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DLN: 93493134073186

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

 \blacktriangleright Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	r the	2014 ca	lendar year, or tax year beginnir	ng 07-01-2014 , and ending 06-30-2	2015			
B Ch	eck ıf a	pplicable	C Name of organization Cornell University			D Emple	oyer ider	ntification number
☐ Ad	dress cl	hange	,			15-0	532082	2
Г№	me cha	inge	% UNIVERSITY CONTROLLER Doing business as					
┌ Ini	tial retu	ım						
Fir	al			mail is not delivered to street address) Roon	n/suite	E Telepr	one num	ber
☐ ret	urn/ter	mınated	341 PINE TREE ROAD			(607) 255-3	790
☐ Am	ended	return		intry, and ZIP or foreign postal code				
Гар	plicatioi	n pending	ITHACA, NY 14850			G Gross	receipts \$	10,721,163,381
			F Name and address of pr	ncıpal officer	H(a)	Is this a group	n return	for
			MICHAEL L KOTLIKOFFAC	TPRES		subordinates?		┌ Yes 🗸 No
			341 PINE TREE ROAD ITHACA, NY 14850		ши			
			·			Are all subord included?	inates	□ Yes □ No
I Ta	x-exen	npt status	▼ 501(c)(3)	(insert no)		If "No," attacl	h a list	(see instructions)
	ebsite	e: ► W\	WW CORNELL EDU		11/->	Group exemp	tion nur	nhar 🌬
					H(c)			
			Corporation Trust Associati	on Other 🗠	L Ye	ar of formation 1	865 M	State of legal domicile NY
Pa	rt I	Sun	nmary					
		,		on or most significant activities	DVICEC			
a 1		EDUCA	TION, RESEARCH, MEDICAL S	ERVICES AND OTHER PUBLIC SE	RVICES			
Ě								
Ē								
Governance	2	Check t	his box 🔭 if the organization d	iscontinued its operations or dispos	ed of more	than 25% of its	s net as	sets
	_	Niconahaan		aing hady (Dawt)/I line 1a)			ایا	6.4
න් ග්	1			ning body (Part VI, line 1a)			3 4	56
Activities &	1			of the governing body (Part VI, line			5	
#	1			calendar year 2014 (Part V, line 2a			6	39,218
ď	1			necessary)			7a	8,818 9,653,166
	1			from Form 990-T, line 34			7a 7b	9,053,100
	"	ivet uiii	stated business taxable income	10111 01111 330 1, IIIIe 34		Prior Year	<u> 76 </u>	Current Year
	۵	Contr	ibutions and grants (Part VIII, I	une 1 h)		842,647	482	584,510,026
₽	9			3,091,992		3,339,680,440		
Revenue	10	_	tment income (Part VIII, line 2g)				,319	420,205,412
æ	11							6,972,137
	12			, line	17,890,972			
				<u> </u>		4,368,738	,915	4,351,368,015
	13	Grant	s and sımılar amounts paıd (Par	t IX, column (A), lines 1-3)	·	452,582	,733	462,661,107
	14			IX, column (A), line 4)			0	0
ø	15	Salar 5-10		ee benefits (Part IX, column (A), line	es	2,137,135	,595	2,319,435,787
Expenses	16a		•	, column (A), line 11e)		604,755		358,791
<u>ক</u>			undraising expenses (Part IX, column (I		`		,, 55	330,731
五	Ь	TOTALL	undraising expenses (Part IX, column (I	5), line 25)	-			
	17			lines 11a-11d, 11f-24e)		1,099,586		1,169,479,188
	18			ust equal Part IX, column (A), line 2!	•	3,689,909		3,951,934,873
	19	Revei	nue less expenses Subtract line	18 from line 12		678,829		399,433,142
\$ 5 \$ 0	1				Beg	inning of Curre Year	ent	End of Year
Not Assets or Fund Balances	20	Total	assets (Part X. line 16)		. —	12,498,894	.139	12,669,538,763
A B	21					3,274,322		3,278,677,385
25	22			: line 21 from line 20		9,224,571		9,390,861,378
Pa	ŧΠ		nature Block			, ,		, , , , , , , , , , , , , , , , , , ,
Unde my k	r pena nowle	alties of dge and		amined this return, including accommplete Declaration of preparer (other				
		Tk.				2016 05 12		
Sigr	,	Sign	ature of officer			2016-05-13 Date		
Her], -	NNE M DESTEFANO AVP TAX & FINANCI	AI INITIATIVES				
			e or print name and title					
-			Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN	443
Pai	d		Barbara E Hunt Firm's name FRNST & YOUNG US	Barbara E Hunt		self-employed	P00916	443
	pare		i iiiii s iiaiiie → F EKNSI & YUUNG US I	TL		Firm's EIN 🟲		
	On		Firm's address 🟲 200 CLARENDON STR	EET		Phone no (61	7) 266-20	000
•		•	BOSTON, MA 021165	172		Ī		

Form	90 (2014)	age 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u>.</u> v
1	Briefly describe the organization's mission	
SEE	CHEDULE O	
2	old the organization undertake any significant program services during the year which were not listed on he prior Form 990 or 990-EZ?	,
	f "Yes," describe these new services on Schedule O	
3	Old the organization cease conducting, or make significant changes in how it conducts, any program ervices?)
	f "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, he total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 1,236,671,000 including grants of \$ 396,138,531) (Revenue \$ 963,772,476)	
	THE UNIVERSITY IS RENOWNED FOR ITS UNDERGRADUATE, GRADUATE, PROFESSIONAL, POST-DOCTORAL, AND CONTINUING EDUCATION PROGRAMS THE PRIMARY CAMPUSES ARE IN ITHACA, NEW YORK AND WEILL-CORNELL MEDICAL COLLEGE LOCATED IN NEW YORK CITY THE UNIVERSITY ALSO HAS A SIGNIF INTERNATIONAL PRESENCE IN EDUCATION AND IS NOTED FOR ITS MEDICAL COLLEGE IN QATAR DURING THE FISCAL YEAR, THE UNIVERSITY GRANTED THE FOLLOWING ACADEMIC DEGREES UNDERGRADUATE (3,674), MASTERS (2,502), PHD (555), JD, MD, DVM (374)	
	(Code) (Expenses \$ 938,350,000 including grants of \$ 0) (Revenue \$ 927,579,243)	
	MEDICAL SERVICES, INCLUDING THE EDUCATION AND TRAINING OF PHYSICIANS, IS A MAJOR COMPONENT OF THE UNIVERSITY'S MISSION THE PHYSICIAN ORGANIZATION IS AN INTEGRAL PART OF THE MEDICAL SCHOOL AND THE UNIVERSITY IT PROVIDES THE PATIENT BASE ESSENTIAL FOR TEACHING, RESEAR AND CLINICAL SERVICES	CH,
4c	(Code) (Expenses \$ 568,510,000 including grants of \$ 66,522,576) (Revenue \$ 594,767,832)	
	RESEARCH, BOTH BASIC AND APPLIED, IS ALSO A CORE MISSION-RELATED ACTIVITY REVENUES FROM SPONSORED AWARDS INCLUDE \$461 MILLION IN DIR SUPPORT AND \$133 MILLION IN INDIRECT COST RECOVERIES ALTHOUGH THE REVENUES INCLUDE GRANT AND CONTRACT REVENUE FOR PUBLIC OUTREAC INSTRUCTION, THE SINGLE LARGEST PORTION IS RESEARCH RELATED	
	Other program services (Describe in Schedule O)	
	(Expenses \$ 785,242,535 including grants of \$ 0) (Revenue \$ 1,503,230,000)	
4e	Total program service expenses ► 3,528,773,535	

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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	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			
а	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	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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 $X^{f G}$	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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t 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 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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? If "Yes," complete Schedule L, Part II	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	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? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2014)

ГС	Check if Schedule O contains a response or note to any line in this Part V			_
	Check it Schedule O contains a response of note to any line in this Part V		Yes	No No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 36,320			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	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 AS, FR, HK, IT, LU, NP, QA, UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		
	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
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	.	V	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b	Yes	
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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	Yes	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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	1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		
			_	

Form 990 (2014) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

	<u> </u>		Yes	No			
1 a	Enter the number of voting members of the governing body at the end of the tax 1a						
	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	Yes				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo			
6	Did the organization have members or stockholders?	6		Νo			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	b Each committee with authority to act on behalf of the governing body?						
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9							
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	Revenu	ue Cod Yes	e.) No			
	Did the organization have local chapters, branches, or affiliates?	10a		_			
10a				No			
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No			
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No			
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No			
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes	No No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No			
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No			
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes	No No			
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No			
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No			
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No			

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA
- 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)
- 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
- State the name, address, and telephone number of the person who possesses the organization's books and records ►UNIVERSITY CONTROLLER

341 PINE TREE ROAD

ITHACA, NY 148502820 (607) 255-3581

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	۰			
c	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	►	30,592,982	0	1,828,844
					L

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶3,950

	_		Yes	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	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? If "Yes," complete Schedule I for such person	5		N o

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
LeChase Constructions Services LLC, 205 Indigo Creek Dr Rochester, NY 14626	Construction	9,496,477
Sedgwick Business Interiors LLC, 100 W Court St Syracuse, NY 13204	Business Equipment	4,042,543
Production Glue LLC, 341 W 38th St Fl 14 New York, NY 10018	TECH CONSULTANT	3,246,112
Skidmore Owings Merrill LLP, 14 Wall St New York, NY 10005	Legal	3,237,050
FCRC CU Tech Development LLC, 1 Metrotech Center Brooklyn, NY 11201	Construction	2,478,048
2 Total number of independent contractors (including but not limited to the	ose listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶81

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Contributions, Gifts, Grants and Other Similar Amounts	ŀ
	2: L :
Program Service Revenue	ŀ
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/ III	Statement o	o f Revenue ule O contains a respor	ase or note to any li	ne in this Part VIII			.
			ise of flote to ally fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
Ь	Membership du	es 1b	1,309,208				
С	Fundraising eve	ents 1c	2,990,601				
d	Related organiz	zations 1d	17,435,001				
e	Government grants	s (contributions) 1e	28,279,018				
f	All other contribution	ons, gifts, grants, and 1f ot included above	534,496,198				
g	Noncash contribution	ons included in lines	6,735,620				
h	Total. Add lines	s 1a-1f		584,510,026			
			Business Code				
2a	EDUCATION TUIT	ION	900099	963,722,476	963,722,476	0	0
Ь	GRANTS & CONTRA	ACTS FOR RESEARCH	900099	606,158,676	606,158,676	0	0
C	MEDICAL SERVICES		900099	927,579,243	927,579,243	0	0
d	LAND GRANT MISS		900099	148,711,545	148,711,545	0	0
e	AUXILLIARY ENTER BOARD		900099	157,522,450	157,522,450	0	0
f	All other progra	am service revenue		535,986,050	533,880,353	1,537,724	567,973
g	Total. Add lines		<u> ► .</u>	3,339,680,440			
3	Investment inc	ome (including dividen ar amounts)		118,196,984		7,837,629	110,359,355
4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0	0		
5	Royalties		•	0			
	C	(ı) Real 4,350,004	(II) Personal				
6a b	Gross rents Less rental	4,705,797					
°	expenses Rental income	-355,793	0				
d	or (loss)	me or (loss)		-355,793			-355,793
"	Net rental med	(ı) Securities	(II) O ther	,			,
7a	Gross amount from sales of assets other than inventory	6,649,340,296					
b	Less cost or other basis and sales expenses	6,347,331,868					
С	Gain or (loss)	302,008,428					
d	Net gain or (los	s)		302,008,428			302,008,428
8a	Gross income f events (not inc \$ 2,990 of contributions See Part IV, lin	luding ,601 s reported on line 1c)					
	,	а	397,724				
ь		penses b	1,507,416				
C		(loss) from fundraising	events ▶	-1,109,692			-1,109,692
9a	See Part IV, lin	rom gaming activities ie 19					
ь	Less direct ex	penses b					
c	Net income or ((loss) from gamıng actı	vities	0			
10a	Gross sales of returns and allo		24,687,907				
ь	Less cost of g	oods sold b	16,250,285				
С		(loss) from sales of inv		8,437,622		277,813	8,159,809
	Miscellaneous	s Revenue	Business Code				
11a							
b							
ر ر	All other rawa						
d e	All other reven		▶				
12		See Instructions .		0			
1				4,351,368,015	3,337,574,743	9,653,166	419,630,080

