	04-7120084	State of CA	697,701				Research

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

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BROWN UNIVERSITYBOX 1929 PROVIDENCE,RI 02912	05-0258809	501(C)(3)	85,827				Research
THE GRODEN CENTER INC 86 MOUNT HOPE AVENUE PROVIDENCE,RI 02906	05-0369378	501(C)(3)	183,311				Research

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

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YALE UNIVERSITYPO BOX 2503A NEW HAVEN,CT 06520	06-0646973	501(C)(3)	323,807				Research
UNIVERSITY OF CONNECTICUT (UCONN) 438 WHITNEY RD EXT UNIT 1133 STORRS,CT 062691133	06-0772160	501(C)(3)	40,042				Research

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

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WHITEHEAD INSTITUTE9 CENTER CAMBRIDGE,MA 02142	06-1043412	501(C)(3)	12,222				Research
THE CONNECTICUT AGRICULTURAL EXPERIMENT STATION123 HUNTINGTON STREET BOX 1106 NEW HAVEN,CT 065041106	06-6032987	STATE OF CT	41,428				Public Service/Extension/Research

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

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ST MARK'S DAY SCHOOL 1346 PRESIDENT STREET BROOKLYN NEW YORK, NY 112134335	11-1694941	501(C)(3)	33,750				Public Service/Extension
COLD SPRING HARBOR LABORATORYP O BOX 100 1 BUNGTOWN ROAD COLD SPRING HARBOR, NY 11724	11-2013303	501(C)(3)	292,276				Research

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

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ROGER TORY PETERSON INITUTE OF NATURAL HISTORY311 CURTIS STREET JAMESTOWN,NY 14701	11-2724904	501(C)(3)	9,045				Research
RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NY230 WEST 41ST STREET NEW YORK,NY 10036	11-3198119	501(C)(3)	10,598				Research

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

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WALDRON EDUCATIONAL CONSULTINGW1840 STEINER ROAD CHILTON,WI 53014	11-5709435		35,167				Instruction
CORNELL COOPERATIVE EXTENSION SUFFOLK COUNTY423 GRIFFING AVENUE SUITE 100 RIVERHEAD,NY 119013071	11-6081424	GOVERNMENT	52,441				Research

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

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THE CONFERENCE BOARD INC (CBI)845 THIRD AVENUE NEW YORK,NY 100226679	13-1624108	501(C)(3)	54,650				Public Service/Extension
HOSPITAL FOR SPECIAL SURGERY535 EAST 70TH STREET NEW YORK,NY 10021	13-1624135	501(C)(3)	681,880				Research

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ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEW YORK,NY 100216399	13-1624158	501(C)(3)	226,827				Research
ALBERT EINSTEIN COLLEGE OF MEDICINE 1300 MORRIS PARK AVENUE BRONX,NY 10461	13-1624225	501(C)(3)	48,000				Research

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BARNARD COLLEGE3009 BROADWAY NEWYORK,NY 100276598	13-1628149	501(C)(3)	5,985				Research
BOYCE THOMPSON INSTITUTE FOR PLANT RESEARCH100 BOYCE THOMPSON TOWER ROAD ITHACA,NY 14853	13-1739923	501(C)(3)	769,104				Research

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MEMORIAL SLOAN KETTERING1275 YORK AVENUE NEW YORK,NY 10021	13-1924236	501(C)(3)	2,095,024				Research
RESEARCH FOUNDATION OF CUNY230 WEST 41ST STREET 7TH FL NEW YORK,NY 10036	13-1988190	501(C)(3)	1,080,399				Research

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NEW YORK CITY HEALTH & HOSPITALS160 WATER STREET 7TH FL NEW YORK,NY 10038	13-2655001	State of NY	300,303				Research
GREENMARKET (GNMK) CENYC51 CHAMBERS STREET ROOM 228 NEW YORK,NY 10007	13-2765465	501(C)(3)	41,504				Research

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GOOD OLD LOWER EAST SIDE INC169 AVENUE B NEWYORK,NY 10009	13-2915659	501(C)(3)	161,769				Research
COUNCIL OF SENIOR CENTERS & SERVICES OF NYC49 WEST 45TH STREET7FL NEWYORK,NY 10036	13-2967277	501(C)(3)	9,200				Research

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ST LUKES ROOSEVELT MEDICAL CENTER555 WEST 57TH STREET 5TH FLOOR NEW YORK,NY 10019	13-2997301	501(C)(3)	41,902				Research
AGING IN NEW YORK FUND INC2 STREET SUITE 2100 NEW YORK,NY 10007	13-3153550	501(C)(3)	72,262				Research

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THE ROGOSIN INSTITUTE 506 EASE 70TH STREET NEWYORK,NY 10021	13-3184198	501(C)(3)	31,711				Research
VISITING NURSE SERVICE OF NY107 EAST 70TH STREET NEWYORK,NY 10021	13-3189926	501(C)(3)	56,881				Research

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WINIFRED MASTERSON BURKE MEDICAL RESEARCH INSTUTE785 MAMARONECK AVENUE WHITE PLAINS,NY 10605	13-3434924	501(C)(3)	298,644				Research
BRAIN TRAUMA FOUNDATION7 WORLD TRADE CENTER 34TH FLOOR 250 NEW YORK,NY 10007	13-3764444	501(C)(3)	244,384				Research

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

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NEW YORK UNIVERSITY PO BOX 5166 NEW YORK,NY 10087	13-5562308	501(C)(3)	1,042,135				Research
PACE UNIVERSITYONE PACE PLAZA NEW YORK,NY 10038	13-5562314	501(C)(3)	58,277				Public Service/Extension/Research

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

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TRUSTEES OF COLUMBIA UNIV IN THE CITY OF NEW YORKSPONSORED PROJECTS ADMINISTRATION 6 STREET MC NEW YORK, NY 10027	13-5598093	501(C)(3)	951,291				Research
UNITED SPINAL ASSOCIATION75-20 ASTORIA BLVD JACKSON HEIGHTS, NY 113701177	13-5612621	501(C)(3)	18,843				Public Service/Extension

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MOUNT SINAI SCHOOL OF MEDICINEONE GUSTAVE L LEVY PLACE BOX 3500 NEW YORK,NY 10029	13-6171197	501(C)(3)	50,847				Research
GENERAL ELECTRIC COMPANYONE RESEARCH CIRCLE NISKAYUNA,NY 12309	14-0689340		26,089				Research

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UNION COLLEGEMCKEAN HOUSE 807 UNION ST SCHENECTADY,NY 12308	14-1338580	501(C)(3)	20,406				Research
VASSAR COLLEGE (VASCOL)BOX 4 124 RAYMOND AVE POUGHKEEPSIE,NY 126040004	14-1338587	501(C)(3)	7,600				Public Service/Extension

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RENSSELAER POLYTECHNIC INSTITUTE 110 8TH STREET WEST HALL TROY,NY 12180	14-1340095	501(C)(3)	104,913				Research
RESEARCH FOUNDATION FOR THE STATE UNIVERSITY OF NYPO BOX 9 ALBANY,NY 122010009	14-1368361	501(C)(3)	849,053				Public Service/Extension/Research

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HEALTH RESEARCH INC 150 BROADWAY SUITE 560 MENANDS,NY 12204	14-1402155	501(C)(3)	259,736				Research
RESEARCH FOUNDATION FOR MENTAL HYGIENE INC 150 BROADWAY SUITE301 MENANDS,NY 12204	14-1410842	501(C)(3)	537,645				Research

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THE WILLIAM H MINER AGRICULTURAL RESEARCH INSTITPO BOX 90 1034 MINER FARM ROAD CHAZY,NY 12921	14-1414736	501(C)(3)	11,370				Research
BAAR-SCIENTIFIC LLC 6374 ROUTE 89 ROMULUS NEWYORK,NY 14541	14-1878299		26,000				Research

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ULSTER COUNTY BOCES 175 ROUTE 32 NORTH AT ULSTER BOCES NEW PALTZ,NY 12561	14-6003939	501(C)(3)	131,000				Public Service/Extension
CORNELL COOPERATIVE EXTENSION DUTCHESS COUNTY2715 US ROUTE 44 SUITE 1 MILLBROOK,NY 125455566	14-6036882	GOVERNMENT	19,352				Public Service/Extension

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CORNELL COOPERATIVE EXTENSION TIOGA COUNTY56 MAIN STREET OWEGO,NY 138271588	14-6036883	GOVERNMENT	6,782				Research
CORNELL COOPERATIVE EXTENSION TIOGA COUNTY6055 ROUTE 23 ACRA NEWYORK,NY 12405	14-6036883	GOVERNMENT	20,966				Public Service/Extension

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CORNELL CO-OP EXT ASSO OF COL & GREENE COUNTIS6055 ROUTE 23 ACRA NEW YORK,NY 12405	14-6036887	GOVERNMENT	22,777				Public Service/Extension/Research
CORNELL COOPERATIVE EXTENSION ORANGE COUNTY18 SEWARD AVE SUITE 300 MIDDLETOWN,NY 109402499	14-6036889	GOVERNMENT	10,815				Public Service/Extension/Research

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CORNELL COOPERATIVE EXTENSION50 WEST HIGH STREET BALLSTON SPA,NY 120201992	14-6036892	GOVERNMENT	5,197				Research
SYRACUSE UNIVERSITY 113 BOWNE HALL SYRACUSE,NY 13244	15-0532081	501(C)(3)	616,086				Instruction/Research

