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Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

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1

Briefly describe the organization's mission

THE ORGANIZATION CONDUCTS RESEARCH IN THE BIOLOGICAL SCIENCES WITH A PARTICULAR EMPHASIS ON BASIC RESEARCH IN MOLECULAR BIOLOGY AND GENETICS

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 \$ 94,414,394 including grants of \$ 4,398,662) (Revenue \$ 973,946)

RESEARCH Cold Spring Harbor Laboratory (CSHL) is a world-renowned, private research and education institution with research programs in Cancer, Neuroscience, Plant Biology, Quantitative Biology, Bioinformatics & Genomics. The research environment is highly collaborative, allowing CSHL scientists to work together across disciplines to solve biology's most challenging problems. The ultimate goal is to apply this research on basic biological mechanisms to improve the diagnosis and treatment of cancer, neurological disorders and other diseases. see schedule O

4b

(Code) (Expenses \$ 8,641,631 including grants of \$) (Revenue \$ 10,174,394)

PUBLICATIONS THE COLD SPRING HARBOR PRESS IS RESPONSIBLE FOR PUBLISHING THE PROCEEDINGS OF THE LABORATORY'S MEETINGS PROGRAM AS WELL AS THE TECHNICAL MANUALS FROM ITS COURSES. IN ADDITION, THE PRESS PUBLISHES CLOSE TO 200 OTHER BOOKS AND ELECTRONIC MEDIA, INCLUDING 22 NEW TITLES IN 2013. THE PRESS ALSO PUBLISHES 7 SCIENTIFIC JOURNALS BOTH IN PRINT AND ONLINE

4c

(Code) (Expenses \$ 15,373,940 including grants of \$) (Revenue \$ 10,208,914)

EDUCATIONAL PROGRAMS The Laboratory offered a series of meetings (32) in 2013 which were attended by over 6,000 scientists and focus on the dissemination of research findings on topics of current interest in biology and genetics. Meetings held included topics such as Plant Genomes, Wiring the Brain and Cancer Cell Biology. See schedule O

4d

Other program services (Describe in Schedule O)

(Expenses \$ 4,542,700 including grants of \$) (Revenue \$ 2,242,232)

4e

Total program service expenses

122,972,665

Form 990 (2013)

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	No
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 Yes	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
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	No
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 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 or other assistance to any domestic organization or government 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 or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, 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		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	548
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	1,134
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).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
b	If "Yes," enter the name of the foreign country: CH, CJ, BD, EI 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?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8	
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11 Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line 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	No
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	No
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	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	NY
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. ☐ Own website ☐ Another's website ☒ Upon request ☐ 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 LARI C RUSSO CFO PO BOX 100 ONE BUNGTOWN ROAD COLD SPRING HARBOR, NY 11724 (516) 367-8446	

Check if Schedule O contains a response or note to any line 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** 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

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	3,635,045	12,500	1,055,982

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 95

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CENTERBROOK ARCHITECTS, PO BOX 955 CENTERBROOK CT 06409	ARCHITECTURAL	1,020,092
SCULLY SCOTT MURPHY PRESSER, 400 GARDEN CITY PLAZA SUITE 300 GARDEN CITY NY 11530	LEGAL	580,910
KPMG, ROUTE 100 MELVILLE NY 11375	ACCOUNTING	333,142
Willkie Farr Gallagher, 787 Seventh Ave 2nd Floor NEW YORK NY 10019	LEGAL-PATENT	463,656
EXECUTIVE CLEANING SERVICES, 460 NEW YORK AVENUE HUNTINGTON NY 11743	HOUSEKEEPING	323,771

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **10**

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c	3,879,706			
	d	Related organizations 1d	5,036,029			
	e	Government grants (contributions) 1e	43,938,844			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	47,394,265			
	g	Noncash contributions included in lines 1a-1f \$	3,861,005			
	h	Total. Add lines 1a-1f	100,248,844			
Program Service Revenue	2a	MEETINGS AND COURSES	611600	5,269,841	5,269,841	
	b	CO-PARTICIPANT PROJECTS	541700	973,946	973,946	
	c	PUBLICATIONS	713110	10,174,394	9,630,467	543,927
	d	DINING	611710	4,413,987	4,413,987	
	e	HOUSING	611710	2,767,318	2,767,318	
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	23,599,486			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	3,119,641		48,671	3,070,970
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	1,128,130			1,128,130
	6a	Gross rents	(i) Real	(ii) Personal		
	b	Less rental expenses	197,916			
	c	Rental income or (loss)	63,133			
	d	Net rental income or (loss)	134,783	0		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
	b	Less cost or other basis and sales expenses	79,997,789	63,779		
	c	Gain or (loss)	75,345,605	45,294		
	d	Net gain or (loss)	4,652,184	18,485		
	8a	Gross income from fundraising events (not including \$ 3,879,706 of contributions reported on line 1c) See Part IV, line 18	a			
	b	Less direct expenses	255,053			
	c	Net income or (loss) from fundraising events	249,565	5,488		5,488
	9a	Gross income from gaming activities See Part IV, line 19	a			
	b	Less direct expenses	b			
	c	Net income or (loss) from gaming activities		0		
	10a	Gross sales of inventory, less returns and allowances	a			
	b	Less cost of goods sold	b			
	c	Net income or (loss) from sales of inventory		0		
		Miscellaneous Revenue	Business Code			
	11a	EMPLOYEE DINING	611710	301,579		301,579
	b	YEAR ROUND HOUSING	611710	1,092,467		1,092,467
	c	MISCELLANEOUS	541900	111,365		111,365
	d	All other revenue				
	e	Total. Add lines 11a-11d		1,505,411		
	12	Total revenue. See Instructions		134,412,452	23,055,559	592,598
						10,515,451