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))
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	Check if Schedule O contains a response or note to any line in this	l other organizat Part IX			
	ot include amounts reported on lines 6b, b, 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 domestic organizations and domestic governments See Part IV, line 21	66,522,576	66,522,576		
2	Grants and other assistance to domestic individuals See Part IV, line 22	383,334,580	383,334,580		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	12,803,951	12,803,951		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	10,545,820	1,054,582	5,272,910	4,218,328
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	0	0	0
7	Other salaries and wages	1,790,945,935	1,552,392,389	198,055,829	40,497,717
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	68,824,462	52,705,774	13,400,123	2,718,565
9	Other employee benefits	369,601,294	321,553,126	40,656,142	7,392,026
10	Payroll taxes	79,518,276	69,180,900	8,747,010	1,590,366
11	Fees for services (non-employees)				
а	Management	0	0	0	0
b	Legal	10,201,324	9,079,178	1,122,146	0
c	Accounting	2,190,249	2,190,249	0	0
d	Lobbying	230,000		0	230,000
е	Professional fundraising services See Part IV, line 17	358,791			358,791
f	Investment management fees	15,551,114	15,551,114	0	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	178,485,979	155,282,801	19,633,459	3,569,719
12	Advertising and promotion	0	0	0	0
13	Office expenses	25,410,258	22,106,924	2,795,129	508,205
14	Information technology	32,772,107	28,511,733	3,604,932	655,442
15	Royalties	3,043,750	3,043,750	0	0
16	Occupancy	116,743,582	101,566,917	12,841,794	2,334,871
17	Travel	41,270,141	31,778,008	6,190,522	3,301,611
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	+	0
19	Conferences, conventions, and meetings	21,700,432	18,879,376	2,387,048	434,008
20	Interest	88,684,828	88,684,828	0	0
21	Payments to affiliates	0	0		0
22	Depreciation, depletion, and amortization	257,845,200	229,482,228	28,362,972	0
23 24	Insurance	39,140,524	37,496,622	1,409,058	234,844
а	MAINTENANCE	42,154,573	37,517,570	4,637,003	0
b	SPONSORED RSRCH SUBCNTRCT	58,624,964	58,624,964	0	0
c	OTHER SUPPLIES	67,281,656	67,281,656	0	0
d	STUDENT AND CAMPUS SERVICES	52,349,974	51,826,474	523,500	0
e	All other expenses	115,798,533	110,321,265	· · ·	
25	Total functional expenses. Add lines 1 through 24e	3,951,934,873	3,528,773,535		68,044,493
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)	0			

Part X Balance Sheet

Ρđ	L X	Check if Schedule O contains a response or note to any li	ne in this Part	х			· · · ·
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	48,267,172	1	74,001,117		
	2	Savings and temporary cash investments	89,408,150	2	56,168,071		
	3	Pledges and grants receivable, net		1,093,569,361	3	1,079,560,184	
	4	Accounts receivable, net			440,843,005	4	418,610,244
	5	Loans and other receivables from current and former office key employees, and highest compensated employees. Co Schedule L	of	0	5	0	
Assets	6	Loans and other receivables from other disqualified perso section 4958(f)(1)), persons described in section 4958(c employers and sponsoring organizations of section 501(c employees' beneficiary organizations (see instructions) C Schedule L	ontributing				
88	l _			0	6	0	
⋖	7	Notes and loans receivable, net			72,803,135		76,986,970
	8	Inventories for sale or use			9,483,323	8	9,672,998
	9	Prepaid expenses and deferred charges		•	34,825,600	9	80,255,959
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 6	,624,787,505			
	b	Less accumulated depreciation	10b 2	,847,675,363	3,701,556,788	10c	3,777,112,142
	11	Investments—publicly traded securities	1,740,299,000	11	1,878,027,000		
	12	Investments—other securities See Part IV, line 11 .		5,104,567,745	12	5,051,670,500	
	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			163,270,860	15	167,473,578
	16	Total assets. Add lines 1 through 15 (must equal line 34)			12,498,894,139	16	12,669,538,763
	17	Accounts payable and accrued expenses			558,204,114	17	589,901,403
	18	Grants payable		52,275,390	18	52,991,478	
	19	Deferred revenue	•	282,470,402	19	234,008,152	
	20	Tax-exempt bond liabilities		1,243,095,000	20	1,200,475,000	
ø.	21	Escrow or custodial account liability Complete Part IV of	0	21	0		
Liabilities	22	Loans and other payables to current and former officers, of key employees, highest compensated employees, and dis	ees,				
qе		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third p	parties		322,770,323	23	337,928,790
	24	Unsecured notes and loans payable to unrelated third par	ties		0	24	0
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24) Comple					
		D			815,507,515	25	863,372,562
	26	Total liabilities. Add lines 17 through 25			3,274,322,744	26	3,278,677,385
s es		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.	e ► ✓ and co	mplete			
au	27	Unrestricted net assets			3,083,285,330	27	3,035,585,863
Fund Balance	28	Temporarily restricted net assets		3,406,995,894	28	3,421,937,658	
돧	29	Permanently restricted net assets		2,734,290,171	29	2,933,337,857	
臣		Organizations that do not follow SFAS 117 (ASC 958), ch	eck here 🕨 🦵	and			
ō		complete lines 30 through 34.					
Ş	30	Capital stock or trust principal, or current funds		30			
Assets	31	Paid-in or capital surplus, or land, building or equipment f				31	
đ	32	Retained earnings, endowment, accumulated income, or o				32	
Zet	33	Total net assets or fund balances		•	9,224,571,395	33	9,390,861,378
	34	Total liabilities and net assets/fund balances			12,498,894,139	34	12,669,538,763

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4,351,3	368,015
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,951,9	934,873
3	Revenue less expenses Subtract line 2 from line 1	3		399,4	133,142
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,224,5	571,395
5	Net unrealized gains (losses) on investments	5		-157,2	251,559
6	Donated services and use of facilities	6			<u>.</u>
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-75,8	391,600
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		9,390,8	361,378
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı			
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?	9	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: Software Version:

EIN: 15-0532082

Name: Cornell University

Form 990, Part VII - Compensation Compensated Employees, and Inde						-, -	•	. ,	1	1
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor,	ox, ι an o /trus	unless fficer stee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-1413C)	2/1099-1413C)	related organizations
(1) Robert S Harrison Chairman	2 0	х						0	0	0
(1) David D Croll	2 0	х						0	0	0
Vice Chairman (2) Andrew H Tisch	2 0	х						0	0	0
Vice Chairman (3) Jan Rock Zubrow	2 0	X						0	0	0
Chairman of the Exec Comm (4) David J Skorton	0 0 55 0									
President & Ex Officio Trustee (5) Andrew Cuomo	0 0	Х		Х				1,507,860	0	136,468
Ex Officio Trustee	0 0	х						0	0	0
(6) Carl E Heastie Ex Officio Trustee (from 2/3)	2 0	×						0	0	0
(7) Sheldon Silver	2 0	х						0	0	0
Ex Officio Trustee (thru 2/2) (8) John J Flanagan	2 0	×						0	0	0
Ex Officio Trustee (9) Barbara A Baird	0 0 55 0									
Trustee/Prof of Chemistry (10) Richard A Baker	0 0	X						246,566	0	46,228
Trustee	0 0	Х						0	0	0
(11) Matthew L Biben Trustee	2 0	х						0	0	0
(12) Jessica M Bibliowicz Trustee	2 0	×						0	0	0
(13) Rıchard L Booth	2 0	х						0	0	0
Trustee (14) Douglas L Braunstein	2 0	×						0	0	0
Trustee (15) Mario Cilento	0 0							0	0	0
Trustee (16) Ezra Cornell	0 0	X						0	0	
Trustee (17) Gary S Davis	0 0	Х						0	0	0
Trustee	0 0	х						0	0	0
(18) Nicole B DelToro Trustee	2 0	×						0	0	0
(19) Elizabeth C Everett	2 0	х						0	0	0
Trustee (20) David R Fischell	2 0	X						0	0	0
Trustee (21) Gregory J Galvın	0 0									
Trustee (22) Ross H Gitlin	0 0	X						0	0	0
Trustee	0 0	Х						0	0	0
(23) Rana Glasgal Trustee	2 0	х						0	0	0
(24) Patricia E Harris	2 0	х						0	0	0
Trustee	0 0	L			<u> </u>					l

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-1413C)	2/1099-14130)	related organizations		
(26) Kraig H Kayser	2 0	x						0	0	0		
Trustee (1) Ruben J Kıng-Shaw Jr	0 0						_					
Trustee	0 0	x						0	0	0		
(2) Peggy J Koenig	2 0	<u> </u>										
Trustee	0 0	Х						0	0	0		
(3) Robert S Langer Jr	2 0	X						0	0	0		
Trustee (4) Linda R Macaulay	0 0											
Trustee	0 0	x						0	0	0		
(5) Lowell C McAdam	2 0											
Trustee	0 0	Х						0	0	0		
(6) William H McAleer	2 0	x						0	0	0		
Trustee (7) Ronald D McCray	0 0											
Trustee	0 0	x						0	0	0		
(8) John F Megrue Jr	2 0											
Trustee	0 0	Х						0	0	0		
(9) Howard P Milstein	2 0	l x						0	0	0		
Trustee (10) Alan L Mittman	0 0 55 0											
Trustee/Dir Workforce Policy	0 0	х						133,556	0	36,322		
(11) John A Noble	2 0	.,										
Trustee	0 0	X						0	0	0		
(12) Barbara Goldman Novick	2 0	x						0	0	0		
Trustee (13) Peter J Nolan	0 0									_		
Trustee	0 0	х						0	0	0		
(14) Annie D O'Toole	2 0											
Trustee	0 0	X						0	0	0		
(15) Lubna Suliman Olayan	2 0	x						0	0	0		
Trustee (16) Armando J Olivera	0 0											
Trustee	0 0	X						0	0	0		
(17) Donald C Opatrny	2 0	x						0	0	0		
Trustee	0 0							Ů	Ů	Ů		
(18) William D Perez	2 0	x						0	0	0		
Trustee (19) Leland C Pillsbury	2 0											
Trustee	0 0	X						0	0	0		
(20) Bruce S Raynor	2 0	x						0	0	0		
Trustee	0 0	,						, i				
(21) Gene D Resnick	2 0	х						0	0	0		
Trustee (22) Susan T Rodriguez	2 0											
Trustee	0 0	Х						0	0	0		
(23) Meredith A Rosenberg	2 0	x						0	0	0		
Trustee	0 0							<u> </u>				
(24) Paul Salvatore	2 0	×						0	0	0		
Trustee	0 0	<u> </u>		<u> </u>		<u> </u>	L	l		<u> </u>		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the						
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations		
(51) Martın F Sheınman	2 0	×						0	0	0		
Trustee (1) Dalia P Stiller	0 0											
Trustee	0 0	x						0	0	0		
(2) Chiaki Tanuma	2 0	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \										
Trustee	0 0	Х						0	0	0		
(3) Ratan N Tata	2 0	x						0	0	0		
Trustee (4) Lisa Skeete Tatum	0 0											
Trustee	0 0	X						0	0	0		
(5) Michael A Troy	2 0	x						0	0	0		
Trustee	0 0	^						Ŭ				
(6) Sheryl Hilliard Tucker	2 0	x						0	0	0		
Trustee (7) M Eileen McManus Walker	2 0											
Trustee	0 0	X						0	0	0		
(8) Padmasree Y Warnor	2 0	x						0	0	0		
Trustee (9) Laura A Wilkinson	0 0											
Trustee	0 0	X						0	0	0		
(10) Mariana F Wolfner	55 0	×						184,122	0	35,124		
Trustee/Prof Molecular Bio	0 0							101,122		33,121		
(11) Craig Yunker Trustee	0 0	x						0	0	0		
(12) Michael J Zak	2 0	.,										
Trustee	0 0	X						0	0	0		
(13) Karen P Zımmer	2 0	x						0	0	0		
Trustee (14) Barton J Winokur	0 0											
Trustee	0 0	X						0	0	0		
(15) Joanne M DeStefano	55 0			х				497,514	0	54,520		
VP of Finance & CFO (16) W Kent Fuchs	0 0 55 0							137,311		31,323		
Provost (through 11/14)	0 0			х				652,820	0	58,267		
(17) Harry Katz	55 0									70.455		
Interim Provost (from 11/14)	0 0			Х				413,284	0	72,455		
(18) Laurie H Glimcher	55 0			х				1,505,476	0	58,246		
Dean and Provost Med Affrs (19) James J Mingle	0 0 55 0											
Univ Counsel & Secretary	0 0			Х				493,091	0	50,001		
(20) Albert J Edwards	55 0				х			1,072,200	0	49,476		
Chief Investment Officer (21) Daniel Knowles MD	0 0 55 0				ļ ^			1,072,200		13,170		
Chair & Professor of Pathology	0 0				x			1,883,539	0	80,447		
(22) Robert A Buhrman	55 0											
Sr VP for Research	0 0				Х			387,602	0	41,255		
(23) Stephen M Cohen	55 0				Х			947,235	0	81,088		
Executive Vice Provost (24) Zev Rosenwaks MD	0 0 55 0											
Director Cohen Cntr Rprdc Med	0 0					x		5,597,323	0	70,101		
· · · · · · · · · · · · · · · · · · ·							•	•		·		