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ITHACA COLLEGE130 ALUMNI HALL COLLEGE ITHACA,NY 148507006	15-0532204	501(C)(3)	18,351				Research
WELLS COLLEGEOFFICE OF THE CONTROLLER 170 MAIN S AURORA,NY 13026	15-0532276	501(C)(3)	47,983				Research

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CLARKSON UNIVERSITY8 CLARKSON AVENUE PO BOX 5630 POTSDAM,NY 136995630	15-0543659	501(C)(3)	31,719				Research
PALEONTOLOGICAL RESEARCH INSTITUTION 1259 TRUMANSBURG ROAD ITHACA,NY 14850	15-0554849	501(C)(3)	15,492				Research

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HOBART AND WILLIAM SMITH COLLEGES300 PULTENEY STREET GENEVA, NY 14456	16-0743040	501(C)(3)	40,780				Research
ROCHESTER INSTITUTE OF TECHNOLOGY141 LOMB BUILDING ROCHESTER, NY 146235608	16-0743140	501(C)(3)	42,104				Research

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UNIVERSITY OF ROCHESTER515 HYLAN BLDG RC BOX 270140 ROCHESTER, NY 146270140	16-0743209	501(C)(3)	969,320				Public Service/Extension/Research
ATC-NY33 THORNWOOD DRIVE SUITE 500 ITHACA,NY 14850	16-1549760		304,624				Research

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CORNELL COOPERATIVE EXTENSION CAYUGA COUNTY248 GRANT AVENUE SUITE 1 1300 YORK AVENUE BOX 89 AUBURN,NY 130211495	16-6072873	GOVERNMENT	5,099				Research
CORNELL COOPERATIVE EXTENSION CHENANGO COUNTY99 NORTH BROAD STREET NORWICH,NY 138151386	16-6072876	GOVERNMENT	10,095				Public Service/Extension

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
CORNELL COOPERATIVE EXTENSION ONEIDA COUNTY121 SECOND STREET ORISKANY,NY 134249799	16-6072888	GOVERNMENT	18,689				Research
CORNELL COOPERATIVE EXTENSION ORLEANS COUNTY12690 NYS RT 31 ALBION,NY 14411	16-6072890	GOVERNMENT	18,147				Public Service/Extension

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

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CORNELL COOPERATIVE EXTENSION YATES COUNTY417 LIBERTY STREET PENN YAN,NY 14527	16-6072900	GOVERNMENT	10,439				Research
IVCI LLC601 OLD WILLETS PATH HUPPAUGE,NY 11788	20-0399584		14,255				Research

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

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INSTITUTE FOR ETHNOMEDICINEPO BOX 3464 JACKSON,WY 83001	20-1829529	501(C)(3)	104,163				Research
HYBRID SILICA TECHNOLOGIES INC95 BROWN ROAD ITHACA,NY 14850	20-1870710		123,019				Research

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

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HEBREW HOME AT RIVERDALE5901 PALISADE AVENUE RIVERDALE,NY 10471	20-4352212	501(C)(3)	366,023				Research
LIGHTWORKS LLC1525 FLEMMING DR LONGMONT,CO 80501	20-5476699		43,500				Research

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

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TAMARACK DESIGN INC 950 DANBY ROAD SUITE 150 ITHACA,NY 14850	20-5582363		60,000				Research
PHILMONT BEAUTIFICATION INC113 MAIN STREET PO BOX 1072 PHILMONT,NY 12565	20-5877789	501(C)(3)	9,327				Public Service/Extension

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

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THE TRUSTEES OF PRINCETON UNIVERSITY PO BOX 36 PRINCETON,NJ 08544	21-0634501	501(C)(3)	352,208				Research
STEVENS INSTITUTE OF TECHNOLOGYONE CASTLE POINT ON HUDSON HOBOKEN,NJ 070305991	22-1487354	501(C)(3)	9,911				Research

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

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SCIENCENTER DISCOVERY MUSEUM (SDM)601 FIRST ST ITHACA,NY 14850	22-2470652	501(C)(3)	20,657				Research
CUBRC INC4455 GENESEE STREET BUFFALO,NY 14225	22-2505934	501(C)(3)	12,346				Research

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

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MONTCLAIR STATE UNIVERSITYOFFICE OF RESEARCH SPONSORED PROG HALL 307 MONTCLAIR,NJ 07043	22-2912682	501(C)(3)	125,203				Research
UNIVERSITY OF RHODE ISLAND70 LOWER COLLEGE RD KINGSTON,RI 02881	22-3011455	501(C)(3)	28,221				Research

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

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CARY INSTITUTE OF ECOSYSTEM STUDIESBOX AB 2801 SHARON TURNPIKE MILLBROOK, NY 125450129	22-3232968	501(C)(3)	178,138				Research
ARTANN LABORATORIES INC1459 LOWER FERRY RD TRENTON, NJ 086181414	22-3503679		48,446				Research

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

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RUTGERS THE STATE UNIVERSITY OF NEW JERSEYADMINISTRATION SERVICES BLDG III 3 NEW BRUNSWICK, NJ 08901	22-6001086	501(C)(3)	301,676				Public Service/Extension/Research
CHILDRENS HOSPITAL OF PHILADELPHIA34TH STREET CIVIC CENTER BLVD PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	253,283				Research

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

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DREXEL UNIVERSITY (DREXELUNIV)3201 ARCH STREET SUITE 100 PHILADELPHIA,PA 19104	23-1352630	501(C)(3)	71,155				Research
FRANKLIN & MARSHALL COLLEGEPO BOX 3003 LANCASTER,PA 176043003	23-1352635	501(C)(3)	7,405				Research

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

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TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA3451 WALNUT STREET OFFICE OF RESEAR P221 PHILADELPHIA, PA 191046284	23-1352685	501(C)(3)	803,870				Research
DICKINSON COLLEGE (DICKINSON)PO BOX 1773 CARLISE,PA 170132896	23-1365954	501(C)(3)	39,685				Research

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

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ECRI INSTITUTE5200 BUTLER PIKE PLYMOUTH MEETING,PA 19462	23-1662091	501(C)(3)	24,475				Research
PARTICLE SCIENCES INC3894 COUNTNEY STREET STE 180 BETHLEHEM,PA 18017	23-2749752		15,110				Research

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

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UNIVERSITY OF IDAHO OFFICE OF SPONSORED PROGRAMS PO BOX MOSCOW ID MOSCOW ID,ID 83844	23-7098404	State of Id	19,799				Research
NORTH AMERICAN ASSOCIATION FOR ENVIRONMENTAL EDUC 2000 P ST NW SUITE 540 WASHINGTON DC,DC 20036	23-7158061	501(C)(3)	847,414				Public Service/Extension

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

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THE ADVOCACY CENTER (ADVCTR)590 SOUTH AVENUE ROCHESTER, NY 14620	23-7298613	501(C)(3)	84,171				Public Service/Extension
LEHIGH UNIVERSITY (LU) 526 BRODHEAD AVENUE BETHLEHEM, PA 180153046	24-0795445	501(C)(3)	19,267				Research

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PENNSYLVANIA STATE UNIVERSITY (PSU)OFFICE OF SPONSORED PROGRAMS 110 TE BLDG UNIVERSITY PARK, PA 168027000	24-6000376	501(C)(3)	1,455,297				Public Service/Extension/Research
UNIVERSITY OF PITTSBURGHOFFICE OF RESEARCH 123 UNIVERSITY P PITTSBURGH,PA 15213	25-0965591	501(C)(3)	6,062				Research

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

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CARNEGIE MELLON UNIVERSITY5000 FORBES AVENUE PITTSBURGH,PA 15213	25-0969449	501(C)(3)	131,938				Research
PENNSYLVANIA ASSOCIATION FOR SUSTAINABLE AGRICUTLU PO BOX 419 MILLHEIM,PA 16854	25-1685497	501(C)(3)	10,828				Research

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

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US BUSINESS LEADERSHIP NETWORK13130 BRADDOCK PLACE SUITE 101 ALEXANDRIA,VA 22314	26-0482057	501(C)(3)	136,358				Public Service/Extension
METADATA MANAGEMENT ASSOCIATESPO BOX 282 JACKSONVILLE,NY 14854	26-1422818		65,636				Public Service/Extension

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INFORMED GREEN SOLUTIONSPO BOX 60 EAST BURKE,VT 05832	26-4427379	501(C)(3)	8,882				Public Service/Extension
DRS SENSORS & TARGETING SYSTEMS INC 10600 VALLEY VIEW STREET CYPRESS,CA 906304833	27-0203897		17,684				Research

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GRAPHENE DEVICES LTD 1999 LAKE AVE ROCHESTER, NY 14615	27-1237733		40,888				Research
NOHMS TECHNOLOGIES INC95 BROWN ROAD BOX 1080 NEW YORK, NY 14850	27-3907632		42,551				Research

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

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CINCINNATI CHILDRENS HOSPITAL3333 BURNET AVENUE DEPT PULMONARY CINCINNATI,OH 052293039	31-0833936	501(C)(3)	26,632				Research
DONALD DANFORTH PLANT SCIENCE CENTER975 NORTH WARSON ROAD ST LOUIS,MO 63132	31-1584621	501(C)(3)	99,022				Research