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 or note to any line 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.	3,996,313	3,996,313		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	402,349	402,349		
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	2,719,346	1,122,336	1,597,010	
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.	49,778,475	44,184,593	4,339,000	1,254,882
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	3,670,976	3,258,449	319,985	92,542
9	Other employee benefits.	10,487,541	8,898,260	1,147,362	441,919
10	Payroll taxes.	3,280,484	2,866,655	349,097	64,732
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	1,643,782	1,472,524	163,060	8,198
c	Accounting.	317,400		317,400	
d	Lobbying.	0			
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees.	928,550		928,550	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,226,018	963,286	212,326	50,406
12	Advertising and promotion.	282,406	240,536	33,990	7,880
13	Office expenses.	19,937,541	18,905,969	987,365	44,207
14	Information technology.	1,411,738	1,380,773	30,866	99
15	Royalties.	914,788	914,788		
16	Occupancy.	6,394,676	5,292,730	1,101,946	
17	Travel.	1,761,932	1,709,863	32,385	19,684
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	3,683,202	3,645,200	38,002	
20	Interest.	4,410,816	3,896,609	514,207	
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	14,810,491	12,888,872	1,900,135	21,484
23	Insurance.	751,243		751,243	
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	PRINTING AND PUBLICATIONS	4,749,358	4,367,787	368,081	13,490
b	SERVICE CONTRACTS & REPAIRS	2,416,139	2,014,299	401,579	261
c	MISCELLANEOUS	1,259,806	550,474	430,221	279,111
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	141,235,370	122,972,665	15,963,810	2,298,895
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 ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		9,110	1	9,110
	2	Savings and temporary cash investments		74,405,102	2	64,230,101
	3	Pledges and grants receivable, net		155,302,027	3	118,894,028
	4	Accounts receivable, net		5,430,196	4	5,480,091
	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		0	7	0
	8	Inventories for sale or use		2,767,427	8	2,187,157
	9	Prepaid expenses and deferred charges		6,236,128	9	6,648,716
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 366,205,876			
	b	Less: accumulated depreciation	10b 134,263,760	240,574,879	10c	231,942,116
	11	Investments—publicly traded securities		79,185,947	11	97,429,384
	12	Investments—other securities. See Part IV, line 11		112,761,984	12	169,967,539
	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		7,896,003	15	8,853,631
	16	Total assets. Add lines 1 through 15 (must equal line 34)		684,568,803	16	705,641,873
Liabilities	17	Accounts payable and accrued expenses		10,342,935	17	10,248,832
	18	Grants payable		0	18	0
	19	Deferred revenue		4,701,413	19	4,622,400
	20	Tax-exempt bond liabilities		97,200,000	20	97,200,000
	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		0	23	0
	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		37,073,352	25	20,065,313
	26	Total liabilities. Add lines 17 through 25		149,317,700	26	132,136,545
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		243,241,685	27	294,183,468
	28	Temporarily restricted net assets		197,149,769	28	182,340,234
	29	Permanently restricted net assets		94,859,649	29	96,981,626
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ 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		535,251,103	33	573,505,328
	34	Total liabilities and net assets/fund balances		684,568,803	34	705,641,873

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	134,412,452
2	Total expenses (must equal Part IX, column (A), line 25)	2	141,235,370
3	Revenue less expenses Subtract line 2 from line 1	3	-6,822,918
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	535,251,103
5	Net unrealized gains (losses) on investments	5	28,134,276
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	16,942,867
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	573,505,328

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

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

Additional Data

Software ID:

Software Version:

EIN: 11-2013303

Name: COLD SPRING HARBOR LABORATORY

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			
TANIA A BAKER PHD TRUSTEE	1 0	X								
DAVID BOIES TRUSTEE	1 0	X								
MICHAEL BOTCHAN PHD TRUSTEE	1 0	X								
JACOB GOLDFIELD TRUSTEE	1 0	X								
LEO GUTHART TREASURER	1 0 1 0	X								
LAURIE LANDEAU VMD TRUSTEE FROM 11/2013	1 0	X								
THOMAS LEHRMAN TRUSTEE	1 0	X								
ROBERT D LINDSAY VICE-CHAIRMAN	1 0	X								
HOWARD W MORGAN PHD TRUSTEE	1 0	X								
JAMIE C NICHOLLS CHAIRMAN	1 0 1 0	X								
LOUISE M PARENT TRUSTEE	1 0	X								
JOHN C PHELAN TRUSTEE	1 0	X								
THOMAS C QUICK TRUSTEE	1 0	X								
WILLIAM S ROBERTSON TRUSTEE	1 0 1 0	X								
GEORGE SARD TRUSTEE	1 0	X								
Thomas A Saunders III TRUSTEE (FROM 11/2013)	1 0	X								
CHARLES L SAWYERS MD TRUSTEE	1 0	X								
MARILYN SIMONS PHD VICE-CHAIRMAN	1 0	X								
DINAKAR SINGH TRUSTEE	1 0	X								
Alan Seligson TRUSTEE (TO 11/2013)	1 0	X								
SAMUEL STANLEY JR MD TRUSTEE	1 0	X								
BRUCE STILLMAN PHD CHIEF EXE OFFICER/Trustee	39 0 1 0	X		X				537,791	0	229,831
PAUL TAUBMAN SECRETARY	1 0	X								
EDWARD TRAVAGLIANTI Trustee (From 11/2013)	1 0	X								
SANDRA TYTEL TRUSTEE	1 0	X								

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			
ROY J ZUCKERBERG TRUSTEE	1 0	X								
CHARLES I COGUT TRUSTEE	1 0	X								
JAMES M STONE PHD TRUSTEE	1 0	X								
DAVID BOTSTEIN PHD TRUSTEE (TO 10/2013)	1 0	X								
Cornelia Isabella Bargmann Trustee (From 11/2013)	1 0	X								
Jeffrey Kelter Trustee (FROM 11/2013)	1 0	X								
Robert W Lourie PhD Trustee (FROM 6/2013)	1 0	X								
W DILLAWAY AYRES CHIEF OPERATING OFFICER	39 0			X				437,238	0	200,934
LARI C RUSSO CHIEF FINANCIAL OFFICER	39 0			X				254,123	12,500	33,978
ARTHUR BRINGS V P ,CHIEF FACILITIES OFFICER	40 0				X			221,945	0	64,981
Walter Goldschmidts EXEC DIRECTOR SPONSORED PGMS	39 0				X			263,597	0	57,077
DAVID SPECTOR DIRECTOR OF RESEARCH	40 0				X			355,422	0	62,430
THOMAS GINGERAS SCIENTIST	40 0					X		287,840	0	42,550
ADRIAN KRAINER SCIENTIST	40 0					X		278,379	0	55,732
DR JAMES D WATSON CHANCELLOR EMERITUS	40 0					X		380,349	0	184,896
MICHAEL WIGLER SCIENTIST	40 0					X		338,625	0	60,040
Charles V Prizzi EXEC DIR, Development	40 0					X		279,736	0	63,533