(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (dinan o nan o n is b dire	ne b oth ctor/	ox, u an of trus	nless ficer tee)		(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 below dotted line)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated	Former			organizations
(76) Hey-Joo Kang MD Prof Obs Gyn & Reproduct Med	55 0 0 0					х		3,520,199	0	47,899
(1) Steven D Spandorfer MD	55 0									
Prof Obs Gyn & Reproduct Med	0 0					х		3,453,821	0	72,481
(2) Theodore Schwartz MD Prof of Neurological Surgery	55 0 0 0					х		3,393,114	0	60,431
(3) Pak H Chung MD Prof Obs Gyn & Reproduct Med	55 0 0 0					х		3,357,389	0	68,766
(4) Rosemary J Avery Fmr Trustee/Chair Dept Mgmt	55 0 0 0						Х	307,476	0	51,398
(5) Beth McKinney Fmr Trustee/Dir Wellness Prgm	55 0 0 0						х	82,438	0	27,570
(6) Anthony Gotto MD	55 0						Х	774,098	0	591,547
Fmr Ofcr/Dean of WMC/Provost (7) Nelson G Hairston	55 0		-							
Fmr Trustee/Prof Envmm Sci	0 0						Х	182,259	0	38,754

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As Filed Data -

DLN: 93493134073186

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.

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

OMB No 1545-0047

Open to Public Inspection

	Name of the organization Cornell University						Employer identification number			
Come	ii Oliive	isity					15-0532082			
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	omplete this part.) See instructions.				
			foundation because it is (For lines 1 through 11, check only one box)							
1		A church, convention	of churches, o	r association of churc	hes described i	n section 170(o)(1)(A)(i).			
2	<u> </u>	A school described in				•	,,,,,,,			
3	Ė	A hospital or a cooper			· ·	tion 170(b)(1)	(A)(iii).			
4	Ë	A medical research or	ganızatıon ope	_). Enter the		
_	_	hospital's name, city,		C. C. II						
5	ı	An organization opera			versity owned o	or operated by a	a governmentai unit d	escribed in		
 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 										
6	<u> </u>									
7		An organization that n described in section 1				om a governme	ental unit or from the o	jeneral public		
8	\vdash	A community trust de				tII)				
9	Γ	An organization that n	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross		
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions, a	ind (2) no more than 3	331/3% of		
		its support from gross	investment ir	ncome and unrelated b	usiness taxable	e income (less	section 511 tax) from	n businesses		
		acquired by the organ								
10	Г	An organization organ								
11	Ė	-	anized 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g								
а	Γ									
	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.						supporting			
L	_	Type II. A supporting				with its suppo	rtad arganization(s)	ay haying control or		
Ь	,	management of the su	_	•		• •	• • • • • • • • • • • • • • • • • • • •	•		
		must complete Part I			same persons e	nac control of t	nanage the supported	organization(5) Iou		
C	\vdash	Type III functionally			n operated in c	onnection with,	and functionally inte	grated with, its		
	_	supported organizatio								
d	ı	Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is								
		not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V.								
e	\vdash	Check this box if the					saTvnel Tvnell T	vne III functionally		
_	'	integrated, or Type II					5 a 1, pc 1, 1, pc 11, 1	, pe III lanctionally		
f		Enter the number of s								
g		Provide the following i	nformation ab	out the supported orga	nızatıon(s)					
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of		
		organızatıon		organization	listed in your	governing	monetary support	other support (see		
			(described on lines	docume	nt?	(see instructions)	ınstructions)			
				1-9 above or IRC						
				section (see instructions))						
				mscractions))	Yes	No				
										

Page 2

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) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total

_ <u>_S</u>	ection A. Public Support							
	endar year (or fiscal year beginning in) 🏲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	384,515,00	0 672,276,000	478,613,388	842,647,482	584,	510,026	2,962,561,896
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	42,200,66	1 41,188,766	41,084,578	40,454,003	40,9	937,796	205,865,804
4	Total. Add lines 1 through 3	426,715,66	1 713,464,766	519,697,966	883,101,485	625,	447,822	3,168,427,700
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included					·		42,556,995
	on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							3,125,870,705
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20:	14	(f) Total
7	A mounts from line 4	426,715,661	713,464,766	519,697,966	883,101,485	625,4	147,822	3,168,427,700
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	117,791,887	109,437,360	76,233,294	127,377,264	142,8	382,768	573,722,573
9	similar sources Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							0
11	Total support Add lines 7 through 10							3,742,150,273
12	Gross receipts from related activi	ties, etc (see ins	structions)			12	1	4,000,281,134
13	First five years. If the Form 990 i organization, check this box and s	top here	<u> </u>					
	ection C. Computation of Pu							
14	Public support percentage for 201			11, column (f))		14		83 531 %
15	Public support percentage for 201	.3 Schedule A, P	art II, line 14			15		85 020 %
16a	33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box							
b	and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2013. 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—2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the orga Explain in Part VI how the organiz	anızatıon meets t	he "facts-and-circ	umstances" test,	check this box a	nd stop h e	ere.	·
18	supported organization Private foundation. If the organizations				-			'' ▶□
								•

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	За		
	b Did the organization evergice a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 Amounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	anızatıons		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493134073186

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

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

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Cornell University 15-0532082 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ┌ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legislative body (direct lobbying)					
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?					
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

		rganization is exempt under section 501(c)(3) and has	NOT		Page 3
For a		election under section 501(h)). gh 1: below, provide in Part IV a detailed description of the lobbying	(ã	1)	(b)
activ	· · · · · · · · · · · · · · · · · · ·	gn II below, provide in Part IV a detailed description of the lobbying	Yes	No	Amount
1		anization attempt to influence foreign, national, state or local t to influence public opinion on a legislative matter or referendum,			
а	Volunteers?		No		
b	Paid staff or management (includ	Yes			
c	Media advertisements?	and the model of 2		No	0
d e	Mailings to members, legislators Publications, or published or bro			No No	0
f	Grants to other organizations for			No	0
g		heir staffs, government officials, or a legislative body?	Yes		438,000
h		rs, conventions, speeches, lectures, or any similar means?		Νo	0
i j	Other activities? Total Add lines 1c through 1i		Yes		438,000
2a		the organization to be not described in section $501(c)(3)$?		No	438,000
b		tax incurred under section 4912			
C		tax incurred by organization managers under section 4912	١.		
_		a section 4912 tax, did it file Form 4720 for this year? rganization is exempt under section 501(c)(4), section	F01/6	\/E\	r soction
Pell	501(c)(6).	rganization is exempt under section 501(c)(4), section	301(0)(5), 0	- section
	Mara autantially all (000/ as a	nama) dunan wanan unada dunabibla bu wanan bawa 2		_	Yes No
1 2		nore) dues received nondeductible by members? n-house lobbying expenditures of \$ 2,000 or less?		\vdash	2
3		ry over lobbying and political expenditures from the prior year?			3
Par		rganization is exempt under section 501(c)(4), section			
	501(c)(6) and if e	either (a) BOTH Part III-A, lines 1 and 2, are answered d "Yes."	"No" C	R (b)	Part III-A,
1	Dues, assessments and similar	amounts from members	1		
2	Section 162(e) nondeductible lo expenses for which the section 5	bbying and political expenditures (do not include amounts of political			
а	Current year	227(1) tax was paluj.	2a		
b	Carryover from last year		2b		
	Total	2c			
3 4		ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues unt on line 2c exceeds the amount on line 3, what portion of the excess	3		
•	does the organization agree to ca	arryover to the reasonable estimate of nondeductible lobbying and			
5	political expenditure next year?	political expenditures (see instructions)	5		
	art IV Supplemental Inf				
		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro	up list),	Part II	-A, lines 1 and
2 (e 1 Also, complete this part for any additional information			
	Return Reference	Explanation	CTLVI	I A NIV D	OLITICAL
	EDULE C, PART I-A, LINE 1	THE UNIVERSITY DOES NOT PARTICIPATE DIRECTLY OR INDIRE CAMPAIGN AND REMINDS THE UNIVERSITY COMMUNITY, AT TH LOCAL, STATE OR NATIONAL ELECTION, ABOUT THE PROHIBITI PARTICIPATION THE MESSAGE MAKES CLEAR THAT THIS PROH WAY AFFECT AN INDIVIDUAL'S PERSONAL ACTIVITIES THE UNIT NECESSARY TO ISSUE A FORMAL POLICY ON POLITICAL CAMTHROUGH ITS POLICY OFFICE	E TIME ON AGA IBITION VERSIT PAIGN	OF ANY (INST UNDES Y DOES PROHIE	IMPORTANT INIVERSITY NOT IN ANY S NOT DEEM BITIONS
	EDULE C, PART II-B, LINE 1B	CORNELL'S LOBBYING EFFORTS WERE HANDLED THROUGH THE LOFFICES LOCATED IN ALBANY AND WASHINGTON DC PRIMARIL' LOBBYISTS IN ADDITION, THROUGHOUT THE FISCAL YEAR END CORNELL EMPLOYEES AND STUDENTS LOBBIED IN ALBANY AND LOBBYING EFFORTS CENTERED ON HIGHER EDUCATION MATTER BUDGETS, UNIVERSITY-BASED RESEARCH PROPOSALS, AND LEG CORNELL STUDENTS AND STAFF CORNELL IS A PAYING MEMBER FEDERAL ASSOCIATIONS THAT DO DIRECT LOBBYING AND PUBLOF PUBLIC AND PRIVATE NOT-FOR-PROFIT HIGHER EDUCATION ATHLETICS, AND UNIVERSITY OPERATIONS INCLUDING STUDEN ENERGY, AND FINANCIAL PLANNING THE UNIVERSITY CONTRACTIONS IN NEW YORK CITY TO REPRESENT OUR INTERESTS RELATIONS AND SEFORE THE NEW YORK CITY GOVERNMENT	Y BY FIVING JUNG JUNG JUNG JUNG JUNG JUNG JUNG JU	E REGINE 30, 2 SHINGT FE AND VE BILL /ERALS OCACY RCH, C TH INS ITH A L	STERED 2015, ON D C FEDERAL S AFFECTING STATE AND ON BEHALF COLLEGE GURANCE, OBBYING RNELL TECH
	EDULE C, PART II-B, LINE 1G EDULE C, PART II-B, LINE 1I	CORNELL UNIVERSITY STAFF LOBBIED LEGISLATORS, STAFF AN IN WASHINGTON, ALBANY, NEW YORK CITY, AND ITHACA DURIN JUNE 30, 2015 TOPICS INCLUDED STUDENT HEALTH INSURANG PROCESSES, AGRICULTURE TESTING AND RESEARCH PROGRAMS ENVIRONMENTAL PROTECTION PROGRAMS, FUNDING FOR OPER INCLUDING THE EXPANSION OF CORNELL'S VETERINARY COLLE AGRICULTURAL SCIENCE RESEARCH LAB, STUDENT FINANCIAL TECH CAMPUS LAND USE, USD A FARM BILL, STUDENT LOAN IN DEVELOPMENT PROGRAMS, IMMIGRATION, GRADUATE MEDICAL REFORM, SCIENCE AND TECHNOLOGY INITIATIVES, AND AGENCE IN ADDITION TO MEETING WITH GOVERNMENT OFFICIALS TO A HIGHER EDUCATION IN GENERAL AND UNIVERSITY-BASED RESEPARTICULAR, THE UNIVERSITY IS A MEMBER OF KEY ORGANIZA	G THE F CE, CON S, LABO ATIONS GE FAC AID PRO ITEREST EDUCA Y RE-A DVANC	ISCAL TRACT R LAW S AND F ILITY A D GRAM TRATES ATION, UTHOR E THE I	YEAR ENDING ING TRAINING, ACILITIES, ND AN S, CORNELL S, ECONOMIC PATENT IZATIONS NTERESTS OF TIES IN
		ON BEHALF OF ISSUES AFFECTING HIGHER EDUCATION			

Part IV Supplemental Information (continued)							
Return Reference	Explanation						

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493134073186

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► 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.