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CENTER FOR SCIENCE AND INDUSTRY (CSI)333 WEST BROAD STREET COLUMBUS,OH 43215	31-4383802	501(C)(3)	33,832				Research
THE OHIO STATE UNIVERSITY (OSU) OFFICE OF SPONSORED PROGRAMS 1960 K COLUMBUS,OH 432101063	31-6025986	501(C)(3)	421,152				Public Service/Extension/Research

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

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MIAMI UNIVERSITY102 ROUEBUSH HALL OXFORD,OH 450563653	31-6402089	501(C)(3)	42,202				Research
SCIRE-SOUTHERN CALIFORNIA INSTITUTE 5901 E SEVENTH STREET LONG BEACH LONG BEACH,CA 908225201	33-0331855	501(C)(3)	287,498				Research

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

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THE SCRIPPS RESEARCH INSTITUTE (SRI)10550 NORTH TORREY PINES ROAD LA JOLLA,CA 92037	33-0435954	501(C)(3)	1,083,761				Research
DISABILITY MANAGEMENT EMPLOYER COALITIONPO BOX 395 SAN DIEGO,CA 954970395	33-0647853	501(C)(3)	9,000				Public Service/Extension

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

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COLLEGE OF WOOSTER 1189 BEALL AVENUE WOOSTER,OH 446912393	34-0714654	501(C)(3)	53,145				Research
CASE WESTERN RESERVE UNIVERSITY10900 EUCLID AVE CLEVELAND,OH 44106	34-1018992	501(C)(3)	243,754				Research

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PURDUE UNIVERSITY615 W STATE STREET SPS AGAD WEST LAFAYETTE,IN 479072108	35-6002041	501(C)(3)	70,052				Research
INTERNATIONAL CITYCOUNTY MANAGEMENT ASSOCIATION777 N CAPITOL STREET NE SUITE 500 WASHINGTON DC,DC 20002	36-2167755	501(C)(3)	37,807				Research

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

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NATIONAL OPINION RESEARCH CENTER55 EAST MONROE STREET 20TH FL CHICAGO,IL 60603	36-2167808	501(C)(3)	19,177				Research
NORTHWESTERN UNIVERSITY2205 TECH DRIVE HOGAN 2-100 EVANSTON,IL 602083500	36-2167817	501(C)(3)	103,327				Research

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ILLINOIS INSTITUTE OF TECHNOLOGY3300 SOUTH FEDERAL STREET MB/30H CHICAGO,IL 606163793	36-2170136	501(C)(3)	24,800				Research
RUSH UNIVERSITY MEDICAL CENTER707 S WOOD STREET 0 ANNEX CHICAGO,IL 60612	36-2174823	501(C)(3)	167,068				Research

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UNIVERSITY OF CHICAGO UNIV RESEARCH ADMIN 6030 S ELLIS 114 CHICAGO,IL 60637	36-2177139	501(C)(3)	119,304				Research
BRADLEY UNIVERSITY 1501 W BRADLEY AVENUE 215 BRADLEY PEORIA,IL 616250313	37-0661949	501(C)(3)	25,133				Research

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THE BOARD OF TRUSTEES OF THE UNIVERSITY OF IL 1901 S FIRST STREET SUITE A CHAMPAIGN,IL 61820	37-6000511	501(C)(3)	161,301				Public Service/Extension/Research
MICHIGAN STATE UNIVERSITYCONTRACT GRANT ADMINISTRATION 301 ADMINISTRATION BLDG E LANSING,MI 488241046	38-6005984	501(C)(3)	506,951				Research

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THE REGENTS OF THE UNIVERSITY OF MICHIGAN WOLVERINE TOWER ROOM 1056 3003 S S ANN ARBOR, MI 481091274	38-6006309	501(C)(3)	1,717,989				Research
WESTERN MICHIGAN UNIVERSITY1903 W MICHIGAN AVE MS 5207 KALAMAZOO, MI 090085520	38-6007327	501(C)(3)	23,224				Research

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MARQUETTE UNIVERSITY PO BOX 1881 MILWAUKEE, WI 532011181	39-0806251	501(C)(3)	41,796				Research
MEDICAL COLLEGE OF WISCONSIN9200 WEST WISCONSIN AVENUE MILWAUKEE, WI 53226	39-0806261	501(C)(3)	15,865				Research

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

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MCW RESEARCH FOUNDATION INC8701 WATERTOWN PLANK ROAD MILWAUKEE, WI 53226	39-1454191	501(C)(3)	65,389				Research
UNIVERSITY OF WISCONSIN (UOWMAD) RESEARCH SPONSORED PROGRAMS 21 NO SUITE 6401 MADISON, WI 53715	39-6028867	501(C)(3)	829,495				Research

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

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SCIENCE MUSEUM OF MINNESOTA120 WEST KELLOGG BOULEVARD ST PAUL,MN 55102	41-0706172	501(C)(3)	57,955				Research
NEW MEXICO BUSINESS LEADERSHIP NETWORKPO BOX 90803 ALBUQUERQUE,NM 87199	41-2055631	501(C)(3)	7,416				Public Service/Extension

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

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THE REGENTS OF THE UNIVERSITY OF MINNESOTA NW 5957 PO BOX 1450 MINNEAPOLIS, MN 55485	41-6007513	501(C)(3)	2,723,131				Research
THE REGENTS OF THE UNIVERSITY OF MINNESOTA 200 OAK STREET SE SUITE 450 MINNEAPOLIS, MN 55455 2070	41-6007513	501(C)(3)	63,166				Public Service/Extension

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MGT ENVIROTEC LTD222 EAST CALL STREET PO BOX 716 ALGONA,IA 50511	42-1501959		25,990				Research
IOWA STATE UNIVERSITY 1138 PEARSON AMES,IA 500112207	42-6004224	501(C)(3)	468,639				Research

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WASHINGTON UNIVERSITYCAMPUS BOX 1034 700 ROSEDALE ST LOUIS,MO 631121408	43-0653611	501(C)(3)	1,031,442				Public Service/Extension/Research
THE CURATORS OF THE UNIVERSITY OF MISSOURIOFFICE OF SPONSORED PROGRAMS ADMINI JESSEE HALL COLUMBIA,MO 652111230	43-6003859	501(C)(3)	414,691				Research

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

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TRUMAN STATE UNIVERSITYCONTROLLERS OFFICE 105 MCCLAIN HALL KIRKSVILLE, MO 635014221	43-6005833	501(C)(3)	44,973				Research
MISSOURI STATE UNIVERSITY901 SOUTH NATIONAL AVENUE CARRINGTO SPRINGFIELD,MO 65897	44-6000308	501(C)(3)	8,000				Research

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CCAT OBSERVATORY INC 508 SPACE SCIENCES BUILDING CORNELL ITHACA,NY 148536801	45-4104640	501(C)(3)	490,000				Research
ORGANIC GROWERS (OGRISN)1124 COUNTRY RD 38 BRAINBRIDGE,NY 13733	45-4134508	501(C)(3)	57,186				Research

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AUDIENCE VIEWPOINTS CONSULTING13148 ROUNDING RUN CIRCLE HERNDON,VA 20171	45-5500148		33,600				Research
NORTH DAKOTA STATE UNIVERSITYDEPT 4000 PO BOX 6050 FARGO,ND 581056050	45-6002439	501(C)(3)	217,499				Research

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SOUTH DAKOTA STATE UNIVERSITYADMIN 133 BOX 2201 BROOKINGS, SD 57007	46-6000364	501(C)(3)	137,843				Research
UNIVERSITY OF NEBRASKA 312 N 14TH STREET PO BOX 880430 LINCOLN,NE 685880430	47-0049123	501(C)(3)	44,343				Research

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KANSAS STATE UNIVERSITY2 FAIRCHILD HALL MANHATTAN, KS 665061103	48-0771751	501(C)(3)	159,644				Research
ORGANIC SEED ALLIANCE PO BOX 772 PORT TOWNSEND,WA 98368	51-0175667	501(C)(3)	9,490				Research

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DELAWARE STATE UNIVERSITY1200 N DUPONT HIGHWAY DOVER,DE 19901	51-0305893	501(C)(3)	17,884				Research
VERMONT CENTER FOR ECOSTUDIES VCEPO BOX 420 NORWICH,VT 05055	51-0639429	501(C)(3)	29,350				Research

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CELLANA LLC73-4460 QUEEN KAAHUMANU HWY SUITE 1 KAILUAKONA, HI 96740	51-0658850		163,441				Research
UNIVERSITY OF DELAWARE 210 HULLIHEN HALL NEWARK,DE 197161551	51-6000297	501(C)(3)	69,853				Research

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JOHNS HOPKINS UNIVERSITY733 N BROADWAY SUITE 117 BALTIMORE,MD 21205	52-0595110	501(C)(3)	86,809				Research
INSTITUTE FOR EDUCATIONAL LEADERSHIP4455 CONNECTICUT AVENUE NW SUITE 31 WASHINGTON DC,DC 20008	52-1198450	501(C)(3)	41,178				Public Service/Extension

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

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THE CONSERVATION FUND1655 NORTH FORT MYER DRIVE SUITE 13 ARLINGTON, VA 222093199	52-1388917	501(C)(3)	8,288				Research
INSTITUTE FOR LEARNING INNOVATION3168 BRAVERTON STREET SUITE 280 EDGEWATER, MD 21037	52-1467051	501(C)(3)	31,932				Public Service/Extension/Research