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization COLD SPRING HARBOR LABORATORY	Employer identification number 11-2013303
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

1	☐	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	☐	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	☐	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	☒	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	☐	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
e	☐	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the supported organization(s)

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

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

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	123,621,810	112,619,962	179,151,906	119,066,951	100,248,844	634,709,473
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	123,621,810	112,619,962	179,151,906	119,066,951	100,248,844	634,709,473
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)						43,808,765
6 Public support. Subtract line 5 from line 4						590,900,708

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	123,621,810	112,619,962	179,151,906	119,066,951	100,248,844	634,709,473
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,798,391	4,282,361	7,018,139	5,885,929	5,538,154	28,522,974
9 Net income from unrelated business activities, whether or not the business is regularly carried on	156,192	0	0	0	0	156,192
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	124,453	168,383	135,538	127,694	111,365	667,433
11 Total support (Add lines 7 through 10)						664,056,072
12 Gross receipts from related activities, etc (see instructions)					12	113,756,857
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 2013 (line 6, column (f) divided by line 11, column (f))	14	88 984 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	83 554 %
16a 33 1/3% support test—2013. 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—2012. 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—2013. 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—2012. 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. 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—2012. 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.** 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

Return Reference	Explanation	
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SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization COLD SPRING HARBOR LABORATORY	Employer identification number 11-2013303
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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? ☐ Yes ☐ 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? ☐ Yes ☐ 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 easements3
b	Total acreage restricted by conservation easements125 00
c	Number of conservation easements on a certified historic structure included in (a)1
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

Number of states where property subject to conservation easement is located ► 1

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 ► 100 00

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ 3,500

8

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

☐ Yes ☐ No

9

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

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

1a

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

b

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

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

► \$

(ii) Assets included in Form 990, Part X

► \$

2

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

a

Revenues included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2013

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

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

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table
- c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	
- 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 | 216,435,401 | 193,020,551 | 204,749,076 | 183,810,446 | 158,727,484 |
| b Contributions | 28,991,515 | 20,323,673 | 5,325,021 | 16,281,808 | 11,528,721 |
| c Net investment earnings, gains, and losses | 35,627,761 | 22,271,068 | 491,507 | 17,839,551 | 26,263,315 |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | 9,720,030 | 18,463,775 | 16,793,937 | 12,440,512 | 12,215,524 |
| f Administrative expenses | 928,550 | 716,116 | 751,116 | 742,217 | 493,550 |
| g End of year balance | 270,406,097 | 216,435,401 | 193,020,551 | 204,749,076 | 183,810,446 |
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a Board designated or quasi-endowment

49 000 %

b Permanent endowment

36 000 %

c Temporarily restricted endowment

15 000 %

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

(ii) related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. 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		16,429,712		16,429,712
b Buildings		263,425,015	74,233,668	189,191,347
c Leasehold improvements		732,756	365,267	367,489
d Equipment		82,323,797	59,299,195	23,024,602
e Other		3,294,596	365,630	2,928,966
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				231,942,116

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
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	

Part XIII

Supplemental Information

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.

Return Reference	Explanation
CONSERVATION EASEMENTS	SCHEDULE D, PART II, LINE 9 THE LABORATORY INCLUDES ANY EXPENSES FROM THE CONSERVATION EASEMENTS IN ITS GENERAL EXPENSES. THE EASEMENTS DO NOT GENERATE ANY OTHER MATERIAL EXPENSES OR LIABILITIES AND ARE THEREFORE NOT SEPARATELY DISCLOSED IN THE NOTES TO THE FINANCIAL STATEMENTS.
ENDOWMENT FUNDS	SCHEDULE D, PART V, LINE 4 THE LABORATORY'S ENDOWMENT CONSISTS OF APPROXIMATELY 130 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING PRIMARY PROGRAM SERVICES FOR BOTH RESEARCH AND EDUCATION, OPERATIONS AND FACILITIES COSTS. ITS ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS.
OTHER LIABILITIES	SCHEDULE D, PART X NOTE PAYABLE - REPRESENTS A NOTE BETWEEN COLD SPRING HARBOR LABORATORY AND THE ROBERTSON RESEARCH FUND, INC, A RELATED 501 (C)(3) ORGANIZATION OF THE LABORATORY, WHICH WAS ORIGINATED IN 1996. THE NOTE IS PAYABLE IN 30 ANNUAL INSTALLMENTS AND BEARS INTEREST AT A RATE OF 6% PER ANNUM. ACCRUED SWAP FAIR MARKET VALUE - IN APRIL 2006, THE LABORATORY ENTERED INTO AN INTEREST RATE SWAP AGREEMENT TO MITIGATE THE RISK OF INTEREST RATES ASSOCIATED WITH THE SERIES 1999 AND SERIES 2006 BOND ISSUES. UNDER THE TERMS OF THE AGREEMENT, THE LABORATORY PAYS INTEREST AT A PREDETERMINED FIXED RATE OF 3.802% AND RECEIVES 68% OF 3-MONTH LIBOR ON THE NOTIONAL PRINCIPAL AMOUNT OF \$97.2 MILLION. THE SWAP AGREEMENT HAS AN EFFECTIVE DATE OF OCTOBER 1, 2006 AND A TERMINATION DATE OF JANUARY 1, 2042. THE FAIR VALUE OF THE INTEREST RATE SWAP WAS A LIABILITY OF \$18,613,481 AT DECEMBER 31, 2013.
FIN 48	SCHEDULE D, PART X The Laboratory and Robertson are exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, they are not subject to income taxes except to the extent there is taxable income from activities that are not related to the exempt purposes. The Laboratory recognizes the effects of income tax positions only if those positions are more likely than not of being sustained. CSH Asia was established as a taxable organization where the Laboratory has begun efforts to convert the organization to a not-for-profit organization in China. Provisions for unrelated business income taxes are included in accounts payable and accrued expenses in 2013.