Information about Schedule D (Form 900) and the instruct

Open to Public

lame of the organization ornell University		Employer identific	ation number
ones onversity		15-0532082	
	or Advised Funds or Other Similar	Funds or Account	s. Complete if the
organization answered "Yes" to For	m 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and	other accounts
Total number at end of year	(a) Donor advised funds	(b) Fullus allu	other accounts
Aggregate value of contributions to (during year	ır)		
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono	or advisors in writing that the assets held in do	nor advised	
funds are the organization's property, subject t	to the organization's exclusive legal control?		☐ Yes ☐ No
Did the organization inform all grantees, donors used only for charitable purposes and not for the conferring impermissible private benefit?			┌ Yes ┌ No
rt II Conservation Easements. Com	plete if the organization answered "Yes"	to Form 990, Part I	V, line 7.
Purpose(s) of conservation easements held by	the organization (check all that apply)		
Preservation of land for public use (e g , red	<u> </u>	an historically importar	
Protection of natural habitat	Preservation of a	a certified historic stru	cture
Preservation of open space			
Complete lines 2a through 2d if the organization	on held a qualified conservation contribution ir	n the form of a conserva	ation
easement on the last day of the tax year		Hold at the	e End of the Year
Total number of conservation easements		2a	e End of the Year
Total acreage restricted by conservation ease	ments	2b	
Number of conservation easements on a certifi		2c	
Number of conservation easements included in	· •		
historic structure listed in the National Registe		2d	
Number of conservation easements modified, t	ransferred, released, extinguished, or termina	ted by the organization	during
the tax year ►			
Number of states where property subject to co	nservation easement is located ►		
Does the organization have a written policy regenforcement of the conservation easements it	parding the periodic monitoring, inspection, ha		d Yes No
Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation easo	ements during the year	
Amount of expenses incurred in monitoring, ins	specting, and enforcing conservation easemer	nts during the vear	
► \$	specing, and emoreing conservation casemer	nes darring the year	
Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of so	ection 170(h)(4)(B)(ı)	┌ Yes ┌ No
In Part XIII, describe how the organization rep balance sheet, and include, if applicable, the te the organization's accounting for conservation	ext of the footnote to the organization's financi		
t III Organizations Maintaining Coll	ections of Art, Historical Treasures ered "Yes" to Form 990, Part IV, line 8.	, or Other Similar	Assets.
If the organization elected, as permitted under works of art, historical treasures, or other simi	SFAS 116 (ASC 958), not to report in its rev lar assets held for public exhibition, education	n, or research in further	
service, provide, in Part XIII, the text of the fo If the organization elected, as permitted under works of art, historical treasures, or other simi service, provide the following amounts relating	SFAS 116 (ASC 958), to report in its revenular assets held for public exhibition, education	e statement and baland	
(i) Revenue included in Form 990, Part VIII, I	ine 1	► \$	162,498
(ii) Assets included in Form 990, Part X			74,060,795
If the organization received or held works of ar following amounts required to be reported unde		for financial gain, prov	
Revenue included in Form 990, Part VIII, line			
	*		
Assets included in Form 990, Part X		► \$	

Part	Organizations Maintaining Co	ollections of Art,	, Hist	orical T	reasures, or (Othe	r Similar As	sets (continued
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	ds, che	eck any of	the following that	are a	ı sıgnıfıcant use	of its
а	Public exhibition		d	✓ Loar	or exchange prog	rams	5	
b	Scholarly research		e	┌ Othe	er			
c	Preservation for future generations							
4	Provide a description of the organization's of Part XIII	ollections and explai	n how	they furth	er the organizatio	n's e	xempt purpose ı	n
5	During the year, did the organization solicit							
Dav	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrange	·						Yes V No
Fell	Part IV, line 9, or reported an a					su i	es to roilli s	, , , , , , , , , , , , , , , , , , ,
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?					sets		┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the 1	followi	ng table	,			
							An	nount
С	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance				l	1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, fo	or escrow	or custodial accou	ınt lı	ability?	「Yes
ь	If "Yes," explain the arrangement in Part XI				· · · · · · · · · · · · · · · · · · ·			<u> ' </u>
Pa	rt V Endowment Funds. Complete	If the organization (a)Current year		vered "Ye or year	es" to Form 990 b (c)Two years back	'		(a)Four years had
1a	Beginning of year balance	5,744,869,444		140,214,516	 	+ • •	4,928,070,000	(e)Four years back 4,259,950,00
b	Contributions	241,117,041	-			+	107,392,000	112,278,00
c	Net investment earnings, gains, and losses	193,711,812		791,728,922	517,725,14	1	-9,223,000	734,562,00
d	Grants or scholarships	51,080,905		81,084,751	 	_	30,500,080	-22,504,82
e	Other expenditures for facilities and programs	203,466,849	2	230,432,044	201,765,03	1	154,846,560	-115,986,38
f	Administrative expenses	41,633,086		38,136,174	39,872,32	3	49,269,360	-34,622,80
g	End of year balance	5,883,517,457	5,7	744,869,444	5,140,214,51	6	4,791,623,000	5,279,904,00
2	Provide the estimated percentage of the cu	rent year end balanc	e (line	1g, colur	nn (a)) held as			
а	Board designated or quasi-endowment ►	24 000 %						
b	Permanent endowment ► 70 000 %							
c	Temporarily restricted endowment ► 6 the percentages in lines 2a, 2b, and 2c sho	000 % ould equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiza	ition th	nat are he	ld and administere	d for	the	
	organization by							Yes No
	(i) unrelated organizations					•	3a(
b	(ii) related organizations		• I on Sc	· · · :hedule R´	· · · · · · · · · · · · · · · · · · ·	٠.	Sa(
4	Describe in Part XIII the intended uses of t	•						
Par	t VI Land, Buildings, and Equipm		he or	ganızatıc	n answered 'Ye	s' to	Form 990, Pa	irt IV, line
	11a. See Form 990, Part X, line	10.	1.	(=) C==t ==		T	(a) Assumulated	T (d) Paali value
	Description of property			(a) Cost or obasis (investme	basis (other		(c) Accumulated depreciation	(d) Book value
	_and		L		23,757,	542		23,757,54.
b i	Buildings		.		4,514,880,	,245	1,683,674,993	2,831,205,25
c l	_easehold improvements		·		451,905,	.263	286,437,374	165,467,88
	Equipment		·		673,604,	-	423,245,440	<u> </u>
				(D) 1	997,898,	,700	491,576,657	+
ıota	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Part X	, colun	nn (B), line	= 1U(C).)	•	 	3,777,112,14
							Schedule D) (Form 990) 201

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other	23,503,000	F F
(A) DOMESTIC EQUITIES	212,568,000	F
(B) FOREIGN EQUITIES	275,972,000	F
(C) HEDGED EQUITIES	724,531,000	F
(D) PRIVATE EQUITIES	1,152,535,500	F
(E) FIXED INCOME ASSET BACKED SEC	22,073,000	F
(F) FIXED INCOME CORPORATE BONDS	408,917,000	F
(G) FIXED INCOME EQUITY PSHIPS	423,011,000	F
(H) FIXED INCOME & MARKETABLE SEC	1,808,560,000	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Cor	5,051,670,500	
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization		Port IV line 11d Cas Form 000 Port V line 15
(a) Descrip		, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15. Part X Other Liabilities. Complete if the organ		
Form 990, Part X, line 25.		5 Tolli 550, Falcit, ilie 11e of 11i. 5ee
1 (a) Description of liability	(b) Book value	
Federal income taxes DUE TO CONSOLIDATED SUBS	407,524	
OBLIGATIONS UNDER SPLIT INT AGRMNT	139,857,349	
DEFERRED BENEFITS	527,574,280	
FUNDS HELD IN TRUST FOR OTHERS	195,533,409	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	863,372,562	

SCHEDULE D, PART XI, LINE 2D

SCHEDULE D, PART XI, LINE 4B

SCHEDULE D, PART XII, LINE 2D

SCHEDULE D, PART XII, LINE 4B

Par		evenue per Audited Financial Sta ered 'Yes' to Form 990, Part IV, line		nts With Revenue p	er R	eturn Complete ıf
1		support per audited financial statements			1	3,851,861,468
2		not on Form 990, Part VIII, line 12			_	-
_ a	Net unrealized gains (losses) o	·	2a	-157,251,559		
b		cilities	2b	137,231,333		
c			2c			
d	Other (Describe in Part XIII)		2d	-12,050,378		
e	Add lines 2a through 2d .			12,030,370	2e	-169,301,937
3	Subtract line 2e from line 1 .		•		3	4,021,163,405
4		, Part VIII, line 12, but not on line 1	•			7,021,103,403
		ded on Form 990, Part VIII, line 7b.	4a	I		
a	•		4b	330,204,610		
b					4	220 204 610
C -		4- (The west seed form 000 Bert I les			4c	330,204,610
5		4c. (This must equal Form 990, Part I, line penses per Audited Financial St			5	4,351,368,015
Раг		swered 'Yes' to Form 990, Part IV, lin			s per	Return. Complete
1		audited financial statements			1	3,685,571,484
2		not on Form 990, Part IX, line 25				· · · ·
а		cilities	2a	1		
ь			2b			
c	•		2c			
d			2d	86,304,719	1	
e	Add lines 2a through 2d			00,301,713	2e	86,304,719
3	-		•		3	3,599,266,765
4		, Part IX, line 25, but not on line 1:	•		بّ	3,333,200,703
a		ded on Form 990, Part VIII, line 7b	. 4a	1		
b			4b	352,668,108		
	Add lines 4a and 4b		40	332,008,108	40	252 660 100
с 5		d 4c. (This must equal Form 990, Part I, III	 no 10 Y		4c 5	352,668,108
	t XIII Supplemental Info		ne 10			3,951,934,873
Pro Par	vide the descriptions required for l	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and				de any additional
l	Return Reference	Explanation				
SCHEDULE D, PART III, LINE 4		ART COLLECTION THE HERBERT F JO FOR ITS COLLECTION IN THE AREA O ART AND THE GRAPHIC ARTS THE CO PUBLIC OUTREACH THE MUSEUM'S C AND PROVIDES INFORMATION TO EN SCHEDULE D, PART V, LINE 4 ENDOWN CONSISTS PRIMARILY OF PERMANEN (I E, FUNDS FUNCTIONING AS ENDOWN PROVIDES CRITICAL SUPPORT FOR EN AND SUPPORT FOR VARIOUS INSTITU PUBLIC OUTREACH	F A SIA LLECT A LEN C C O U RA MENT F T EN D C VMENT N D O W	IN ART, 19TH AND 20T ION IS USED FOR TEA PAR OF EVENTS IS AVA AGE USE OF THE COLL FUNDS THE UNIVERSI DWMENT AND BOARD I) THE INCOME FROM TED FACULTY CHAIRS, S	H CEN CHING ILABI ECTIC TY'S E DESIG THE EI	ITURY AMERICAN G, RESEARCH, AND LE ON ITS WEB SITE ON BY THE PUBLIC NDOWMENT NATED ENDOWMENT NDOWMENT NOOWMENT ENT FINANCIAL AID,
SCHI	EDULE D, PART X, LINE 2	FIN 48 (ASC 740) FOOTNOTE THE UNINDESCRIBED IN SECTION 501 (C)(3) OF EXEMPT FROM INCOME TAXES ON RELISECTIONS OF THE INTERNAL REVENU	THE I	NTERNAL REVENUE CO INCOME PURSUANT T	DE AI	ND IS GENERALLY APPROPRIATE

UNIVERSITY'S CONSOLIDATED FINANCIAL STATEMENTS

OF GOODS SOLD \$ 16,250,285 ----- TOTAL \$86,304,719

16,250,285) ----- TOTAL \$330,204,610

RECLASS OF STUDENT ASSISTANCE \$352,668,108

STANDARDS, THE UNIVERSITY EVALUATES ITS INCOME TAX POSITION EACH FISCAL YEAR TO DETERMINE WHETHER IT IS MORE LIKELY THAN NOT TO BE SUSTAINED IF EXAMINED BY THE APPLICABLE TAXING AUTHORITY THIS REVIEW HAD NO MATERIAL IMPACT ON THE