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INTL SERVICE FOR THE ACQ OF AGRI-BIOTECH APPLI105 LELAND LAB ITHACA,NY 14853	52-1740743	501(C)(3)	120,000				Research
NATIONAL CENTER FOR HEALTHY HOUSING10320 LITTLE PATUXENT PARKWAY SUITE COLUMBIA,MD 21044	52-1792579	501(C)(3)	19,933				Public Service/Extension

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J CRAIG VENTER INSTITUTE9704 MEDICAL CENTER DRIVE ROCKVILLE,MD 20850	52-1842938	501(C)(3)	44,107				Research
SALISBURY UNIVERSITY UNIVERSITY RESEARCH SERVICES HOLLOW ROOM 265 1101 CAMDEN AVE SALISBURY,MD 21801	52-6002033	501(C)(3)	14,346				Research

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UNIVERSITY OF MARYLAND EASTERN SHORE11868 ACADEMIC OVAL PRINCESS ANNE,MD 21853	52-6002033	501(C)(3)	34,374				Research
UNIVERSITY OF MARYLAND3112 LEE BUILDING COLLEGE PARK,MD 207425141	52-6002033	501(C)(3)	286,315				Research

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AMERICAN UNIVERSITY AMERICAN UNIVERSITY 4400 MASSACHUSE WASHINGTON DC,DC 200168066	53-0196549	501(C)(3)	76,675				Research
GEORGETOWN UNIVERSITY3800 RESERVOIR ROAD WASHINGTON WASHINGTON DC,DC 20057	53-0196603	501(C)(3)	206,393				Research

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US GEOLOGICAL SURVEY US DEPT OF THE INTERIOR GEOLOGICAL SURVEY 2255 NORTH GEMINI FLAGSTAFF,AZ 86001	53-0196958	GOVERNMENT	104,112				Research
HOWARD UNIVERSITY (HU) OFFICE OF SPONSORED PROGRAMS 576 W WASHINGTON DC,DC 20059	53-0204707	501(C)(3)	889,041				Research

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THE NATURE CONSERVANCYPO BOX 65 8 NATURE WAY KEENE VALLEY,NY 12943	53-0242652	501(C)(3)	19,991				Research
UNIVERSITY OF MASSACHUSETTS181 PRESIDENT DRIVE DRIVEAMHERST,MA 01003	54-2084125	State of MA	179,868				Research

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THE COLLEGE OF WILLIAM & MARYPO BOX 8795 WILLAMSBURG,VA 23187	54-6001718	501(C)(3)	17,678				Research
UNIVERSITY OF VIRGINIA OFFICE OF SPONSORED PROGRAMS CARRUT PO BOX 400195 CHARLOTTESVILLE,VA 229044195	54-6001796	501(C)(3)	175,008				Research

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VIRGINIA POLYTECHNIC INST & STATE UNI (VATECH)1880 PRATT DRIVE SUITE 2006 BLACKSBURG,VA 24060	54-6001805	501(C)(3)	57,348				Public Service/Extension/Research
WEST VIRGINIA UNI RESEARCH CORP (WVURC) 886 CHESTNUT RIDGE ROAD PO BOX 6845 MORGANTOWN,WV 265066845	55-0665758	501(C)(3)	48,353				Research

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WEST VIRGINIA STATE UNIVERSITY129 HAMBLIN HALL INSTITUTE INSTITUTE,WV 25112	55-0708567	501(C)(3)	9,004				Research
DUKE UNIVERSITYOFFICE OF RESEARCH SUPPORT 2200 WES DURHAM,NC 27705	56-0532129	501(C)(3)	61,056				Research

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RESEARCH TRIANGLE INSTITUTEPO BOX 12194 RESEARCH TRIANGLE PARK, NC 27709	56-0686338	501(C)(3)	11,351				Research
RHO FEDERAL SYSTEM DIVISION INC6330 QUADRANGLE DRIVE SUITE 500 CHAPEL HILL,NC 27517	56-1927659		32,478				Research

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NORTH CAROLINA AGRICULTURAL AND TECHNOLOGY STATE U 1601 EAST MARKET STREET GREENSBORO,NC 27411	56-6000007	501(C)(3)	55,539				Research
NORTH CAROLINA STATE UNIVERSITY2701 SULLIVAN DRIVE SUITE 240 CB,NC 276957214	56-6000756	501(C)(3)	687,733				Research

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UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL104 AIRPORT DRIVE SUITE 2200 CB1350 CHAPEL HILL,NC 275991350	56-6001393	501(C)(3)	247,952				Research
UNIVERSITY OF SOUTH CAROLINA RESEARCH FOUNDATION901 SUMTER STREET - 5TH FLOOR BYRNE COLUMBIA,SC 29208	57-0967350	501(C)(3)	13,866				Research

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CLEMSON UNIVERSITY300 BRACKETT HALL CLEMSON,SC 296345702	57-6000254	501(C)(3)	19,477				Research
COLLEGE OF CHARLESTON OFFICE OF RESEARCH GRANTS ADMINIS GEORGE ST CHARLESTON,SC 29424	57-6000265	501(C)(3)	53,175				Research

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EMORY UNIVERSITY954 GATEWOOD ROAD NE ATLANTA,GA 303294208	58-0566256	501(C)(3)	616,976				Research
GEORGIA TECH RESEARCH CORPORATION (GTRC)505 TENTH STREET N W ATLANTA,GA 30332	58-0603146	501(C)(3)	1,447,292				Research

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UNIVERSITY OF GEORGIA RESEARCH FOUNDATION INC617 BOYD GRADUATE STUDIES RESEARCH ATHENS,GA 306025016	58-1353149	501(C)(3)	41,643				Public Service/Extension/Research
UNIVERSITY OF MIAMI 1501 NORTHWEST 9 AVENUE 2ND FLOOR MIAMI,FL 33136	59-0624458	501(C)(3)	23,983				Research

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H LEE MOFFITT CANCER CENTER & RESEARCH INSTITUTE12902 MAGNOLIA DRIVE TAMPA,FL 33612	59-2451713	501(C)(3)	22,743				Research
UNIVERSITY OF CENTRAL FLORIDA12201 RESEARCH PARKWAY SUITE 501 ORLANDO,FL 32826	59-2924021	501(C)(3)	257,861				Research

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UNIVERSITY OF FLORIDA DIVISION OF SPONSORED RESEARCH 219 GAINESVILLE, FL 32611	59-6002052	501(C)(3)	85,693				Research
UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION INC2301 S THIRD ST STEVENSON HALL 52 LOUISVILLE, KY 40202	61-1014882	501(C)(3)	12,296				Public Service/Extension

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THE REGENTS OF THE UNIVERSITY OF CALIFORNIA2150 SHATTUCK AVE SUITE 313 BERKELEY,CA 947045940	61-3002123	State of CA	84,954				Research
UNIVERSITY OF KENTUCKY 109 KINKEAD HALL LEXINGTON,KY 405060057	61-6033693	501(C)(3)	148,031				Research

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VANDERBILT UNIVERSITY MEDICAL CENTER3319 WEST END AVE SUITE 800 NASHVILLE,TN 37203	62-0476822	501(C)(3)	352,415				Research
VANDERBILT UNIVERSITY 110 21ST AVENUE SOUTH SUITE937 STAT NASHVILLE,TN 372357749	62-0476822	501(C)(3)	8,303				Research

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UNIVERSITY OF TENNESSEE2621 MORGAN CIRCLE DRIVE 121 MORGAN KNOXVILLE, TN 379964530	62-6001636	501(C)(3)	180,917				Public Service/Extension/Research
TUSKEGEE UNIVERSITY OFFICE OF SPONSORED PROGRAMS CARNEG 4TH FLOOR TUSKEGEE,AL 36088	63-0288878	501(C)(3)	67,017				Public Service/Extension

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MISSISSIPPI STATE UNIVERSITY133 ETHEREDGE HALL 449 HARDY ROAD P HARDY ROAD,MS 39762	64-6000819	501(C)(3)	12,596				Research
EDU INC6900-29 DANIELS PARKWAY FORT MYERS,FL 33912	65-0434251		20,000				Public Service/Extension

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UNIVERSITY OF THE VIRGIN ISLANDS2 JOHN BREWERS BAY ST THOMAS,VI 008029998	66-0432514	501(C)(3)	11,587				Research
UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES4301 WEST MARKHAM STREET LITTLE ROCK,AR 72205	71-0236094	State of AR	89,413				Research

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UNIVERSITY OF ARKANSAS 120 OZARK HALL FAYETTEVILLE,AR 72701	71-6003252	501(C)(3)	167,319				Research
TULANE UNIVERSITY HEALTH1430 TULANE AVENUE TB-51 NEWORLEANS,LA 70112	72-0423889	501(C)(3)	378,197				Research

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USDA-ARS600 EAST MERMAID LANE WYNDMOOR, PA 190380598	72-0564834	GOVERNMENT	462,556				Public Service/Extension/Research
PRIMET PRECISION MATERIALS INC950 DANBY ROAD SUITE 204 ITHACA,NY 14850	72-1543183		7,987				Research

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OKLAHOMA CITY UNIVERSITY2501 N BLACKWELDER OKLAHOMA CITY,OK 73106	73-0579265	501(C)(3)	57,679				Research
OKLAHOMA STATE UNIVERSITY203 WHITEHURST HALL STILLWATER,OK 740781016	73-6017987	501(C)(3)	23,626				Research