[illegible]

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
COLD SPRING HARBOR LABORATORY

Employer identification number
11-2013303

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 its grants and other 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 its grants and other assistance 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
(1) Central America and the Caribbean			Investments		52,742,364
(2) Europe (Including Iceland and Greenland)			Investments		7,549,046
(3) East Asia and the Pacific			Grantmaking		127,463
(4) Europe (Including Iceland and Greenland)			Grantmaking		274,886
(5) East Asia and the Pacific	1	1	Program Services	SCIENTIFIC CONFERENCES	2,694,538
3a Sub-total	1	1			63,388,297
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1	1			63,388,297

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)
(1)			East Asia and the Pacific	Research	127,463	CHECK			
(2)			Europe (Including Iceland and Greenland)	Research	160,908	CHECK			
(3)			Europe (Including Iceland and Greenland)	Research	26,338	Check			
(4)			Europe (Including Iceland and Greenland)	RESEARCH	87,640	CHECK			

- 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
- 4
- 3
- Enter total number of other organizations or entities
- 0

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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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, Information 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

Part V

Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SUBAWARD/SUBRECIPIENT MONITORING PROCEDURES	SCHEDULE F, PART I, LINE 2 SEE SCHEDULE O FOR SUBAWARD/SUBRECIPIENT MONITORING PROCEDURES DISCLOSURE

990 Schedule F, Supplemental Information

Return Reference	Explanation
ACCOUNTING METHOD	PART I, SECTION 3, COLUMN (F) AND PART II, SECTION 1 ACCOUNTING METHOD FOR INVESTMENTS FMV ACCOUNTING METHOD FOR GRANTS ACCRUAL

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization COLD SPRING HARBOR LABORATORY	Employer identification number 11-2013303
---	--

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 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			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

- 3

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

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>AWARD DINNER</u>	<u>GOLF OUTING</u>	<u>1</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
1	Gross receipts	. . .	3,646,516	278,628	209,615	4,134,759	
2	Less Contributions	. .	3,546,766	144,450	188,490	3,879,706	
3	Gross income (line 1 minus line 2)	. . .	99,750	134,178	21,125	255,053	
Direct Expenses	4	Cash prizes	. . .				
	5	Noncash prizes	. .				
	6	Rent/facility costs	. .	200	7,088		7,288
	7	Food and beverages	.	125,749	32,482	25,080	183,311
	8	Entertainment	. . .	4,800	36,899		41,699
	9	Other direct expenses	.		17,267		17,267
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(249,565)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					5,488

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			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
Direct Expenses	6	Volunteer labor			
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, 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. 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).

Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
COLD SPRING HARBOR LABORATORY

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

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Employer identification number
11-2013303

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

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

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

2

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

18

3

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

0

Part III

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

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

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
SUBAWARD/SUBRECIPIENT MONITORING PROCEDURES	SCHEDULE F, PART I, LINE 2 SEE SCHEDULE O FOR SUBAWARD/SUBRECIPIENT MONITORING PROCEDURES DISCLOSURE

Additional Data

Software ID:
Software Version:
EIN: 11-2013303
Name: COLD SPRING HARBOR LABORATORY

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
ALBERT EINSTEIN COLLEGE OF MEDICINE JACK PEARL RESNICK CAMPUS BELFER BLDG RM 1108 1300 MORRIS P BRONX, NY 10461	13-1624225	501(C)(3)	73,067		BOOK VALUE		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 AND WOMEN'S HOSPITAL 75 FRANCIS ST BOSTON, MA 02115	04-2312909	501(C)(3)	44,572		BOOK VALUE		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
CORNELL UNIVERSITY MEDICAL COLLEGE PO BOX 22 ITHACA, NY 14851	15-0532082	501(C)(3)	91,210		BOOK VALUE		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
COLUMBIA UNIVERSITY PO BOX 29789 NEW YORK, NY 10087	13-5598093	501(C)(3)	144,343		BOOK VALUE		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
BOSTON UNIVERSITY 25 BUICK ST BOSTON, MA 02215	04-2103547	501(C)(3)	26,490		BOOK VALUE		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
MEMORIAL SLOAN-KETTERING GENERAL POST OFFICE PO BOX 26338 NEW YORK,NY 10087	91-2154267	501(C)(3)	2,268,402		BOOK VALUE		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
OREGON STATE UNIVERSITY OFFICE OF POST AWARD ADMIN PO B CORVALLIS,OR 973391086	93-6022772	501(C)(3)	412,280		BOOK VALUE		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
RESEARCH FOUNDATION OF SUNY W-5510 MELVILLE LIBRARY STONY BROOK, NY 117943366	14-1368361	501(C)(3)	18,549		BOOK VALUE		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
UNIVERITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DRIVE LAJOLLA,CA 92093	94-3067788	501(C)(3)	48,137		BOOK VALUE		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
JCRAIG VENTER INSTITUTE INC 9704 MEDICAL CTR DR ROCKVILLE,MD 20850	52-1842938	501(C)(3)	107,235		BOOK VALUE		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 MICHIGAN 3003 S STATE ST ANN ARBOR, MI 48109	38-6006309	501(C)(3)	107,409		BOOK VALUE		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 WYOMING 1000 EAST UNIVERSITY AVENUE LARAMIE, WY 82071	83-6000331	501(C)(3)	376,747		BOOK VALUE		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
BOYCE THOMPSON INSTITUTE 533 TOWER ROAD ITHACA,NY 14853	13-1739923	501 (C)3	101,910				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
JACKSON LABORATORY 600 MAIN STREET BARHARBOR,ME 04609	01-0211513	501 (C)3	22,355				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
MADISON AREA TECHNICAL COLLEGE 1701 WRIGHT STREET MADISON, WI 53704	39-1086718	501 (C)3	12,879				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
MOUNT SINAI SCHOOL OF MEDICINE 850 THIRD AVENUE NEW YORK, NY 10029	13-6171197	501 (C)3	10,774				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
NYU SCHOOL OF MEDICINE 550 FIRST AVENUE NEW YORK, NY 10016	13-5562308	501 (C)3	92,070				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
SUNY AT STONY BROOK 310 ADMIN BUILDING STONY BROOK, NY 11794	11-6077945	501 (C)3	37,884				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, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
COLD SPRING HARBOR LABORATORY

Employer identification number
11-2013303

Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b 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	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		No
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?		No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III		No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?		No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III		No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III		No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?		