CHANGES IN FMV OF SPLIT INTEREST (\$ 12,050,378) ------ TOTAL (\$ 12,050,378)

LOSS ON SWAP TERMINATION \$ 16,419,061 FAS 158 \$ 47,422,157 RECLASS OF SPECIAL

EVENT EXPENSES \$ 1,507,416 RECLASS OF RENT EXPENSE \$ 4,705,797 RECLASS OF COST

RECLASS OF STUDENT ASSISTANCE \$352,668,108 RECLASS OF RENT EXPENSE (\$4,705,797)
RECLASS OF SPECIAL EVENT EXPENSE (\$1,507,416) RECLASS OF COST OF GOODS SOLD (\$

Jenedale 2 (1 31111 33 3) 23 13		1 age 5
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 15-0532082

Name: Cornell University

Form 990,	Scheaui	eυ	, Part V	11 -	Investments	Otner	Securities
		-					

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(3)Other		
(A) DOMESTIC EQUITIES	212,568,000	F
(B) FOREIGN EQUITIES	275,972,000	F
(C) HEDGED EQUITIES	724,531,000	F
(D) PRIVATE EQUITIES	1,152,535,500	F
(E) FIXED INCOME ASSET BACKED SEC	22,073,000	F
(F) FIXED INCOME CORPORATE BONDS	408,917,000	F
(G) FIXED INCOME EQUITY PSHIPS	423,011,000	F
(H) FIXED INCOME & MARKETABLE SEC	1,808,560,000	F

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134073186

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

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

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

Open to Public Inspection

Name of the organization Comell University Employer id		Employer identificati	er identification number				
Come	,	15-0532082					
Pa	rt I			YES	NO		
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes			
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student add programs, and scholarships?		2	Yes			
Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II							
4	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes			
ŀ	• Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes			
•	Copies of all catalogues, brochures, announcements, and other written communications to the pu	ıblıc dealıng	"	103			
	with student admissions, programs, and scholarships?		4c	Yes			
C	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes			
5	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No.		
ŀ	Admissions policies?		5b		No		
(Employment of faculty or administrative staff?		5c		No		
C	Scholarships or other financial assistance?		5d		No		
•	e Educational policies?		5e		No		
f	Use of facilities?		5f		No		
g	Athletic programs?		5g		No		
ŀ	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		<u>5h</u>		No		
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	No		
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev. Proc. 75-50, 1975-2 C. B. 587, covering racial pondiscrimination? If "No." explain on Pa		7	Vas			

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

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

Schedule E (Form 990 or 990-EZ) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134073186

OMB No 1545-0047

SCHEDULE F (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

Open to Public **Inspection** Employer identification number

	e of the organization ell University				Employer ident	ification number			
	en omversity				15-0532082				
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered			
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?								
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its grant	s and other			
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace 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) See Add'l Data		-						
(2)								
(3)								
(4									
(5									
	Sub-total Total from continuation sheets to Part I	19	641			960,885,351 30,325,091			
	Totals (add lines 3a and 3b)	19	641			991,210,442			

Schedule F (Form 990) 2014

Pē				izations or Entitle ived more than \$5,0		•			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are re or counsel has pro					
3	Enter total nun	nber of other or	ganizations or ent	ities					

Schedule F (Form 990) 2014 Page 3 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. (d) A mount of (e) Manner of cash (h) Method of (a) Type of grant or (b) Region (c) Number of (f) A mount of (a) Description cash grant disbursement non-cash of non-cash valuation assistance recipients assistance assistance (book, FMV. appraisal, other) (1) Student Travel Central America and 18.303 Check/ACH NONE FΜV 11 Grant/Fellowshp the Caribbean 251.523 Check/ACH Fast Asia and the 77 NONE lFM∨ Grant/Fellowshp Pacific 50 112,078 Check/ACH ИОИЕ FΜV Europe (Includina Grant/Fellowshp Iceland and Greenland) 3 3.900 Check/ACH Middle East and North NONE lfm v Grant/Fellowshp A frica 13.210 Check/ACH FΜV North America 8 NONE Grant/Fellowshp Russia and the Newly 3 6.600 Check/ACH NONE FM∨ Grant/Fellowshp Independent States 30,637 Check/ACH (7) Student Travel South America 21 NONE lFM∨ Grant/Fellowshp (8) Student Travel 31 115,832 Check/ACH NONE lFM∨ South Asia Grant/Fellowshp 39 35,006 Check/ACH NONE FΜV Sub-Saharan Africa Grant/Fellowshp

(2) Student Travel (3) Student Travel (4) Student Travel (5) Student Travel (6) Student Travel (9) Student Travel (10) Student Financial Aid 77,016 Check/ACH NONE FMV Central America and 1 the Carıbbean (11) Student Financial Aid 6,318,106 Check/ACH FΜV East Asia and the 174 Іполе Pacific (12) Student Financial Aid Europe (Including 62 2,060,542 Check/ACH NONE lFM∨ Iceland and Greenland) (13) Student Financial Aid 14 290,309 Check/ACH Middle East and North NONE lFM∨ A fric a (14) Student Financial Aid 58 1,150,576 Check/ACH NONE FM∨ North America (15) Student Financial Aid Russia and the Newly 2 109,313 Check/ACH NONE IFΜV Independent States (16) Student Financial Aid 17 415,613 Check/ACH NONE FΜV South America (17) Student Financial Aid 1,460,756 Check/ACH FΜV South Asia 44 NONE 304,630 Check/ACH (18) Student Financial Aid Sub-Saharan Africa 18 NONE lFM∨ Schedule F (Form 990) 2014

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)	I	Yes	Г	Νo
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; do not file with Form 990)	~	Yes	Γ	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)	굣	Yes	Г	Νo
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)	দ	Yes	Γ	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)	I~	Yes	Г	Νo
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; do not file with Form 990)	√	Yes	Г	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

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
SCHEDULE F, PART I, LINE 2	THE UNIVERSITY REVIEWS ALL INVOICES AND OTHER REQUIRED DOCUMENTATION FOR ACCURACY, APPROPR IATENESS OF THE EXPENDITURES IN COMPLIANCE WITH THE AWARD DOCUMENTS AND TIMELINESS OF SUBM ISSION SCHEDULE F, PART I, LINE 3 COLUMN F THE AUDITED FINANCIAL STATEMENTS ARE PREPARED UNDER THE ACCRUAL METHOD ACCORDINGLY, THE REVENUE AND EXPENSES REPORTED IN THE FORM 990 A ND ITS SUPPORTING SCHEDULES, INCLUDING THE FOREIGN EXPENDITURES REPORTED ON SCHEDULE F, PART I, LINE 2, COLUMN F, ARE REPORTED UNDER THE ACCRUAL METHOD

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART III	THESE AMOUNTS INCLUDE SCHOLARSHIP, FELLOWSHIP, AND GRANT FUNDING PROVIDED TO STUDENTS WITH A COUNTRY OF CITIZENSHIP OUTSIDE OF THE U.S. FURTHER, EDUCATIONAL TRAVEL GRANTS PROVIDED TO INDIVIDUALS, REGARDLESS OF CITIZENSHIP, IS REPORTED IF THE PRIMARY DESTINATION WAS OUTS IDE OF THE UNITED STATES

Additional Data

Software ID: Software Version:

EIN: 15-0532082

Name: Cornell University

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Antarctica			Program services	Education & Research	109,993
Central America and the Caribbean	1	4	Program services	Education & Research	382,226
East Asia and the Pacific		14	Program services	Education & Research	2,962,345

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
Europe (Including Iceland and Greenland)	14	92	Program services	Education & Research	8,452,112			
Middle East and North Africa	1	485	Program services	Education & Research	132,348,084			
North America		21	Program services	Education & Research	1,509,089			

Form 990 Schedule F I	<u> Part I - Activit</u>	<u>ies Outside Tl</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Russia and the Newly Independent States		5	Program services	Education & Research	80,369
South America		4	Program services	Education & Research	811,923
South Asia	3	7	Program services	Education & Research	1,078,640

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa		9	Program services	Education & Research	1,347,526
Central America and the Caribbean			Program services	Medical Services	679,640
East Asia and the Pacific			Investments		126,000

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
Europe (Including Iceland and Greenland)			Investments		101,792,904			
Central America and the Caribbean			Investments		703,213,568			
Central America and the Caribbean			Program Services	Frgn Patent Exp	24,166			

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
East Asia and the Pacific			Program services	Frgn Patent Exp	1,515,280			
Europe (Including Iceland and Greenland)			Program services	Frgn Patent Exp	4,451,486			
Middle East and North Africa			Program services	Frgn Patent Exp	38,402			

Form 990 Schedule F	Part I - Activit	<u>ies Outside Tl</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program services	Frgn Patent Exp	136,186
Russia and the Newly Independent States			Program services	Frgn Patent Exp	4,824
South America			Program services	Frgn Patent Exp	62,118

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
South Asia			Program services	Frgn Patent Exp	92,915			
Sub-Saharan Africa			Program services	Frgn Patent Exp	1,082,490			
East Asia and the Pacific			Program services	Research Sub-Contracts	874,319			

Form 990 Schedule F I	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program services	Research Sub-Contracts	1,241,352
Middle East and North Africa			Program services	Research Sub-Contracts	845,762
North America			Program services	Research Sub-Contracts	3,932,512

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside Tl</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Russia and the Newly Independent States			Program services	Research Sub-Contracts	58,000
South America			Program services	Research Sub-Contracts	1,429,729
South Asia			Program services	Research Sub-Contracts	2,048,363

Form 990 Schedule F I	<u>Part I - Activit</u>	ies Outside T	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program services	Research Sub-Contracts	5,619,783
Europe (Including Iceland and Greenland)			Fundraising	Foundation	54,385
Central America and the Caribbean			Grantmakıng		95,319

Form 990 Schedule F I	<u>Part I - Activit</u>	ies Outside Tl	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Grantmakıng		6,569,629
Europe (Including Iceland and Greenland)			Grantmaking		2,172,620
Middle East and North Africa			Grantmakıng		294,209

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ies Outside Tl</u>	ne United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Grantmakıng		1,163,786
Russia and the Newly Independent States			Grantmaking		115,913
South America			Grantmaking		446,250

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ties Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Grantmaking		1,576,588
Sub-Saharan Africa			Grantmaking		369,637

DLN: 93493134073186

OMB No 1545-0047

Supplemental Information Regarding SCHEDULE G (Form 990 or 990-EZ) **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.

Inspection

Name of the organization Cornell University

Department of the Treasury

Internal Revenue Service

10

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

15-0532082

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.

	Indicate whether the orga	nızatıon raısed funds	through a	ny of the i	follo	wing activities Che	ck all that apply	
а	Mail solicitations			е	~	Solicitation of non-	government grants	
b	✓ Internet and email so	licitations		f	굣	Solicitation of gove	ernment grants	
c	Phone solicitations			g	굣	Special fundraising	events	
d	✓ In-person solicitation	ıs						
	Did the organization have or key employees listed in If "Yes," list the ten highe	n Form 990, Part VII) or entity	ın connec	tion	with professional fu	indraising services?	V Yes V No
	to be compensated at lea					-		
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv	Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1	GRENZENBACH GLIER AND ASSOCIATES 401 N Michigan Ave	Consulting	Yes	No No			116,337	-116,337
2	Chicago, IL 60611	EVNT MGMT		No		2.738.090	242.454	2.495.636

629 Fifth Avenue Suite SRVCS Pelham, NY 10803

2,738,090 358,791 2,379,299

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

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

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1 CABARET NIGHT (event type)	(b) Event #2 GREENBERG (event type)	(c) Other events 4 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	2,738,090	472,970	177,265	3,388,325
Revenue	2	Less Contributions	2,526,190	411,470	52,941	2,990,601
~ 	3	Gross income (line 1 minus line 2)	211,900	61,500	124,324	397,724
	4	Cash prizes				
မာ	5	Noncash prizes				
anse.	6	Rent/facility costs	25,000	0	4,000	29,000
Expenses	7	Food and beverages .	318,413	152,180	1,070	471,663
Direct	8	Entertainment	365,936	0	120	366,056
à	9	Other direct expenses .	480,154	89,233	71,310	640,697
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)		(1,507,416)
	11	Net income summary Subtract li	ne 10 from line 3, column	(d)	•	-1,109,692
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, li		'Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes% ┌ No	┌ Yes% ┌ No	│ Yes % \(\bar{\text{No}} \)	
		Direct expense summary Add line Net gaming income summary Subi				
9 a b	Is th	er the state(s) in which the organiza he organization licensed to conduc No," explain	t gaming activities in eac	h of these states?		
10a b	Wer	e any of the organization's gaming	licenses revoked, suspen	ded or terminated during	the tax year?	