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THE UNIVERSITY OF TEXAS101 E 27TH STREET STOP A9000 AUSTIN,TX 087137153	74-0230239	501(C)(3)	1,115,666				Research
WILLIAM MARSH RICE UNIVERSITYPO BOX 1892 - MS16 HOUSTON,TX 772511892	74-1109620	501(C)(3)	59,131				Research

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TEXAS A&M UNIVERSITY HEALTH SCIENCE400 HARVEY MITCHELL PKWY SO SUITE 1 VALLEY PARK CENTER,TX 77845	74-1238434	State of TX	295,542				Research
UNIVERSITY OF TEXAS - SAN ANTONIOONE UTSA CIRCLE BAUERLE ROAD GARAGE SAN ANTONIO,TX 78249	74-1977996	State of TX	52,492				Research

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THE ARIZONA BOARD OF REGENTS UNIVERSITY OF ARIZONAPO BOX 210158 TUCSON,AZ 857210158	74-2652689	501(C)(3)	132,506				Research
UNIVERSITY OF TEXAS AT AUSTIN24 GUADALAUPE PO BOX 7398 AUSTIN,TX 78713	74-6000203	State of TX	428,641				Research

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UNIVERSITY OF TEXAS MEDICAL Branch301 UNIVERSITY BLVD BSB 1106 GALVESTON,TX 775550645	74-6000949	State of TX	45,041				Research
UNIVERSITY OF NORTH TEXAS1155 UNION CIR 305250 DENTON,TX 76203	75-6002149	501(C)(3)	36,839				Research

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
TEXAS TECH UNIVERSITY 203 HOLDEN HALL LUBBOCK,TX 794091035	75-6002622	501(C)(3)	181,758				Research
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER5323 HARRY HINES BOULEVARD DALLAS,TX 753909041	75-6002868	501(C)(3)	17,876				Research

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
SATHGURU INC88 BROAD STREET BOSTON,MA 02110	80-0664005		755,392				Research
UNIVERSITY CORPORATION FOR ATMOSPHERIC RESEARCH PO BOX 3000 BOULDER,CO 80307	84-0412668	501(C)(3)	577,262				Research

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
COLORADO STATE UNIVERSITY601 SOUTH HOWES ST 408 UNIVERSITY FORT COLLINS, CO 805232002	84-6000545	501(C)(3)	148,502				Research
UNIVERSITY OF COLORADO (UCB)572 UCB BOULDER, CO 803090574	84-6000555	501(C)(3)	1,058,860				Research

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
SOUTHWEST SCIENCES INCORPORATED (SSI)1570 PACHECO STREET SUITE E-11 SANT NEW MEXICO,NM 87505	85-0340320		6,722				Research
NATIONAL CENTER FOR GENOME RESOURCES2935 RODEO PARK DRIVE EAST SANTE FE,NM 87505	85-0418280	501(C)(3)	72,991				Research

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
ARIZONA STATE UNIVERSITY (ASU)PO BOX 876011 TEMPE,AZ 852876011	86-0196696	501(C)(3)	617,520				Research
ENVIRONMENTAL EDUCATION EXCHANGE 738 N 5TH AVENUE SUITE 100 TUCSON,AZ 85705	86-0682018	501(C)(3)	70,229				Public Service/Extension

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
MAYO CLINIC ARIZONA (MAYOAZ)13400 EAST SHEA BLVD SCOTTSDALE,AZ 852595499	86-0800150	501(C)(3)	7,578				Research
BELTON SPACE EXPLORATION INITIATIVES LLC430 SOUTH RANDOLPH WAY TUCSON,AZ 85716	86-0987248		59,337				Research

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
BRIGHAM YOUNG UNIVERSITYA-285 ASB CAMPUS DRIVE PROVO,UT 846021231	87-0217280	501(C)(3)	21,056				Research
ISIS Inc699 ESOUTH TEMPLE SUITE 300 SALT LAKE CITY,UT 84102	87-0501720		118,027				Research

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
METHODIST HOSPITAL 6670 BERTNER AVEMS R 2-216 HOUSTON,TX 77030	87-0721923	501(C)(3)	187,164				Research
UNIVERSITY OF UTAH201 S PRESIDENTS CIRCLE ROOM 408 SALTLAKECITY,UT 84112	87-6000525	State of UT	46,026				Research

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
HONEYBEE ROBOTICS INC 460 W 34TH ST 7TH FLOOR NEW YORK,NY 10001	88-0193033		187,217				Research
WASHINGTON STATE UNIVERSITYOFFICE OF GRANT RESEARCH DEVELOPM ROOM 423 PULLMAN,WA 991643140	91-6001108	501(C)(3)	277,841				Research

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
UNIVERSITY OF WASHINGTON4333 BROOKLYN AVE NE SEATTLE,WA 981959472	91-6001537	501(C)(3)	998,212				Research
UNIVERSITY OF ALASKA-ANCHORAGEOFFICE OF RESEARCH AND GRADUATE STU 3211 DRIVE ANCHORAGE,AK 995084614	92-6000147	501(C)(3)	19,428				Research

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
STATE OF OR AG BY & THROUGH THE STATE BOARD308 KERR ADMINISTRATION BUILDING CORVALIS,OR 973312140	93-1070707	501(C)(3)	243,026				Research
KAISER FOUNDATION RESEARCH INSTITUTE1800 HARRISON STREET 16TH FLOOR OAKLAND,CA 94612	94-1105628	501(C)(3)	269,463				Research

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
THE BOARD OF TRS OF THE LELAND STANFORD JR UNI 340 PANAMA STREET STANFORD, CA 943056025	94-1156365	501(C)(3)	2,918,172				Research
REGENTS OF UNIVERSITY OF CALIFORNIA505 PARNASSUS AVENUE RM C-152 SAN FRANCISCO, CA 941430622	94-2951741	State of CA	88,798				Research

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
LAWRENCE BERKELEY NATIONAL LABORATORY (LBNL)OFFICE OF SPONSORED PROJECT INDUS ONE CYCLOTRON ROAD MS 910R1121 BERKELEY,CA 94720	94-2951741	State of CA	21,000				Research
REGENTS OF THE UNIVERSITY OF CALIFORNIA9500 GILMAN DRIVE LA JOLLA,CA 92093	94-6002123	501(C)(3)	780,205				Research

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
REGENTS OF THE UNIVERSITY OF CALIFORNIA-DAVIS OFFICE OF RESEARCH 1850 RESEARCH PA SUITE 300 DAVIS,CA 95618	94-6036494	501(C)(3)	507,186				Public Service/Extension/Research
UNIVERSITY OF SOUTHERN CALIFORNIA FILE NO 52095 LOS ANGELES,CA 90074	95-1642394	501(C)(3)	677,605				Research

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
CALIFORNIA INSTITUTE OF TECHNOLOGY1200 E CALIFORNIA BLVD MAIL CODE PASADENA,CA 91125	95-1643307	501(C)(3)	220,025				Research
POMONA COLLEGE BUSINESS OFFICE PENDLETON BUILDING 150 EAST EIGHTH STREET CLAREMONT,CA 91711	95-1664112	501(C)(3)	21,243				Research

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
CHILDREN'S HOSPITAL LOS ANGELES4650 SUNSET BLVD MS 97 THE SABAN RESEARCH INSTITUTE LOS ANGELES,CA 90027	95-1690977	501(C)(3)	97,672				Research
SYMMETRICOM INC34 TOZER ROAD BEVERLY,MA 019155510	95-1906306		63,668				Research

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
REGENTS OF THE UNIVERSITY OF CALIFORNIA IRVINE111 ACADEMY WAY SUITE 210 IRVINE,CA 926971050	95-2226406	State of CA	186,327				Research
REGENTS OF THE UNIVERSITY OF CALIFORNIAOFFICE OF RESEARCH ADMINISTRATION 5171 CALIFORNIA AVE SUITE 150 IRVINE,CA 926977600	95-2226406	501(C)(3)	377,074				Research

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
SCIENCE APPLICATIONS INTERNATIONAL CORPORATION1710 SAIC DRIVE M/S T2-4-5 MCLEAN,VA 22102	95-3630868		211,491				Research
CAL STATE LA UNIVERSITY AUXILIARY SERVICES INC 5151 STATE UNIVERSITY DRIVE GOLDEN SUITE 314 LOS ANGELES,CA 900324226	95-4016653	501(C)(3)	39,099				Research

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
THE GREENHORNS FILM PROJECT22231 MULHOLLAND HWY SUITE 209 CALABASAS,CA 91302	95-4116679	501(C)(3)	13,326				Research
REGENTS OF THE UNIVERSITY OF CALIFORNIA10920 WILSHIRE BLVD 5TH FL LOS ANGELES,CA 900246502	95-6006143	501(C)(3)	1,640,117				Research

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
UNIVERSITY OF HAWAII 2440 CAMPUS ROAD BOX 368 HONOLULU, HI 96822234	99-6000354	501(C)(3)	139,319				Research