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**

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

Return Reference	Explanation
ADDITIONAL DISCLOSURE	SCHEDULE J, PART II, COLUMN D COLD SPRING HARBOR LABORATORY PROVIDES DR STILLMAN, CEO/PRESIDENT, DR WATSON, CHANCELLOR EMERITUS, AND ARTHUR BRINGS, VP CHIEF FACILITIES OFFICER, WITH HOMES ON ITS CAMPUS AND REQUIRES THEM TO BE USED AS A CONDITION OF THEIR EMPLOYMENT FOR THE CONVENIENCE OF THE LABORATORY THE VALUE OF THE NON-TAXABLE PERSONAL USE OF THE HOMES ALONG WITH OTHER EXPENSES ARE INCLUDED IN COLUMN D
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	SCHEDULE J, PART I, LINE 4B THE FOLLOWING INDIVIDUALS PARTICIPATED IN SUPPLEMENTAL NONQUALIFIED RETIREMENT PLANS NAME OF PARTICIPANT AMOUNT BRUCE STILLMAN 82,310 W DILLAWAY AYRES 145,073 DR JAMES D WATSON 18,000 DAVID SPECTOR 13,215 WALTER GOLDSCHMIDTS 1,545 THOMAS GINGERAS 4,172 MIKE WIGLER 10,898 CHARLES V PRIZZI 4,715 THE LABORATORY PROVIDES SENIOR STAFF MEETING CERTAIN REQUIREMENTS SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLANS AMOUNTS REPORTED REPRESENT PAYMENTS TO THESE PLANS WHICH ARE NOT VESTED AND REMAIN SUBJECT TO SUBSTANTIAL SERVICE REQUIREMENTS AND RISK OF FORFEITURE UPON EARLY TERMINATION
SCHEDULE J, PART II, COLUMN B (III)	OTHER REPORTABLE COMPENSATION OF W DILLAWAY AYRES, AND DR BRUCE STILLMAN INCLUDES CLUB DUES AND THE TAXABLE PORTION OF A GROUP TERM LIFE POLICY THE DUES ARE FOR MEMBERSHIP FEES IN CLUBS REQUIRED BY THE ORGANIZATION FOR FURTHERANCE OF BUSINESS RELATIONSHIPS AND MEETINGS

Additional Data

Software ID:
Software Version:
EIN: 11-2013303
Name: COLD SPRING HARBOR LABORATORY

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				
BRUCE STILLMAN PHD CHIEF EXE OFFICER/Trustee	(i) (ii)	519,302 0	0 0	18,489 0	114,079 0	115,752 0	767,622 0	0 0
W DILLAWAY AYRES CHIEF OPERATING OFFICER	(i) (ii)	405,866 0	0 0	31,372 0	176,842 0	24,092 0	638,172 0	0 0
LARI C RUSSO CHIEF FINANCIAL OFFICER	(i) (ii)	254,123 12,500	0 0	0 0	31,769 0	2,209 0	288,101 12,500	0 0
ARTHUR BRINGS V P ,CHIEF FACILITIES OFFICER	(i) (ii)	218,609 0	0 0	3,336 0	26,311 0	38,670 0	286,926 0	0 0
Walter Goldschmidts EXEC DIRECTOR SPONSORED PGMS	(i) (ii)	263,597 0	0 0	0 0	34,860 0	22,217 0	320,674 0	0 0
DAVID SPECTOR DIRECTOR OF RESEARCH	(i) (ii)	343,103 0	0 0	12,319 0	44,985 0	17,445 0	417,852 0	0 0
THOMAS GINGERAS SCIENTIST	(i) (ii)	282,812 0	0 0	5,028 0	40,113 0	2,437 0	330,390 0	0 0
ADRIAN KRAINER SCIENTIST	(i) (ii)	254,500 0	0 0	23,879 0	31,694 0	24,038 0	334,111 0	0 0
DR JAMES D WATSON CHANCELLOR EMERITUS	(i) (ii)	375,000 0	0 0	5,349 0	49,769 0	135,127 0	565,245 0	0 0
MICHAEL WIGLER SCIENTIST	(i) (ii)	327,655 0	0 0	10,970 0	42,667 0	17,373 0	398,665 0	0 0
Charles V Prizzi EXEC DIR, Development	(i) (ii)	279,736 0	0 0	0 0	41,200 0	22,333 0	343,269 0	0 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
COLD SPRING HARBOR LABORATORY

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

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number
11-2013303

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 NASSAU COUNTY IDA	11-2559657	631657KT9	06-27-2006	55,000,000	CONTRUCTION OF RESEARCH BUILDINGS		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	55,000,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	0							
7	Issuance costs from proceeds	1,743,581							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	547,324							
10	Capital expenditures from proceeds	52,709,095							
11	Other spent proceeds	0							
12	Other unspent proceeds	0							
13	Year of substantial completion	2009							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III

Private Business Use

				A		B		C		D	
				Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?				X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?			X							

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 640 %							
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 ▶								
6	Total of lines 4 and 5	0 640 %							
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		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							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?	X							
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?								
c	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b	Name of provider	JP MORGAN							
c	Term of hedge	35							
d	Was the hedge superintegrated?		X						
e	Was the hedge terminated?		X						

Part IV

Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?							
	X							
b	Name of provider		PALLAS CAPITAL					
c	Term of GIC		1 8					
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X					
6	Were any gross proceeds invested beyond an available temporary period?		X					
7	Has the organization established written procedures to monitor the requirements of section 148?			X				

Part V

Procedures To Undertake Corrective Action

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

Part VI

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

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

OMB No 1545-0047
2013
Open to Public Inspection

Name of the organization
COLD SPRING HARBOR LABORATORY

Employer identification number
11-2013303

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	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
(1) DAVID SPECTOR	SEE PART V	201,566	JOINT INVESTMENT IN RESIDENCE		No
(2) TD BANK	SEE PART V	163,750	BANK FEES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
PART IV	BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS LINE 1 IN 1996, THE LABORATORY JOINTLY INVESTED IN THE PURCHASE OF A PERSONAL RESIDENCE FOR A THEN NON-KEY EMPLOYEE THE EMPLOYEE WAS SUBSEQUENTLY PROMOTED TO DIRECTOR OF RESEARCH A KEY POSITION LINE 2 A BOARD MEMBER EDWARD TRAVAGLIANTI IS THE PRESIDENT OF TD BANK, LONG ISLAND ADDITIONAL DISCLOSURE THE LABORATORY'S MAIN OPERATING BANK ACCOUNTS ARE HELD AT BOTH JP MORGAN CHASE AND TD BANK THE LABORATORY USES STANDBY LETTERS OF CREDIT WHICH SUPPORT ITS MUNICIPAL BOND ISSUE FROM TD BANK THE AMOUNT REPORTED ON SCHEDULE L REPRESENTS THE FEES PAID TO TD BANK MR TRAVAGLIANTI HAS RECUSED HIMSELF FROM ANY DISCUSSIONS, NEGOTIATIONS, APPROVALS, VOTES, ETC WITH REGARD TO THE RELATIONSHIP WITH TD BANK

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
COLD SPRING HARBOR LABORATORY

Employer identification number
11-2013303

Part I Types 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				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous	X	23	3,861,005	MEAN VALUE
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				
25 Other ► (_____)				
26 Other ►(_____)				
27 Other ►(_____)				
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

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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?