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity		
	formed to administer charitable gaming	,,		Г _{Yes} Г	— No
13	Indicate the percentage of gaming acti		1 1	, , , ,	
а	The organization's facility		13a		%
b	An outside facility				%
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records		
	Name ▶				
	Address ►				
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming		
154				┌ Yes 「	– _{No}
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the		
C	If "Yes," enter name and address of the	e third party			
	Name ►				
	Address 🏲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation 🕨 \$		······		
	Description of services provided				
	Director/officer	_ Employee	☐ Independent contractor		
17	Mandatory distributions				
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to		
	retain the state gaming license?			Γ _{Yes} [Γ _{No}
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent		
	ın the organization's own exempt activi		·		
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr		
	Return Reference		Explanation		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No 1545-0047

DLN: 93493134073186

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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

Inspection

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Cornell University 15-0532082 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 Domestic Organizations and Domestic Governments. 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.

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

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 237 Enter total number of other organizations listed in the line 1 table 50 Part III Grants and Other Assistance to Domestic Individuals. 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT FINANCIAL AID	14724	277,590,732		FMV	NONE

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						
SCHEDULE I, PART II	THE UNIVERSITY REPORTS ALL GRANT RECIPIENTS, INCLUDING SUB-GRANTEES, OF WHICH IT IS AWARE THIS INCLUDES SUB-RECIPIENT AWARDS, PRIMARILY FOR RESEARCH, TO GOVERNMENT AGENCIES, ORGANIZATIONS EXEMPT UNDER 501(C)(3) AND FOR-PROFIT ENTITIES FOR WHICH NO AUTHORITY FOR EXEMPTION IS PROVIDED						
SCHEDULE I, PART III	CORNELL UNIVERSITY PROVIDED NEED-BASED FINANCIAL AID TOTALING \$277,590,732 TO APPROXIMATELY 14,724 STUDENTS IN THE FISCAL YEAR ENDING JUNE 30, 2015 IN ADDITION TO CORNELL ENDOWED SCHOLARSHIPS, ANNUAL GIFTS AND TUITION-FUNDED GRANTS OF \$252,513,004, THIS AMOUNT INCLUDES SCHOLARSHIPS AND GRANTS FROM FEDERAL, STATE, AND EXTERNAL SOURCES TOTALING \$25,077,728						

Additional Data

Software ID:

Software Version:

EIN: 15-0532082

Name: Cornell University

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOSPITAL FOR SPECIAL SURGERY535 E 70TH STREET NEW YORK, NY 10021	13-1024135	501(C)(3)	72,100		FMV		Research
PACE UNIVERSITYONE PACE PLAZA NEWYORK,NY 10038	13-5562314	501(C)(3)	12,500		FMV		Research
RENSSELAER POLYTECHNIC INSTITUTE 110 8TH STREET WEST HALL TROY, NY 12180	14-1340095	501(C)(3)	35,795		FMV		Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
HEALTH RESEARCH INC150 BROADWAY STE 560 MENANDS,NY 12204	14-1402155	501(C)(3)	6,849		FMV		Research		
THE WILLIAM H MINER AGRIC RSRCH INSTIT1034 MINER FARM RD CHAZY,NY 12921	14-1414736	501(C)(3)	22,483		FMV		Research		
DUTCHESS CTY SOIL & WATER CONSERVATION DIST2715 RTE 44 STE 3 MILLBROOK,NY 12545	14-6011863	FEDERAL	11,980		FMV		O ther		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ROCHESTER INSTITUTE OF TECHNOLOGY141 LOMB BUILDING ROCHESTER, NY 146235608	16-0743140	501(C)(3)	10,470		FM∨		Research		
ATC-NYPO BOX 422 TRUMANSBURG,NY 148860422	16-1549760	-	215,773		FM∨		Research		
CORNELL COOPERATIVE EXTENSION-MADISON CTY PO BOX 1209 EATON ST MORRISVILLE,NY 13408	16-6072885	501(C)(3)	17,536		FMV		O ther		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE TRUSTEES OF PRINCETON UNIVERSITY PO BOX 36 PRINCETON,NJ 08544	21-0634501	501(C)(3)	164,817		FM∨		Research			
SCIENCENTER DISCOVERY MUSEUM (SDM)601 FIRST ST ITHACA,NY 14850	22-2470652	501(C)(3)	8,011		FM∨		Research			
UNIVERSITY OF RHODE ISLAND70 LOWER COLLEGE RD KINGSTON,RI 02881	22-3011455	RI	15,726		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	145,218		FM∨		Research		
NORTH AMERICAN ASSOC FOR ENVIRON EDU2000 P ST NW STE 540 WASHINGTON, DC 20036	23-7158061	501(C)(3)	1,464,628		FM∨		Other		
THE ADVOCACY CENTER (ADVCTR)590 SOUTH AVENUE ROCHESTER, NY 14620	23-7298613	501(C)(3)	75,934		FM∨		Other		

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LEHIGH UNIVERSITY (LU) 526 BRODHEAD AVE BETHLEHEM,PA 180153046	24-0795445	501(C)(3)	50,493		FMV		Research			
CARNEGIE MELLON UNIVERSITY5000 FORBES AVENUE PITTSBURGH,PA 15213	25-0969449	501(C)(3)	131,898		FMV		Research			
PENNSYLVANIA ASSC FOR SUSTAINABLE AGRICPO BOX 419 MILLHEIM,PA 16854	25-1685497	501(C)(3)	16,554		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MIAMI UNIVERSITY500 E HIGHT ST 102 OXFORD,OH 450563653	31-6402089	501(C)(3)	32,999		FMV		Research			
COLLEGE OF WOOSTER 1189 BEALL AVENUE WOOSTER,OH 446912393	34-0714654	501(C)(3)	82,893		FMV		Research			
PURDUE UNIVERSITY401 S GRANT ST WEST LAFAYETTE,IN 47907	35-6002041	501(C)(3)	61,250		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF CHICAGO 6030 S ELLIS AVE 114 CHICAGO,IL 60637	36-2177139	501(C)(3)	124,108		FM∨		Research			
THE BOARD OF TRUSTEES OF THE UNIV OF IL1901 S FIRST ST STE A CHAMPAIGN,IL 61820	37-6000511	IL	184,717		FM∨		Research			
REGENTS OF THE UNIVERSITY OF MICHIGAN WOLV TWR RM 1065 3003 S STE ST ANN ARBOR, MI 481091274	38-6006309	MI	1,695,160		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
UNIVERSITY OF WISCONSIN (UOWMAD)21 N PARK ST STE 6401 MADISON,WI 53715	39-6028867	WI	357,486		FMV		Research		
THE REGENTS OF THE UNIVERSITY OF MINNESOTA 200 OAK ST SE 450 MINNEAPOLIS, MN 55455	41-6007513	ми	1,431,689		FM V				
THE WASHINGTON UNIVERSITYCBOX 1034 700 ROSEDALE ST LOUIS,MO 63112	43-0653611	501(C)(3)	507,717		FMV		Research		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TRUMAN STATE UNIVERSITY105 MCCLAIN HALL KIRKSVILLE, MO 635014221	43-6005833	501(C)(3)	70,205		FM∨		Research			
UNIVERSITY OF NEBRASKA 2009 VINE ST PB 830861 LINCOLN,NE 68588	47-0049123	501(C)(3)	8,184		FMV					
ORGANIC SEED ALLIANCE PO BOX 772 PORT TOWNSEND, WA 98368	51-0175667	501(C)(3)	21,858		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CELLANA LLC73-4460 KAAHUMANU HWY KAILUAKONA,HI 96740	51-0658850	-	517,000		FMV		Research			
AMERICAN UNIVERSITY 4400 MA AVE NW WASHINGTON, DC 20016	53-0196549	501(C)(3)	63,112		FMV		Research			
US GEOLOGICAL SURVEY US DEPT OF THE INT2255 NORTH GEMINI DR FLAGSTAFF,AZ 86001	53-0196958	FEDERAL	243,481		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HOWARD UNIVERSITY525 BRYANT ST WASHINGTON, DC 20059	53-0204707	501(C)(3)	501,274		FM∨		Research			
SMITHSONIAN INSTITUTION (SMITH)PO BOX 37012 MRC 1205 WASHINGTON, DC 20013	53-0206027	501(C)(3)	26,683		FM∨		Research			
THE COLLEGE OF WILLIAM & MARYPO BOX 8795 WILLAMSBURG,VA 23187	54-6001718	501(C)(3)	114,604		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEST VIRGINIA UNIVERSITY RESEARCH CORP886 CHESTNUT RIDGE RD MORGANTOWN,WV 26506	55-0665758	501(C)(3)	203,751		FM∨		Research			
DUKE UNIVERSITY2200 WEST MAIN ST DURHAM,NC 27705	56-0532129	501(C)(3)	156,349		FMV		Research			
NORTH CAROLINA STATE UNIVERSITY2701 SULLIVAN DR STE 240 RALEIGH,NC 27695	56-6000756	NC	655,424		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GEORGIA TECH RESEARCH CORPORATION (GTRC)505 TENTH ST NW ATLANTA,GA 303320420	58-0603146	501(C)(3)	1,790,400		FMV		Research			
UNIVERSITY OF CENTRAL FLORIDA12201 RES PARKWAY ORLANDO,FL 32826	59-2924021	501(C)(3)	335,046		FMV		Research			
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 ANN ARBOR,MI 48109	38-6006309	MI	80,221		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OREGON STATE UNIVERSITY308 KERR ADMIN BLDG CORVALIS,OR 973312140	61-1730890	501(C)(3)	114,987		FMV		Research			
AUBURN UNIVERSITY310 SAMFORD HALL AUBURN UNIV,AL 368495131	63-6000724	501(C)(3)	36,675		FMV		Research			
REGENEMED INC9855 TOWNE CTR DR 200 SAN DIEGO,CA 92121	65-1201114	-	19,097		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF THE VIRGIN ISLANDS2 JOHN BREWERS BAY ST THOMAS, VI 00802	66-0432514	501(C)(3)	8,859		FMV		Research			
UNIV OF PUERTO RICO- RIO PIEDRAS CAMPUSPO BOX 21790 SAN JUAN,PR 009311790	66-0433760	501(C)(3)	18,794		FMV		Research			
UNIVERSITY OF ARKANSAS 1125 W MAPLE ST FAYETTEVILLE, AR 72701	71-6003252	AR	378,402		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE UNIVERSITY OF TEXAS101 E 27TH ST STOP A9000 AUSTIN,TX 78713	74-0230239	ТХ	585,670		FM∨		Research			
WILLIAM MARSH RICE UNIVERSITYPO BOX 1892 - MS16 HOUSTON,TX 772511892		501(C)(3)	40,036		FM∨		Research			
UNIVERSITY CORP FOR ATMOSPHERIC RESEARCH PO BOX 3000 BOULDER,CO 80307	84-0412668	501(C)(3)	109,572		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE REGENTS OF THE UNIVERSITY OF COLORADO 572 UCB BOULDER, CO 803090574	84-6000555	со	730,236		FMV		Research			
SOUTHWEST SCIENCES INCORPORATED (SSI)1570 PACHECO ST SANTA FE,NM 87505	85-0340320	-	38,426		FMV		Research			
ARIZONA STATE UNIVERSITYPO BOX 876011 TEMPE,AZ 852876011	86-0196696	AZ	841,086		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ENVIRONMENTAL EDUCATION EXCHANGE 738 N 5TH AVE STE 100 TUCSON,AZ 85705	86-0682018	501(C)(3)	94,370		FMV		O ther			
HYDROACOUSTIC TECHNOLOGY INCORPORATED715 NE NORTHLAKE WAY SEATTLE, WA 98105	91-1397519	-	134,490		FMV		Research			
WASHINGTON STATE UNIVERSITYNEILL HALL ROOM 423 PULLMAN,WA 991643140	91-6001108	WA	408,046		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF WASHINGTON4333 BROOKLYN AVE NE SEATTLE, WA 981959472	91-6001537	WA	1,859,313		FMV		Research			
STANFORD UNI BRD OF LELAND STANFORD JR UNI 3160 PORTER DR PALO ALTO, CA 943048445	94-1156365	501(C)(3)	2,285,721		FMV		Research			
LAWRENCE BERKELEY NATIONAL LABORATORY ONE CYCLOTRON RD BERKELEY, CA 94720	94-2951741	CA	280,716		FMV		Research			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REGENTS OF THE UNIV OF CA-SAN FRANCISCO3333 CALIFORNIA ST SAN FRANCISCO, CA 94118	94-6036493	CA	24,903		FM∨		Research			
UNIVERSITY OF SOUTHERN CALIFORNIA 3720 S FLOWER ST CUB 301 LA,CA 90089	95-1642394	501(C)(3)	680,042		FMV		Research			
CAL STATE LA UNIVERSITY AUXILIARY SVCS INC5151 STATE UNIV DR LOS ANGELES, CA 90032	95-4016653	501(C)(3)	23,928		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF HAWAII 2440 CAMPUS RD BOX 368 HONOLULU,HI 96822	99-6000354	HI	24,389		FMV		Research			
MAINE MEDICAL CENTER 22 BRAMHALL ST SOUTH PORTLAND, ME 04102	01-0238552	501(C)(3)	15,228		FMV		Other			
UNI OF ME SYSTEM ACTING THRU THE UNIV OF ME5717 CORBETT HALL ORONO,ME 044695717	01-6000769	501(C)(3)	86,026		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DARTMOUTH COLLEGE11 ROPE FERRY RD 6210 HANOVER,NH 03755	02-0222111	501(C)(3)	126,905		FM∨		Research			
HUBBARD BROOK RESEARCH FOUNDATION PO BOX 282 NORTH WOODSTOCK, NH 03262	02-0474938	501(C)(3)	46,125		FMV		Research			
UNIVERSITY OF NEW HAMPSHIRE51 COLLEGE RD 2ND FL DURHAM,NH 03824	02-6000937	NH	155,665		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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UNIVERSITY OF VERMONT 340 WATERMAN BLDG BURLINGTON,VT 05405	03-0179440	VT	23,174		FMV		Research			
NORTHEAST ORGANIC FARMING ASSOC OF NY 1423 HATHAWAY DR FARMINGTON,NY 14425	03-0259137	501(C)(3)	80,003		FM∨		Research			
CONNECTICUT CENTER FOR PRIMARY CAREPO BOX 762 FARMINGTON,CT 06034	03-0441188	501(c)(3)	8,818		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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BOSTON UNIVERSITY25 BUICK ST BOSTON,MA 02215	04-2103547	501(C)(3)	26,918		FM∨		Research			
PRESIDENT AND FELLOWS OF HARVARD COLLEGE 1350 MA AVE HC600 CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	1,218,334		FM∨		Research			
TUFTS UNIVERSITY136 HARRISON AVE BOSTON,MA 02111	04-2103634	501(C)(3)	14,791		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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WELLESLEY COLLEGE106 CENTRAL ST GRH139 WELLESLEY,MA 02481	04-2103637	501(C)(3)	58,446		FM∨		Research			
DANA FARBER44 BINNEY STREET BOSTON,MA 02115	04-2263040	501(c)(3)	32,698		FMV		Research			
BRIGHAM & WOMENS HOSPITAL75 FRANCIS STREET BOSTON, MA 02115	04-2312909	501(c)(3)	2,206,918		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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ANALOG DEVICES INC804 WOBURN STREET WILMINGTON,MA 01887	04-2348234	-	24,062		FMV		Research			
SPAULDING REHABILITATION HOSPITAL C125 NASHUA STREET BOSTON,MA 02114	04-2551124	501(c)(3)	168,199		FMV		Research			
MASSACHUSETTS GENERAL HOSPITAL50 STANFORD ST STE 1001 BOSTON,MA 02114	04-2697983	501(c)(3)	92,622		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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BOSTON CHILDRENS HOSPITALPO BOX 414413 BOSTON,MA 02241	04-2774441	501(c)(3)	288,976		FM∨		Research			
CHILDRENS HOSPITAL CORPORATION300 LONGWOOD AVE BOSTON, MA 02155	04-3085427	501(c)(3)	42,119		FM∨		Research			
UNIVERSITY OF MASSACHUSETTS70 BUTTERFIELD TERRACE AMHERST,MA 01003	04-3167352	МА	704,358		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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THE GENERAL HOSPITAL CORP DBA MA GEN HOSP 55 FRUITE STREET BOSTON,MA 02114	04-3230035	501(C)(3)	370,091		FM∨		Research			
BOSTON HOUSING AUTHORITY52 CHAUNCEY STREET BOSTON,MA 02111	04-6001907	FEDERAL	12,658		FM∨		O ther			
CAPE COD CRANBERRY GROWERS' ASSOCIATION1 CARVER SQ BLVD PO BOX 97 CARVER,MA 02330	04-6060947	501(C)(3)	16,329		FM∨		O ther			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
REGENTS OF THE UNIVERSITY OF CA DAVIS PO BOX 989062 WEST SACRAMENTO, CA 95798	04-7120084	CA	658,168		FM∨		Research				
BROWN UNIVERSITY70 SHIP ST BOX G-E205 PROVIDENCE,RI 02903	05-0258809	501(c)(3)	744,049		FMV		Research				
RHODE ISLAND HOSPITAL 593 EDDY STREET PROVIDENCE,RI 02903	05-0258954	501(c)(3)	13,959		FM∨		Research				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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THE GRODEN CENTER INC 86 MOUNT HOPE AVENUE PROVIDENCE,RI 02906	05-0369378	501(C)(3)	63,356		FM∨		Research			
YALE UNIVERSITY214 WHITNEY AVE 230 NEW HAVEN,CT 06520	06-0646973	501(C)(3)	576,540		FM∨		Research			
UNIVERSITY OF CONNECTICUT (UCONN) 438 WHITNEY RD EXT 1133 STORRS,CT 06269	06-0772160	СТ	21,595		FM∨		Research			