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
CORNELL UNIVERSITY

Employer identification number
15-0532082

Part I

Questions Regarding Compensation

	Yes	No
<div><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 checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></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></div>	Yes	
<div><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></div>	Yes	
<div><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 checked="" type="checkbox"/> Independent compensation consultant</div><div><input 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>		
<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>		
<div><div>a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>	Yes	
<div><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></div>		No
<div><div></div><div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div></div>		
<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>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div><div>If "Yes," to line 5a or 5b, describe in Part III</div></div>		No
<div><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>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div><div>If "Yes," to line 6a or 6b, describe in Part III</div></div>		No
<div><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></div>	Yes	
<div><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></div>		No
<div><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></div>		

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
LINES 1A AND 2		PAYMENT OR REIMBURSEMENT OF THE EXPENSES DESCRIBED IN 1A IS COVERED BY THE UNIVERSITY'S TRAVEL POLICIES OR SPECIFIC EMPLOYMENT CONTRACTS AND INCLUDES THE UNIVERSITY'S IMPLEMENTATION OF AN ACCOUNTABLE PLAN. THERE IS OCCASIONALLY UNIT DISCRETION.
LINE 4B		The president participates in a board authorized deferred compensation agreement under IRC Section 457(f). The deferral for the president of \$45,822 under IRC Section 457(f) of amounts not substantially vested are disclosed on Schedule J, Part II, Column (c) for the president as a component of overall qualified and non-qualified deferred compensation.
LINE 7		BONUS PAYMENTS ARE PROVIDED TO INDIVIDUALS IN RECOGNITION OF ACCOMPLISHMENTS OF SPECIFIC GOALS OR OVERALL PERFORMANCE.
ADDITIONAL INFORMATION ON BOARD OF TRUSTEES		THE CORNELL BOARD INCLUDES FACULTY, STAFF AND STUDENTS. FACULTY MEMBERS ELECT TWO (2) MEMBERS, THE STUDENT BODY ELECTS TWO (2) MEMBERS, THE "EMPLOYEE ASSEMBLIES" ELECT ONE (1) MEMBER. FOR FISCAL YEAR ENDED JUNE 30, 2012, THE FACULTY MEMBERS WERE ROSEMARY J. AVERY AND NELSON G. HAIRSTON, THE STUDENT REPRESENTATIVES WERE ALEXANDER W. BORES AND DARRICK T. N. EVENSON, AND THE EMPLOYEE REPRESENTATIVE WAS ALAN MITTMAN.

Software ID:
Software Version:
EIN: 15-0532082
Name: CORNELL UNIVERSITY

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				
Barbara A Baird	(i)	217,179	0	0	21,950	2,849	241,978	0
	(ii)	0	0	0	0	0	0	0
Nelson Hairston	(i)	169,007	0	19,402	19,198	12,227	219,834	0
	(ii)	0	0	0	0	0	0	0
David J Skorton	(i)	710,744	0	7,607	70,822	99,090	888,263	0
	(ii)	0	0	0	0	0	0	0
Joanne DeStefano	(i)	347,144	8,492	20,316	37,005	8,274	421,231	0
	(ii)	0	0	0	0	0	0	0
W Kent Fuchs	(i)	518,875	64,315	21,816	25,000	18,815	648,821	0
	(ii)	0	0	0	0	0	0	0
Laurie Glimcher	(i)	1,059,850	0	20,564	36,495	19,554	1,136,463	0
	(ii)	0	0	0	0	0	0	0
James Mingle	(i)	406,092	32,906	28,989	25,000	18,100	511,087	0
	(ii)	0	0	0	0	0	0	0
Robert A Buhrman	(i)	348,186	0	17,000	25,000	14,900	405,086	0
	(ii)	0	0	0	0	0	0	0
Stephen M Cohen	(i)	733,521	0	76,668	0	42,134	852,323	0
	(ii)	0	0	0	0	0	0	0
Albert Edwards	(i)	494,146	825,000	0	25,000	20,370	1,364,516	0
	(ii)	0	0	0	0	0	0	0
Daniel M Knowles MD	(i)	1,737,052	0	23,479	36,495	30,838	1,827,864	0
	(ii)	0	0	0	0	0	0	0
Pak H Chung MD	(i)	47,511	0	2,675,119	31,245	31,304	2,785,179	0
	(ii)	0	0	0	0	0	0	0
Isaac Kligman MD	(i)	2,316,375	0	17,000	36,495	27,543	2,397,413	0
	(ii)	0	0	0	0	0	0	0
Zev Rosenwaks MD	(i)	252,380	0	4,405,526	36,495	79,618	4,774,019	0
	(ii)	0	0	0	0	0	0	0
Steven D Spandorfer MD	(i)	48,206	0	3,258,982	25,995	32,554	3,365,737	0
	(ii)	0	0	0	0	0	0	0
Philip E Steig Phd MD	(i)	386,425	0	2,902,954	36,495	35,341	3,361,215	0
	(ii)	0	0	0	0	0	0	0
Rosemary J Avery	(i)	177,586	0	49,243	33,652	7,730	268,211	0
	(ii)	0	0	0	0	0	0	0
Anthony Gotto	(i)	586,892	0	190	36,495	23,378	646,955	0
	(ii)	0	0	0	0	0	0	0
Beth McKinney	(i)	60,909	4,966	0	7,096	16,573	89,544	0
	(ii)	0	0	0	0	0	0	0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
CORNELL UNIVERSITY

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
15-0532082

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	DASNY (Series 2009A)	14-6000293	649905DC7	04-22-2009	312,100,133	SEE PART VI		X		X		X
B	DASNY (Series 2010A)	14-6000293	649905r99	06-09-2010	301,560,097	SEE PART VI		X		X		X
C	DASNY CP (May 12 2011 Tax Certificate)	14-6000293	64983L000	05-12-2011	59,000,000	SEE PART VI		X		X		X
D	DASNY (Series 2008B and Series 2008C)	14-6000293	649905A97	05-03-2010	139,688,300	Refunded 2008 DASNY bonds		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	11,295,000		0		4,610,000		9,530,000	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	312,520,924		301,900,097		59,000,038		139,688,300	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	16,444,611		29,036,727		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	2,307,605		2,113,328		0		770,300	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	141,573,549		218,375,984		17,845,038		0	
11	Other spent proceeds	152,195,159		52,374,058		41,155,000		138,910,000	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2011		2014		2013		2010	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X		X		X	
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X			X	X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		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		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X		X		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		X		X		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		X		X		X	
c	Are there any research agreements that may result in private business use of bond-financed property?	X		X		X		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?	X		X		X		X	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0%		0 00000%		0 00000%		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%		0 00000%		0%		0%	
6	Total of lines 4 and 5	0%		0 00000%		0%		0%	
7	Does the bond issue meet the private security or payment test?		X		X		X		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		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	0 00000%		0 00000%		0 00000%		0 00000%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X		X		X
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		X		X		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		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?	X						X	
c	No rebate due?	X		X		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		X	X			X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider	0		0		0			
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		X		X		X
b Name of provider	0		0		0		0	
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		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		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		X		X		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
Series 2009	Part I	REFUND \$150 MILLION OF TAX-EXEMPT CP AND FINANCE CAPITAL PROJECTS ON ITHACA AND WEILL MEDICAL COLLEGE CAMPUSES PART IV QUESTION 2 Arbitrage rebate calculation completed 4/30/2012
Series 2010	Part I	REFUDNED \$50 MILLION OF TAXABLE DEBT AND FINANCED CONSTRUCTION OF A MEDICAL BUILDING ON THE WEILL MEDICAL COLLEGE CAMPUS PART III OF THE \$285 MILLION ISSUED, THERE WAS A REFUNDING OF \$50 MILLION USED FOR CAPITAL RENOVATIONS THERE WAS NO PRIVATE USE NOTED APPROXIMATELY \$235 MILLION OF THE BOND SERIES WAS USED FOR CONSTRUCTION OF A BUILDING THAT HAS NOT BEEN PLACED IN SERVICE AS OF JUNE 30, 2013 Part IV, question 2 Arbitrage rebate calculation completed 7/31/2012
Series 1998 Commercial Paper	Part I	FINANCE CAPITAL CONSTRUCTION ON ITHACA AND WEILL MEDICAL COLLEGE CAMPUSES PART IV QUESTION 2 Arbitrage rebate calculation completed 5/12/13
Series 2008 B&C	Part I	REFUND 2008 DASNY BONDS (ISSUED APRIL 10, 2008) PART IV QUESTION 2 Series 2008 refunded existing bonds with no new money component Exempt from arbitrage rebate calculation
Series 2008A	Part I	REFUND 2008 TCIDA BONDS (ISSUED JANUARY 30, 2008) PART IV QUESTION 2 Arbitrage rebate computation completed 9/12/2012
Series 1990B	Part IV Question 2	Series 1990B bonds refinance existing debt with no new money component Exempt from rebate calculation
2004 Bonds	Part I	REFUNDED 1998 TAX EXEMPT COMMERCIAL PAPER (\$40,805,000) AND FINANCED NEW PROJECTS PART IV QUESTION 2 Arbitrage rebate calculation completed 7/24/2007
Series 2006	Part I	REFUNDED 1996 BONDS (63,717,543 DATE OF ISSUE 6/20/1996), REFUNDED TAXABLE CP (\$40,000,000), REFUNDED TAX EXEMPT CP (\$75,000,000), AND FINANCED CAPITAL CONSTRUCTION OF THE ITHACA AND WEILL MEDICAL COLLEGE CAMPUS PART IV QUESTION 2 Arbitrage rebate calculation completed 5/31/2008