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?

32a

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

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

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

Cat No 51227J

Schedule M (Form 990) (2013)

Part II

Supplemental Information.

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.

Return Reference	Explanation
SCHEDULE M, PART II, LINE 32B	THE LABORATORY ENGAGES UBS FINANCIAL SERVICES TO RECEIVE ALL STOCK GIFTS AND SELL THE SHARES IMMEDIATELY

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

OMB No 1545-0047

2013**Open to Public
Inspection**Name of the organization
COLD SPRING HARBOR LABORATORY**Employer identification number**

11-2013303

Return Reference	Explanation
STATEMENT PROGRAM SERVICE ACCOMPLISHMENTS	Form 990, PART III LINE 4A (CONTINUED) Research at the Laboratory is enriched by collaborations with scientists at other universities, hospitals and in the biotech and pharmaceutical sectors. These partnerships have included NYU, Memorial Sloan-Kettering, Weill Cornell, Yale and Dana-Farber. The innovative spirit, vision, and talent of the Laboratory's over 600 scientists continue to place CSHL among the top 1% of life science institutions most cited in published research. For over 25 years the Laboratory has been a National Cancer Institute-designated Cancer Center with an NCI "outstanding" rating. It has been home to over eight Nobel laureates, including Dr. James Watson, co-discoverer of the DNA's double helix. The dynamic, collaborative environment at CSHL also fosters a superb educational experience for an outstanding group of graduate students and postdoctoral researchers. Line 4C (CONTINUED) Scientific courses (30) focus on the need for training in subjects that are either so new or extremely specialized they are not offered in universities. The aim is to prepare students who plan to enter into research in these areas. Close to 1,000 participants attended the courses in 2013. The CSH Asia program in China attracted over 3,000 participants. Line 4D WATSON SCHOOL OF BIOLOGICAL SCIENCES The Watson School of Biological Sciences (WSBS) trains the next generation of biologists, offering the Ph.D. in biology in as little as 4 years to a limited number of accomplished students (approximately 50) drawn from around the world. The curriculum is designed to train self-confident, self-reliant young scientists to become scholars and to acquire the knowledge that their research and future careers demand. The accomplishments of WSBS students have been spectacular, with more than 250 papers published in the 15 years since the school's launch. Graduates have moved swiftly into faculty positions at leading academic research institutions worldwide. BANBURY CENTER Banbury Center, located on the grounds of the historic Robertson House, provides opportunities for scientists and other leaders in society to discuss topics of common interest. Approximately twenty meetings are organized each year, for groups of up to 40 participants. These are recognized internationally as being among the best discussion workshops for topics in molecular biology, molecular genetics, human genetics, neuroscience and science policy. DNA LEARNING CENTER The DNA Learning Center (DNALC) has a major impact not only in the New York metropolitan area, but also globally in pioneering public science education for the genome age. With teaching facilities on Long Island and New York City, it brings a hands-on approach to learning about biology and genomes to classrooms and homes of children in primary schools, middle schools and high schools. Renowned for devising means for young people, teachers and parents to conduct sophisticated experiments with DNA, the DNALC also has a robust presence on the Internet, powered by a team of multimedia innovators who bring knowledge of the life sciences to computer, tablet and cell phone users.

Return Reference	Explanation
CONSOLIDATED FINANCIAL STATEMENTS	Form 990, PART IV, LINE 12 COLD SPRING HARBOR LABORATORY IS AUDITED IN COMBINATION WITH ITS RELATED ORGANIZATION ROBERTSON RESEARCH FUND,INC [EIN 23-7224244], ALTHOUGH SEPARATE AUDITED FINANCIAL STATEMENTS ARE NOT ISSUED FOR COLD SPRING HARBOR LABORATORY , A CONSOLIDATED AUDITED FINANCIAL STATEMENT WAS ISSUED FOR THE YEAR 2013, WHICH WAS PREPARED IN ACCORDANCE WITH GAAP

Return Reference	Explanation
990 REVIEW	FORM 990, PART VI, SECTION B, LINE 11 THE CONSOLIDATED FINANCIAL STATEMENTS AND THE 990 OF THE ORGANIZATION ARE PREPARED BY THE FINANCE OFFICE OF COLD SPRING HARBOR LABORATORY THE FINANCE OFFICE USES THE BOOKS AND RECORDS OF THE ORGANIZATION TO PREPARE THE FINANCIAL STATEMENTS AND THE 990 THESE RECORDS ARE LARGELY INCLUDED IN THE AUDITED DOCUMENTS BY AN INDEPENDENT AUDITOR UPON COMPLETION OF THE AUDITED FINANCIAL STATEMENTS, THE REMAINING DOCUMENTATION NEEDED TO PREPARE THE 990 IS FINALIZED THE CFO THEN PROCEEDS WITH A DETAILED REVIEW OF THE 990, WITH ADDITIONAL DOCUMENTATION AND SCHEDULES THESE DOCUMENTS ARE FORWARDED TO KPMG, LLP WHO REVIEWS THE DRAFT RETURN AND SUPPORTING INFORMATION AND PREPARES THE RETURN FOR ELECTRONIC FILING TO THE IRS COPIES OF THE RETURN ARE REVIEWED BY THE AUDIT COMMITTEE AND PROVIDED TO MEMBERS OF THE BOARD OF TRUSTEES PRIOR TO FILING WITH THE IRS