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WHITEHEAD INSTITUTE9 CAMBRIDGE CENTER CAMBRIDGE,MA 02142	06-1043412	501(c)(3)	90,283		FM∨		Research			
THE CT AGRICULTURAL EXPERIMENT STATION123 HUNTINGTON ST 1106 NEW HAVEN,CT 06504	06-6032987	СТ	22,850		FMV		Research			
ST MARK'S DAY SCHOOL 1346 PRESIDENT ST BROOKLYN,NY 112134335	11-1694941	501(C)(3)	10,000		FMV		Other			

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COLD SPRING HARBOR LABORATORY1 BUNGTOWN RD COLD SPRING HARBOR, NY 11724	11-2013303	501(C)(3)	1,092,179		FM∨		Research			
RESOURCES FOR CHILDREN WITH SPECIAL NEEDS116 E 16TH ST 5TH FL NEW YORK, NY 10003	11-2594790	501(C)(3)	388,977		FMV		Research			
CORNELL COOPERATIVE EXTENSION SUFFOLK CTY 423 GRIFFING AVE 100 RIVERHEAD,NY 11901	11-6081424	501(C)(3)	139,843		FM V		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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THE CONFERENCE BOARD INC (CBI)845 THIRD AVENUE NEW YORK, NY 100226679	13-1624108	501(C)(3)	30,000		FMV		O ther			
HOSPITAL FOR SPECIAL SURGERY535 EAST 70TH ST NEW YORK, NY 10021	13-1624135	501(c)(3)	516,585		FMV		Research			
ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEWYORK,NY 100216339		501(c)(3)	282,587		FM∨		Research			

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SLOAN KETTERING INSTITUTE FOR CANCER RSRCH1275 YORK AVENUE NEW YORK, NY 10065	13-1624182	501(C)(3)	152,512		FMV		Research			
ALBERT EINSTEIN COLLEGE OF MEDICINE 1300 MORRIS PARK AVE BRONX,NY 10461	13-1624225	501(c)(3)	415,487		FMV		Research			
BOYCE THOMPSON INSTITUTE FOR PLANT RSRCH100 BOYCE THOMPSON TWR RD ITHACA,NY 14853	13-1739923	501(C)(3)	929,420		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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FORDHAM UNIVERSITY441 EAST FORDHAM RD BRONX,NY 10458	13-1740451	501(c)(3)	12,489		FMV		Research			
MEMORIAL SLOAN KETTERING1275 YORK AVE NEW YORK, NY 10021	13-1924236	501(c)(3)	2,795,695		FM∨		Research			
RSRCH FDN CUNY ON BEHALF OF LEHMAN COLLEGE230 W 41ST STREET NEW YORK, NY 10036	13-1988190	501(C)(3)	526,229		FMV		Research			

<u>Form 990,Schedule I, Pai</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
ROCKLAND CTY SOIL & WATER CONSERVATION50 SANITORIUM RD BLDG K POMONA,NY 10970	13-2600920	NY	7,000		FMV		O ther				
JEWISH ASSOC FOR SERVING THE AGING247 WEST 37TH ST 9TH FL NEW YORK, NY 10018	13-2620896	501(c)(3)	6,788		FMV		Research				
GREENMARKET (GNMK)51 CHAMBERS ST 228 NEW YORK, NY 10007	13-2765465	501(C)(3)	28,312		FMV		Research				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AGING IN NEW YORK FUND INC2 LAFAYETTE ST STE 2100 NEW YORK, NY 10007	13-3153550	501(c)(3)	142,707		FMV		Research			
THE ROGOSIN INSTITUTE 506 EASE 70TH ST NEW YORK, NY 10021	13-3184198	501(c)(3)	6,057		FMV		Research			
WINIFRED MASTERSON BURKE785 MAMARONECK AVE WHITE PLAINS,NY 10605	13-3434928	501(c)(3)	85,530		FM V		Research			

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BIOMEDICAL RESEARCH ALLIANCE OF NY1981 MARCUS AVE LAKE SUCCESS, NY 11042	13-3999590	N/A	34,618		FMV		Research			
NEW YORK UNIVERSITY 665 BROADWAY STE 801 NEW YORK, NY 10012	13-5562308	501(C)(3)	769,852		FMV		Research			
BETH ISRAEL DEACONESS MEDCAL CENTER10 UNION SQUARE NEWYORK,NY 10003	13-5564934	501(c)(3)	237,486		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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COLUMBIA UNIVERSITY 615 W 131 ST MC NEW YORK, NY 100277922	13-5598093	501(C)(3)	1,354,266		FM∨		Research			
ICAHN SCHOOL OF MEDICINEONE GUSTAVE L LEVY PLACE NEW YORK, NY 10029	13-6171197	501(c)(3)	623,723		FMV		Research			
CORNELL COOPERATIVE EXTENSION ROCKLAND CTY10 PATRIOT HILLS DR STONY POINT,NY 10980	13-6210461	501(C)(3)	6,500		FM∨		O ther			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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NYC DEPARTMENT OF EDUCATION DISTRICT 75 400 FIRST AVENUE NEW YORK, NY 10010	13-6400434	NY	112,500		FM∨		Research			
GE GLOBAL RESEARCHONE RESEARCH CIRCLE NISKAYUNA,NY 12309	14-0689340	N/A	214,557		FMV		Research			
SIENA COLLEGE515 LOUDON ROAD ALBANY,NY 12211	14-1338498	501(C)(3)	7,552		FM∨		Other			

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UNION COLLEGE807 UNION ST SCHENECTADY,NY 12308	14-1338580	501(C)(3)	9,205		FMV		Research			
RSRCH FDN FOR THE STATE UNIV OF NEW YORKPO BOX 6000 BINGHAMTON, NY 139026000		501(C)(3)	514,176		FMV		Research			
RESEARCH FOUNDATION FOR MENTAL150 BROADWAY STE 301 MENANDS,NY 12204	14-1410842	501(c)(3)	375,891		FM∨		Research			

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CITY SCHOOL DISTRICT OF ALBANY1 ACADEMY PARK ALBANY,NY 12207	14-1537912	NY	55,962		FMV		Research			
CLINICAL DIRECTORS NETWORK INC5 W 37TH ST 10TH FL NEW YORK, NY 10018	14-1717344	501(c)(3)	289,546		FMV		Research			
BAAR-SCIENTIFIC LLC 6374 ROUTE 89 ROMULUS,NY 14541	14-1878299	-	10,000		FMV		Research			