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
CORNELL UNIVERSITY

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
15-0532082

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	TCIDA (SERIES 2008A) SEE PART VI	16-1214039	890099EQ3	06-23-2010	75,307,598	REFUND 2008 TCIDA BONDS		X		X		X
B	DASNY (SERIES 1990B)	14-6000293	649905ZH2	05-03-2010	55,997,134	REFUNDED 1990 BONDS (12/19/1990)		X		X		X
C	DASNY (SERIES 2004A & SERIES 2004B)	14-6000293	46983TRF2	05-27-2004	92,100,000	SEE PART VI		X		X		X
D	DASNY (SERIES 2006A)	14-6000293	64983QL98	05-11-2006	258,479,025	SEE PART VI		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	4,295,000		7,630,000		15,375,000		76,510,000	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	75,307,598		55,997,134		92,663,883		261,813,216	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	0		0		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	520,432		0		842,345		1,698,799	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	0		0		50,376,296		79,584,039	
11	Other spent proceeds	74,787,166		55,997,154		41,445,242		180,530,378	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2010		2010		2006		2008	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X		X		X	
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		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		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?			X		X		X		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		X		X		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		X		X		X	
c	Are there any research agreements that may result in private business use of bond-financed property?	X		X		X		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?	X		X		X		X	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0%		0%		0%		0%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0%		0%		0%		0%	
6	Total of lines 4 and 5	0%		0%		0%		0%	
7	Does the bond issue meet the private security or payment test?		X		X		X		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		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	0 00000%		0 00000%		0 00000%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X		X		X
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		X		X		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		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?	X		X					
c	No rebate due?	X				X			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		X	X			X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider	0		0		0			
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		X		X		X
b	Name of provider	0		0		0		0	
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		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		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		X		X		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 L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization
CORNELL UNIVERSITY

Employer identification number
15-0532082

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?	(i) Written agreement?	
			To	From			Yes	No		Yes	No
Total ▶ \$											

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 15-0532082

Name: CORNELL UNIVERSITY

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SB ASHLEY MANAGEMENT CO	TRUSTEE-ASHLEY	334,974	RE MANAGEMENT FEES PAID BY UNV		No
(2) 281 DEVELOPMENT CORP	TRUSTEE-CORNELL	36,050	RENT PAID BY UNIVERSITY		No
(3) RHEONIX	TRUSTEE-GALVIN	68,019	RESEARCH CONTRACT PAID TO UNIV		No
(4) MERCK	OFFICERS-GLIMCHER & GOTTO	62,746	RESEARCH CONTRACT EXPENDITURES		No
(5) MERCK	OFFICERS-GLIMCHER & GOTTO	824,309	PURCHASES OF GOODS/SRVS BY UNV		No
(6) PFIZER	OFFICERS-GLIMCHER & GOTTO	439,294	RESEARCH CONTRACT EXPENDITURES		No
(7) PFIZER	OFFICERS-GLIMCHER & GOTTO	412,882	PURCHASES OF GOODS/SRVS BY UNV		No
(8) WATERS TECHNOLOGIES CORP	OFFICER-GLIMCHER	86,604	PURCHASES OF GOODS/SRVS BY UNV		No
(9) VICAM WATERS TECHNOLOGIES CORP	OFFICER-GLIMCHER	16,219	PURCHASES OF GOODS/SRVS BY UNV		No
(10) TA INSTRUMENTS WATERS TECHNOLOGIES	OFFICER-GLIMCHER	113,010	PURCHASES OF GOODS/SRVS BY UNV		No
(11) VERIZON FOUNDATION	TRUSTEE-MCADAM	750,000	DONATION TO THE UNIVERSITY		No
(12) VERIZON	TRUSTEE-MCADAM	468,020	PURCHASES OF GOODS/SRVS BY UNV		No
(13) VERIZON WIRELESS SERVICES LLC	TRUSTEE-MCADAM	1,582,615	PURCHASES OF GOODS/SRVS BY UNV		No
(14) VERIZON WIRELESS	TRUSTEE-MCADAM	339	PURCHASES OF GOODS/SRVS BY UNV		No
(15) VERIZON NETWORK INTEGRATION CORP	TRUSTEE-MCADAM	7,272	PURCHASES OF GOODS/SRVS BY UNV		No
(16) VERIZON SELECT SERVICES INC	TRUSTEE-MCADAM	3,397	PURCHASES OF GOODS/SRVS BY UNV		No
(17) KIONIX	TRUSTEE-GALVIN	972,063	ROYALTIES PAID TO THE UNIV		No
(18) MC VENTURE PARTNERS VARIOUS FUNDS	TRUSTEE-CROLL	485,454	DISTRIBUTION TO THE UNIV		No
(19) FIRST RESERVE VARIOUS FUNDS	TRUSTEE-MACAULAY	1,899,999	INVESTMENT BY THE UNIV		No
(20) FIRST RESERVE VARIOUS FUNDS	TRUSTEE-MACAULAY	77,152	INVESTMENT FEE PAID BY UNIV		No
(21) FIRST RESERVE VARIOUS FUNDS	TRUSTEE-MACAULAY	6,540,456	DISTRIBUTION TO THE UNIV		No
(22) CHARLES RIVER VARIOUS FUNDS	TRUSTEE-ZAK	26,578	INVESTMENT BY THE UNIV		No
(23) CHARLES RIVER VARIOUS FUNDS	TRUSTEE-ZAK	903,299	DISTRIBUTION TO THE UNIV		No
(24) US VENTURE VARIOUS FUNDS	TRUSTEE-YOUNG	2,906,543	DISTRIBUTION TO THE UNIV		No
(25) JP MORGAN CHASE	TRUSTEE-BRAUNSTEIN	2,032,770	BANKING FEES PAID BY THE UNIV		No
(26) P DESTEFANO	OFFICER-SPOUSE	78,930	COMPENSATION		No
(27) R DAVISSON	OFFICER-SPOUSE	219,240	COMPENSATION		No

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization
CORNELL UNIVERSITY

Employer identification number
15-0532082

Part ITypes of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	41	1,332,073	FMV APPRAISALS
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		1,506,457	FMV APPRAISALS
5 Clothing and household goods				
6 Cars and other vehicles	X	1	25,189	FMV APPRAISALS
7 Boats and planes	X	1	11,000	FMV APPRAISALS
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
Computers, Software &				
25 Other ► (Equipment)	X	11	5,048,886	FMV APPRAISALS
26 Other ► (HORSES)	X	4	423,678	UNIVERSITY METHOD
Non-capital				
27 Other ► (Equipment/Property)	X	197	3,533,423	FMV APPRAISALS
28 Other ► ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

27

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Schedule M		THE UNIVERSITY DOES NOT SEEK TO IDENTIFY THE SPECIFIC NUMBER OF DONORS FOR CONTRIBUTIONS OF BOOKS AND CERTAIN OTHER GIFTS OF PROPERTY HORSES. THE UNIVERSITY ESTABLISHED A STANDARD VALUATION METHODOLOGY FOR RECORDING THE VALUE OF HORSES AND OTHER LIVESTOCK IN THE GENERAL LEDGER.

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 CORNELL UNIVERSITY	Employer identification number 15-0532082
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Identifier	Return Reference	Explanation
SCHEDULE O ATTACHMENT	Line 4	INDEPENDENT BOARD MEMBERS A MEMBER OF THE BOARD, FOR PURPOSES OF FORM 990, IS NOT CONSIDERED INDEPENDENT IF THE INDIVIDUAL IS OTHERWISE EMPLOYED BY THE UNIVERSITY AND COMPENSATION EXCEEDS \$10,000 OR HAS A BUSINESS RELATIONSHIP WITH THE UNIVERSITY REPORTED ON SCHEDULE L

Identifier	Return Reference	Explanation
PART III		LINE 1 THE ORGANIZATION'S MISSION IS TO PROVIDE UNDERGRADUATE AND GRADUATE DEGREE PROGRAMS, DISCOVER, PRESERVE, AND DISSEMINATE KNOWLEDGE, PRODUCE CREATIVE WORK AND PROMOTE A CULTURE OF BROAD INQUIRY LINE 4D OTHER PROGRAM SERVICE ACCOMPLISHMENTS INCLUDE, BUT ARE NOT LIMITED TO, THE LAND-GRANT MISSION, ACADEMIC CONFERENCES, PUBLICATIONS AND ROOM AND BOARD FOR THE STUDENT BODY

Identifier	Return Reference	Explanation
PART VI SECTION A	LINE 7A	PURSUANT TO THE UNIVERSITY'S CHARTER, THE BOARD OF TRUSTEES CONSISTS OF 64 MEMBERS OF THIS NUMBER, THE GOVERNOR, THE TEMPORARY PRESIDENT OF THE SENATE, THE SPEAKER OF THE ASSEMBLY, AND THE PRESIDENT OF THE UNIVERSITY ARE EX OFFICIO TRUSTEES DURING THEIR TERMS OF OFFICE. FURTHER, THE ELDEST LINEAL DESCENDANT OF EZRA CORNALL IS APPOINTED AS A TRUSTEE FOR HIS OR HER LIFE. THE GOVERNOR ALSO APPOINTS THREE TRUSTEES. ADDITIONALLY, ACADEMIC FACULTY APPOINT TWO MEMBERS, THE STUDENT BODY APPOINTS TWO MEMBERS, THE NON-ACADEMIC STAFF APPOINT ONE MEMBER, AND THE ALUMNI ELECT EIGHT MEMBERS. ALL REMAINING TRUSTEES ARE SELECTED BY THE BOARD OF TRUSTEES.