Return Reference	Explanation
CONFLICT OF INTEREST POLICY	Form 990, PART VI, Section B, LINE 12C THE ORGANIZATION REQUIRES ALL SENIOR STAFF TO FILE AN ANNUAL QUESTIONNAIRE DISCLOSING POSSIBLE SOURCES OF CONFLICT OF INTEREST ACCORDING TO THE CONFLICT OF INTEREST POLICY OF THE ORGANIZATION THE ORGANIZATION ALSO REQUIRES ALL MEMBERS OF THE BOARD OF TRUSTEES TO FILE AN ANNUAL QUESTIONNAIRE DISCLOSING POSSIBLE SOURCES OF CONFLICT OF INTEREST ACCORDING TO THE CONFLICT OF INTEREST POLICY OF THE ORGANIZATION THE BOARD OF TRUSTEES IS MADE UP OF A LARGE GROUP OF LEADERS WITHIN THE SCIENTIFIC AND FINANCIAL COMMUNITIES ANY MEMBER WITH A PERCEIVED OR ACTUAL CONFLICT WITH RESPECT TO A CONTEMPLATED TRANSACTION SHALL RECUSE THEMSELVES FROM ANY DELIBERATION OR DETERMINATION OF THE TRANSACTION CONSIDERED REPORTING IS MANAGED BY THE OFFICE OF THE CHIEF OPERATING OFFICER FOR MEMBERS OF THE BOARD OF TRUSTEES AND THE OFFICE OF THE VP TECHNOLOGY TRANSFER AND IN-HOUSE LEGAL COUNSEL FOR SENIOR STAFF

Return Reference	Explanation
COMPENSATION	Form 990, PART VI, Section B, LINE 15 THE COMPENSATION OF ALL STAFF MEMBERS EARNING WAGES IN EXCESS OF \$250,000, INCLUDING THE PRESIDENT AND CHIEF OPERATING OFFICER, IS DETERMINED BY AN EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES THE VP HUMAN RESOURCES REPORTS DIRECTLY TO THE COMMITTEE WHICH IS MADE UP OF INDEPENDENT MEMBERS OF THE BOARD OF TRUSTEES REPORTING INCLUDES COMPARABILITY DATA AND OTHER INFORMATION GATHERED AT THE REQUEST OF THE COMMITTEE CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DISCUSSION IS MAINTAINED BY THE VP HUMAN RESOURCES

Return Reference	Explanation
GOVERNING DOCUMENTS	Form 990, PART VI, Section C, LINE 19 THE ORGANIZATION MAINTAINS ALL DOCUMENTS INCLUDING GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES, ANNUAL REPORTS, FINANCIAL STATEMENTS AND TAX RETURNS FOR PUBLIC INSPECTION AT THE FINANCE OFFICE OF COLD SPRING HARBOR LABORATORY, LOCATED AT 1 BUNGTOWN ROAD, COLD SPRING HARBOR, NEW YORK 11724 IN ADDITION MANY OF THESE DOCUMENTS ARE AVAILABLE ONLINE AT WWW.CSHL.EDU

Return Reference	Explanation
RECONCILIATION OF NET ASSETS	PART XI, LINE 9 OTHER CHANGES IN NET ASSETS CONSIST OF CHANGE IN FAIR VALUE OF INTEREST RATE SWAP 16,942,867