Identifier	Return Reference	Explanation
PART VI SECTION B	LINE 11B	In advance of filing, the University presents a draft of form 990 to the audit committee of the board of trustees at their Spring meeting which generally occurs in March of each year. Further, prior to the Spring audit committee meeting, all voting members of the board of trustees are notified of materials being reviewed by the committee and, included in this notification, is the draft form 990. If any changes are made, prior to filing, the final 990 is posted to the board of trustees' password-protected website and an email notification is sent to all voting members of the board of trustees informing them that changes have been made and containing a link to the secure website.

Identifier	Return Reference	Explanation
PART VI	LINE 12C	INFORMATION ON MONITORING CONFLICT OF INTEREST UNDER THE UNIVERSITY'S CONFLICT OF INTEREST POLICY , OFFICERS, DIRECTORS, OTHER KEY EMPLOYEES AND FACULTY MEMBERS MUST FILE AN ANNUAL CONFLICT OF INTEREST STATEMENT ANY CONFLICT IDENTIFIED IS REPORTED TO THE APPROPRIATE OFFICE RESPONSIBLE FOR MANAGING THE CONFLICT, SUCH AS THE REAL ESTATE OFFICE FOR REAL ESTATE MATTERS THIS PROCEDURE IS DESIGNED TO HELP ENSURE THAT SUCH TRANSACTIONS ARE SUBJECT TO ADDITIONAL REVIEW AND AUTHORIZATION

Identifier	Return Reference	Explanation
PART VI	LINE 15	<p>COMPENSATION THE UNIVERSITY HAS FORMAL PROCEDURES TO AUTHORIZE AND MANAGE COMPENSATION ISSUES THE PROCEDURES IDENTIFIED BELOW APPLY TO ALL OFFICERS, ALL FORMER OFFICERS WHO CONTINUE TO PROVIDE SERVICES TO THE INSTITUTION AS A WHOLE, ALL EMPLOYEES WHO OCCUPY CERTAIN ROLES SUCH AS DEAN AND VICE PRESIDENT, AND ALL EMPLOYEES WHOSE COMPENSATION EXCEEDS A PRE-ESTABLISHED THRESHOLD THE VICE PRESIDENT FOR THE DIVISION OF HUMAN RESOURCES ("VP") DEVELOPS THE LIST OF INDIVIDUALS SUBJECT TO REVIEW AND OBTAINS COMPARATIVE DATA FROM EXTERNAL, INDEPENDENT CONSULTING FIRMS THE VP AND HER INTERNAL STAFF DEVELOP A FORMAL PRESENTATION FOR THE COMPENSATION SUBCOMMITTEE OF THE EXECUTIVE COMMITTEE OF THE BOARD THE SUBCOMMITTEE REVIEWS THE INFORMATION AND MODIFIES IT IF DEEMED APPROPRIATE THE SUBCOMMITTEE RECOMMENDS COMPENSATION FOR FINAL REVIEW AND APPROVAL TO THE EXECUTIVE COMMITTEE OF THE BOARD IN ADDITION, THE UNIVERSITY MAINTAINS CONTEMPORANEOUS WRITTEN RECORDS OF THE PROCEDURES THAT, TOGETHER WITH THE FOREGOING, GIVE RISE TO A "REBUTTABLE PRESUMPTION OF REASONABLENESS " NOTE COMPENSATION PROPOSALS WHICH OCCUR OUTSIDE THE SPRING TIMELINE AND REQUIRE EXECUTIVE COMMITTEE APPROVAL ARE PRESENTED FOR REVIEW AND APPROVAL IN A PRIVATE SESSION OF THE EXECUTIVE COMMITTEE IF THERE IS A DISCRETIONARY COMPONENT OF COMPENSATION, IT IS LIMITED BY AMOUNT OR PERCENTAGE OR OTHER CLEARLY SPECIFIED CRITERIA AMOUNTS IN EXCESS OF THESE AUTHORIZED GUIDELINES REQUIRE REVIEW BY THE BOARD AS A WHOLE LINE 16 PROCEDURES FOR PARTICIPATION IN JOINT VENTURES THE UNIVERSITY HAS NUMEROUS CONTROLS IN PLACE TO ENSURE THAT ANY INVESTMENT IN, CONTRIBUTION OF ASSETS TO, OR PARTICIPATION IN A JOINT VENTURE OR SIMILAR ARRANGEMENT WITH A TAXABLE OR NON-TAXABLE ENTITY ARE IN FULL COMPLIANCE WITH UNIVERSITY POLICIES, INCLUDING, BUT NOT LIMITED TO, THE POLICY ON TRANSACTION AUTHORITY AND UNRELATED BUSINESS INCOME COMPLIANCE WITH THE UNIVERSITY'S POLICIES SERVES TO PROTECT THE ORGANIZATION'S EXEMPT STATUS LINE 19 GOVERNING DOCUMENTS - THE UNIVERSITY'S CHARTER, BY-LAWS, POLICIES AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC THROUGH THE UNIVERSITY'S WEBSITE, IDENTIFIED ON PAGE ONE OF THE FORM 990 THE UNIVERSITY ALSO MAKES THESE DOCUMENTS AVAILABLE, IF REQUESTED, IN PERSON, BY PHONE, OR MAIL</p>

Identifier	Return Reference	Explanation
PART XI RECONCILIATION OF NET ASSETS	LINE 9 OTHER CHANGES TO NET ASSETS	Gain/Loss Debt Sw ap \$ 116,087,745 SWAP Termination Gain/Loss \$ (16,915,036) Change in Value of Split Int Agreemt \$ 17,901,812 FAS 158 Adjustment \$ 24,607,534 Losses from Uncollectible Pledges \$ (8,304,494) Income from Disregarded LLC \$ (212,178) Assets from Disregarded LLC \$ 187,852 ----- TOTAL \$ 133,353,235 =====

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
CORNELL UNIVERSITY

Employer identification number
15-0532082

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
See Additional Data Table							

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	
(1) ITHACA LP 35 THORNWOOD ITHACA, NY 14850	INVESTMENTS	PW	CORNELL UNIV	RELATED	9,246,016	38,625,378		No			No	100 000 %

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) TOWER INNOVATIVE LEARNING SOLUTIONS 950 DANBY RD ITHACA, NY 14850 16-1593492	DIST LEARNIN	NY	NA	C Corp	587,588	10,446,959	100 000 %	Yes	
(2) LENROC CORPORATION 15 THORNWOOD ITHACA, NY 14850 16-1450466	REAL ESTATE	NY	NA	C Corp	1,183	0	100 000 %		
(3) UNIVERSITY VETERINARY SPECIALISTS INC 800 CANAL ST STAMFORD, CT 06902 27-2461725	VET SERVICES	CT	NA	C Corp	962,916	6,082,956	100 000 %		

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

Yes

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
See Additional Data Table			

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: 15-0532082
Name: CORNELL UNIVERSITY

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

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
CORNELL UNIVERSITY FOUNDATION	c	4,030,423	COST
CORNELL UNIVERSITY FOUNDATION	n	1,000	COST
CORNELL REAL PROPERTY SERVICES INC	q	53,681	COST
CORNELL REAL PROPERTY SERVICES INC	n	1,000	COST
SAMUEL CURTIS JOHNSON FOUNDATION	c	2,412,172	COST
SAMUEL CURTIS JOHNSON FOUNDATION	n	1,000	COST
TOWER INNOVATIVE LEARNING SOLUTIONS INC	a	1,962,992	COST/AGREEMENT
UNIVERSITY VETERINARY SPECIALISTS INC	a	381,645	COST/AGREEMENT
UNIVERSITY VETERINARY SPECIALISTS INC	p	5,800	COST
UNIVERSITY VETERINARY SPECIALISTS INC	b	60,000	COST
UNIVERSITY VETERINARY SPECIALISTS INC	d	50,000	COST
MRSI MANAGEMENT INC	q	2,580,894	COST/AGREEMENT
MRSI MANAGEMENT INC	p	36,233	COST/AGREEMENT
ROBERT J MIN MD PC	l	286,498	COST/AGREEMENT
CORNELL UNIVERSITY FOUNDATION UK LTD	c	25,000	COST

FORM 5713

LINE 2B

MEMBERS OF CONTROLLED GROUP

CORNELL UNIVERSITY	15-0532082
CORNELL RESEARCH FOUNDATION, INC	16-6050703
MRSI MANAGEMENT, INC	13-3366821
CORNELL REAL PROPERTY SERVICES, INC	16-1450535
CORNELL CENTER OF NEW YORK, INC	16-1301416
LENROC REAL ESTATE	16-1450466
TOWER INNOVATION LEARNING SOLUTIONS INC DBA ECORNELL	16-1593492
UNIVERSITY VETERINARY SPECIALISTS	27-2461725

Attachment to Form 5713: International Boycott Report

The University does not discriminate in hiring or student admissions on the basis of race, religion or country of origin and admits students, hires employees and/or hosts academics from the following countries who have obtained the appropriate visas.

Lebanon Qatar Saudi Arabia Syria

The University has not received any requests to participate in a boycott.

The University does not participate in any international boycott.