Return Reference	Explanation
SUBAWARD/SUBRECIPIENT MONITORING PROCEDURES	SCHEDULES F AND I, PARTS I, LINE 2 A INTRODUCTION 1 PURPOSE THE PURPOSE OF THIS PROCEDURE IS TO ASSIST PRINCIPAL INVESTIGATORS, RESEARCH ADMINISTRATORS AND OFFICE OF SPONSORED PROGRAMS (OSP) STAFF OF COLD SPRING HARBOR LABORATORY IN MONITORING AND OVERSEEING SUBRECIPIENTS, OR COLLABORATING INSTITUTIONS, AND ENSURING THAT THEIR RESEARCH PROJECTS ARE CONDUCTED IN COMPLIANCE WITH APPLICABLE LAWS AND THE TERMS AND CONDITIONS OF BOTH THE PRIME AWARD AND THE SUBAWARD AGREEMENT 2 SCOPE APPLIES WHEN COLD SPRING HARBOR LABORATORY (CSHL) IS THE PRIME INSTITUTION, OR THE DIRECT RECIPIENT OF FUNDING FROM A SPONSOR, AND IS ENTERING INTO OR HAS ALREADY ENTERED INTO A SUBAWARD AGREEMENT WITH A SUBRECIPIENT OR COLLABORATING INSTITUTION B POLICY 1 GENERAL SUBRECIPIENT MONITORING ENCOMPASSES THE FOLLOWING - ADVISING SUBRECIPIENTS OF APPLICABLE FEDERAL LAWS AND REGULATIONS, AND ALL APPROPRIATE FLOW-DOWN PROVISIONS OF THE PRIME AGREEMENT - THE ROUTINE RECEIPT AND REVIEW OF TECHNICAL PERFORMANCE REPORTS - THE ROUTINE REVIEW OF EXPENSES-TO-BUDGET - THE PERIODIC PERFORMANCE OF ON-SITE VISITS, OR REGULAR CONTACT, IF NECESSARY - THE OPTION TO PERFORM "AUDITS" IF NECESSARY - REVIEW OF A-133 AUDIT REPORTS FILED BY SUBRECIPIENTS AND ANY AUDIT FINDINGS - REVIEW OF CORRECTIVE ACTIONS CITED BY SUBRECIPIENTS IN RESPONSE TO THEIR AUDIT FINDINGS CONSIDERATION OF SANCTIONS ON SUBRECIPIENTS IN CASES OF CONTINUED INABILITY OR UNWILLINGNESS TO HAVE REQUIRED AUDITS OR TO CORRECT NON-COMPLIANT ACTIONS - CSHL ALSO REQUESTS THAT SUBRECIPIENTS ANNUALLY PROVIDE UPDATED EVIDENCE OF COMPLIANCE WITH SPECIAL MANDATED REQUIREMENTS, SUCH AS ASSURANCES RELATED TO LAB ANIMALS, HUMAN SUBJECTS AND BIOHAZARDS, FOR EXAMPLE 2 RESPONSIBILITIES OSP IS RESPONSIBLE FOR PREPARING AND EXECUTING SUBAWARD AGREEMENTS, REQUESTING AND OBTAINING ASSURANCES, REVIEWING INVOICES, ASCERTAINING COMPLIANCE WITH AGREEMENTS, REGULATIONS AND AUDIT REQUIREMENTS AND TAKING CORRECTIVE ACTIONS, AS NECESSARY TERMS AND CONDITIONS - REVIEW AND EVALUATE THE SUBRECIPIENT'S PROGRESS THROUGH TECHNICAL PROGRESS REPORTS AND OTHER PERIODIC COMMUNICATIONS, AS APPROPRIATE ASSESS THE SUBRECIPIENT'S CONTRIBUTION TO OVERALL PROJECT AIMS - REVIEW, QUESTION AS NECESSARY AND APPROVE THE COSTS CHARGED BY SUBRECIPIENTS FOR THE WORK PERFORMED UNDER THE SUBAWARD EXPENSES CHARGED ON INVOICES SHOULD BE CONSISTENT WITH THE ESTABLISHED SCOPE OF WORK OSP ADMINISTRATOR (POST AWARD SENIOR GRANTS MANAGER AND ACCOUNTING ASSISTANT) - MONITOR WITH THE ASSISTANCE OF PLS, SUBRECIPIENTS TO ENSURE COMPLIANCE WITH FEDERAL REGULATIONS AND BOTH PRIME AND SUBRECIPIENT AWARD TERMS AND CONDITIONS - THROUGH THE USE OF STANDARD SUBRECIPIENT AGREEMENTS, ENSURE ALL AGREEMENTS INCLUDE THE CFDA TITLE AND NUMBER, AWARD NAME AND NUMBER, AWARD YEAR FOR FEDERAL AWARDS, ADVISE SUBRECIPIENTS OF REQUIREMENTS IMPOSED ON THEM BY FEDERAL LAWS, REGULATIONS AND THE PROVISIONS OF CONTRACTS OR GRANT AGREEMENTS, AS WELL AS SUPPLEMENTAL REQUIREMENTS, INCLUDE PRIME AWARD AS PART OF AGREEMENT, REQUIRE SUBRECIPIENT TO CERTIFY INVOICES AND REQUIRE SUBRECIPIENT TO REPORT PROMPTLY TO CSHL ANY ADVERSE FINDINGS RELATED TO CSHL SUBAWARDS IDENTIFIED IN THEIR ANNUAL A-133 AUDITS - ACTIVELY ENGAGE AND RECEIVE CONSULTATION FROM THE CSHL OFFICE OF TECHNOLOGY TRANSFER REGARDING INTELLECTUAL PROPERTY ISSUES AS NEEDED - AT THE SIGNING OF THE SUBAWARD AGREEMENT AND ANNUALLY THEREAFTER REQUEST SUBRECIPIENT PROVIDE UPDATED ASSURANCES RELATED TO LAB ANIMALS AND HUMAN STUDIES, AS NECESSARY - ON AN ONGOING BASIS MONITOR THE INVOICES OF SUBRECIPIENTS - PERIODICALLY COMPARE CUMULATIVE COSTS TO PREVIOUSLY ESTABLISHED BUDGETS AND ENSURE THAT EXPENSES INVOICED ARE FOR THE APPROPRIATE BUDGET PERIOD - MAKE SURE THAT INVOICED COSTS ARE NOT IN EXCESS OF BUDGETED AMOUNTS AND ARE NOT DUPLICATES OF PREVIOUSLY INVOICED COSTS - UPON REVIEW OF INVOICE, FORWARD TO PRINCIPAL INVESTIGATOR FOR FURTHER REVIEW AND ACCEPTANCE - AT LEAST ANNUALLY, REQUEST EVIDENCE THAT SUBRECIPIENTS EXPENDING \$500,000 OR MORE IN AWARDS DURING THEIR FISCAL YEAR HAVE MET A-133 AUDIT REQUIREMENTS FOR THAT FISCAL YEAR IDENTIFY ANY MATERIAL WEAKNESSES OR REPORTABLE CONDITIONS THAT RESULT FROM THE A-133 AUDIT OF NONCOMPLIANCE OR REPORTED FINDINGS TO DETERMINE WHETHER ADJUSTMENTS ARE NEEDED TO CSHL'S RECORDS - FOR SUBRECIPIENTS THAT HAVE REPORTED MATERIAL WEAKNESSES OR REPORTABLE CONDITIONS FROM THE A-133 AUDIT, FOLLOW UP TO MAKE SURE THAT SUBRECIPIENT TAKES APPROPRIATE AND TIMELY CORRECTIVE ACTION - AT CLOSEOUT OF THE SUBAWARD ENSURE THAT THE FINAL INVOICE HAS BEEN RECEIVED AND REVIEWED

Return Reference	Explanation
OTHER INFORMATION	BOARD RELATIONSHIPS MR GUTHART IS THE FOUNDER AND CEO OF TOPSPIN PARTNERS, A FUND WHICH INVESTS IN BUSINESSES WHICH HAVE THEIR BASIS IN PROVEN SCIENTIFIC RESEARCH TOPSPIN HAS SUPPORTED AND CONTINUES TO SUPPORT THE FOUNDING OF SEVERAL START-UP BIOTECH COMPANIES IN CONJUNCTION WITH CSHL SCIENTISTS

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
COLD SPRING HARBOR LABORATORY

Employer identification number
11-2013303

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on 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" on 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
(1) ROBERTSON RESEARCH FUND INC PO BOX 100 COLD SPRING HARBOR NEW YORK, NY 11724 23-7224244	SUPPORT	DE	501(C)(3)	11	NA		No
(2) COLD SPRING HARBOR LABORATORY ASSN PO BOX 100 COLD SPRING HARBOR, NY 11724 11-1631792	SUPPORT	NY	501(C)(3)	11	NA		No

Part III

Identification of Related Organizations Taxable as a Partnership

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

(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) Dispropportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(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) COLD SPRING HARBOR ASIA (SIP) LTD 218 XIN HU ST SUZHOU, CHINA 215125 CH 99-9999999	SCIENTIFIC CO	CH	NA	C CORP	2,694,538	1,026,298	100 000 %	Yes	
(2) CHARITABLE REMAINDER TRUST (2)	INVESTMENT	NY	CSHL						
(3) SAMUEL D AND ANN BPARKINSON UNITRUST PO BOX 100 COLD SPRING HARBOR, NY 11724	INVESTMENT	MA	CSHL	TRUST			100 000 %		No

Part V

Transactions With Related Organizations

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

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

No

No

Yes

Yes

No

No

No

No

No

No

No

Yes

Yes

Yes

Yes

No

Yes

Yes

Yes

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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) COLD SPRING HARBOUR LABORATORY ASIA (SIP) LTD	D	177,006	CASH BASIS

Schedule R (Form 990) 2013

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

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

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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