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
ULSTER COUNTY BOCES 175 ROUTE 32 NORTH NEW PALTZ, NY 12561	14-6003939	501(C)(3)	71,616		FM∨		O ther				
CITY SCHOOL DISTRICT OF SCHENECTADY108 EDUCATION DRIVE SCHENECTADY,NY 12303	14-6004188	NY	33,858		FMV		Research				
CORNELL COOPERATIVE EXTENSION (CCEALBANY) 24 MARTIN RD PB 497 VOORHEESVILLE,NY 12186	14-6036881	501(C)(3)	22,653		FMV		O ther				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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CORNELL COOPERATIVE EXTENSION DUTCHESS CTY2715 US ROUTE 44 1 MILLBROOK,NY 12545	14-6036882	501(C)(3)	97,302		FMV		Research			
CORNELL COOPERATIVE EXTENSION CLINTON CTY 6064 ROUTE 22 5 PLATTSBURGH,NY 12901	14-6036885	501(C)(3)	31,011		FMV		Research			
CORNELL COOPERATIVE EXTENSION ASSSOC6055 ROUTE 23 ACRA,NY 12405	14-6036887	501(C)(3)	99,122		FMV		Other			

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CORNELL COOPERATIVE EXTENSION ORANGE CTY 18 SEWARD AVE STE 300 MIDDLETOWN,NY 10940	14-6036889	501(C)(3)	9,821		FM∨		O ther			
CORNELL COOPERATIVE EXTENSION ULSTER CTY 232 PLAZA ROAD KINGSTON,NY 124012928	14-6036893	501(C)(3)	39,686		FM∨		Other			
CORNELL COOPERATIVE EXTENSION ST LAWRENCE 2403B STATE HIGHWAY 68 CANTON,NY 13617	14-6037202	501(C)(3)	10,758		FMV		Research			

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CORNELL COOPERATIVE EXTENSION FLANKLIN CTY 355 W MAIN ST STE 150 MALONE,NY 12953	14-6037203	501(C)(3)	60,241		FMV		Other			
CORNELL COOPERATIVE EXTENSION ESSEX COUNTYPO BOX 388 WESTPORT,NY 129930388	14-6048677	501(C)(3)	12,300		FMV		Research			
SYRACUSE UNIVERSITY 113 BOWNE HALL SYRACUSE,NY 13244	15-0532081	501(C)(3)	165,206		FMV		Research			

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CLARKSON UNIVERSITY8 CLARKSON AVE 5630 POTSDAM,NY 13699	15-0543659	501(C)(3)	40,142		FM∨		Research			
PALEONTOLOGICAL RESEARCH INSTITUTION 1259 TRUMANSBURG ROAD ITHACA,NY 14850	15-0554849	501(C)(3)	47,206		FMV		Research			
UNIVERSITY OF ROCHESTER515 HYLAN BLDG 270140 ROCHESTER,NY 14627	16-0743209	501(C)(3)	241,850		FM∨		Research			

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ALFRED UNIVERSITY1 SAXON DRIVE ALFRED,NY 14802	16-0743900	501(C)(3)	7,177		FM∨		Research			
OFS LABORATORIES LLC19 SCHOOLHOUSE ROAD SOMERSET,NJ 08873	16-1745377	-	51,371		FMV		Research			
CORNELL COOPERATIVE EXTENSION BROOME CTY 840 UPPER FRONT ST BINGHAMTON,NY 13905	16-6072872	501(C)(3)	124,785		FM∨		O ther			

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CORNELL COOPERATIVE EXTENSION CHAUTAUQUA 3542 TURNER ROAD JAMESTOWN, NY 147016327	16-6072874	501(C)(3)	10,374		FMV		Other			
CORNELL COOPERATIVE EXTENSION CORTLAND CTY60 CENTRAL AVE 105 CORTLAND, NY 13045	16-6072877	501(C)(3)	15,718		FMV		Other			
CORNELL COOPERATIVE EXTENSION ERIE COUNTY 21 S GROVE ST EAST AURORA,NY 14052	16-6072879	501(C)(3)	56,922		FMV		Other			

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CORNELL COOPERATIVE EXTENSION JEFFERSON CTY203 N HAMILTON ST WATERTOWN,NY 13601	16-6072882	501(C)(3)	35,420		FMV		O ther			
CORNELL COOPERATIVE EXTENSION (CCELC)5274 OUTER STOWE ST LOWVILLE,NY 13367	16-6072883	501(C)(3)	15,000		FMV		Research			
CORNELL COOPERATIVE EXTENSION (CCEMC)249 HIGHLAND AVENUE ROCHESTER,NY 14620	16-6072886	501(C)(3)	50,465		FMV		O ther			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CORNELL COOPERATIVE EXTENSION TOMPKINS CTY615 WILLOW AVENUE ITHACA,NY 14850	16-6072897	501(C)(3)	20,850		FMV		O ther			
CORNELL COOPERATIVE EXTENSION YATES COUNTY417 LIBERTY STREET PENN YAN,NY 14527	16-6072900	501(C)(3)	7,282		FMV		Research			
FL INSTITUTE FOR HUMAN & MACHINE COGNITION40 S ALCANIZ STREET PENSACOLA,FL 32502	20-0760849	501(C)(3)	90,546		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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INSTITUTE FOR ETHNOMEDICINEPO BOX 3464 JACKSON, WY 83001	20-1829529	501(c)(3)	82,693		FMV		Research			
HEBREW HOME AT RIVERDALE5901 PALISADE AVE RIVERDALE,NY 10471	20-4352212	501(c)(3)	107,739		FMV		Research			
BRIGHTTREE HOME HEALTH AND HOSPICE 1735 N BROWN RD LAWRENCEVILLE,GA 30043	20-4450365	_	80,827		FMV		Research			

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WINGS OF EAGLES DISCOVERY CENTER339 DANIEL ZENKER DR HORSEHEADS,NY 14845	22-2462926	501(C)(3)	223,828		FMV		Research			
CELGENE CORPORATION 86 MORRIS AVENUE SUMMIT,NJ 07901	22-2711928	-	37,500		FM∨		Research			
MONTCLAIR STATE UNIVERSITYCOLLEGE HALL 307 MONTCLAIR, NJ 07043	22-2912682	501(C)(3)	22,057		FM∨		Research			

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CARY INSTITUTE OF ECOSYSTEM STUDIES2801 SHARON TURNPIKE MILLBROOK,NY 12545	22-3232968	501(C)(3)	219,414		FMV		Research			
RUTGERS THE STATE UNIVERSITY679 HOES LANE PISCATAWAY,NJ 08854	22-6001086	NJ	1,432,212		FMV		Research			
CHILDRENS HOSPITAL OF PHILADELPHIALOCKBOX 1457 8500 PHILADELPHIA,PA 19178	23-1352166	501(c)(3)	45,330		FMV		Research			

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DREXEL UNIVERSITY3201 ARCH ST STE 100 PHILADELPHIA,PA 19104	23-1352630	501(C)(3)	149,585		FM∨		Research			
ECRI INSTITUTE5200 BUTLER PIKE PLYMOUTH MEETING, PA 19462	23-1662091	501(c)(3)	6,761		FMV		Research			
FRED HUTCHINSON1100 FAIRVIEW AVE SEATTLE, WA 98109	23-7156071	501(c)(3)	32,938		FMV		Research			

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PENNSYLVANIA STATE UNIVERSITY500 UNIVERSITY DR MC H138 HERSHEY,PA 17033	24-6000376	501(C)(3)	1,073,305		FMV		Research			
UNIVERSITY OF PITTSBURGH123 UNIV PLACE PITTSBURGH,PA 15213	25-0965591	501(C)(3)	132,979		FMV		Research			
US BUSINESS LEADERSHIP NETWORK13130 BRADDOCK PLACE ALEXANDRIA, VA 22314	26-0482057	501(C)(3)	33,499		FMV		O ther			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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STICKK39 E30TH ST STE 4 NEW YORK, NY 10016	26-0622510	N/A	20,000		FMV		Research			
KOKUA CONTRACTING AND PROJECT MANAGEMENT77-6441 KUAKINI HWY KAILUAKONA,HI 96740	26-0764795	-	96,043		FM∨		Research			
BROAD INSTITUTE75 AMES ST 11TH FLR CAMBRIDGE, MA 02142	26-3428781	501(c)(3)	82,345		FM∨		Research			

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WRIGHT STATE UNIVERSITY3640 COLONEL GLENN HWY DAYTON,OH 45435	31-0732831	501(C)(3)	26,021		FMV		Research			
DONALD DANFORTH PLANT SCIENCE CENTER 975 N WARSON ROAD ST LOUIS,MO 63132	31-1584621	501(C)(3)	136,144		FMV		Research			
CENTER FOR SCIENCE AND INDUSTRY (CSI)333 WEST BROAD STREET COLUMBUS,OH 43215	31-4383802	501(C)(3)	54,333		FMV		Research			

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THE OHIO STATE UNIVERSITY (OSU)1960 KENNY RD COLUMBUS,OH 432101063	31-6025986	501(C)(3)	338,808		FMV		Research			
PLANETARY SCIENCE INSTITUTE1700 E FT LOWELL TUCSCON,AZ 85719	33-0175263	501(C)(3)	121,464		FMV		Research			
SCIRE-SOUTHERN CALIFORNIA INSTITUTE 5901 E SEVENTH ST LONG BEACH,CA 90822	33-0331855	501(c)(3)	110,262		FM V		Research			

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SCRIPPS RESEARCH INSTITUTE10550 N TORREY PINES RD LA JOLLA,CA 92037	33-0435954	501(c)(3)	947,067		FMV		Research			
CLEVELAND CLINIC FOUNDATION9500 EUCLID AVENUE CLEVELAND,OH 44195	34-0714585	501(c)(3)	17,771		FMV		Research			
THE TRUSTEES OF INDIANA UNIVERSITY509 E 3RD ST BLOOMINGTON,IN 47401	35-6001673	501(C)(3)	10,000		FM V		O ther			

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UNIVERSITY OF NOTRE DAME511 MAIN BLDG NOTRE DAME,IN 465565602	36-0868188	501(C)(3)	23,745		FM∨		Research			
NORTH WESTERN UNIVERSITY2205 TECH DR EVANSTON,IL 602083500		501(c)(3)	195,366		FMV		Research			
BRADLEY UNIVERSITY 1501 W BRADLEY AVE PEORIA,IL 61625	37-0861494	501(C)(3)	11,416		FMV		Research			

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MICHIGAN STATE UNIVERSITY426 AUDITORIUM RD E LANSING,MI 48824	38-6005984	MI	248,623		FMV		Research			
MEDICAL COLLEGE OF WISCONSIN9200 W WISCONSIN AVE MILWAUKEE,WI 53226	39-0806261	501(c)(3)	107,716		FMV		Research			
OLMSTED MEDICAL CENTER1650 FOURTH ST SE ROCHESTER, NY 55904	41-0855367	501(C)(3)	64,443		FM V		Research			

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IOWA STATE UNIVERSITY 1138 PEARSON AMES,IA 500112207	42-6004224	IA	647,847		FMV		Research			
THE CURATORS OF THE UNIVERSITY OF MISSOURI 310 JESSE HALL COLUMBIA, MO 652111230	43-6003859	501(C)(3)	568,369		FM V		Research			
HEALTHIX INC347 W 36TH ST NEW YORK, NY 10018	45-0553664	501(c)(3)	143,025		FM∨		Research			

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MOOGSENECA ST JAMISON RD E AURORA,NY 14052	45-3302264	-	17,500		FMV		Research			
CCAT OBSERVATORY INC 508 SPACE SCIENCES BLDG ITHACA,NY 14853	45-4104640	501(C)(3)	545,079		FM∨		Research			
ORGANIC GROWERS (OGRISN)1124 COUNTRY RD 38 BRAINBRIDGE,NY 13733	45-4134508	501(C)(3)	61,767		FMV		Research			

<u>Form 990,Schedule I, Par</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
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AUDIENCE VIEWPOINTS CONSULTING13148 ROUNDING RUN CIR HERNDON,VA 20171	45-5500148	-	69,347		FM∨		Research				
NORTH DAKOTA STATE UNIVERSITYDEPT 4000 PO BOX 6050 FARGO,ND 58105	45-6002439	ND	55,255		FM∨		Research				
PANSS INSITUTE3 PARK AVE 37TH FLOOR NEW YORK, NY 10016	46-1248144	501(c)(3)	11,181		FMV		Research				

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RUTGERS THE STATE UNIVERSITY225 WARREN ST NEWARK,NJ 07103	46-2354111	NJ	198,001		FM∨		Research			
YOUV LABS INC245 W 120TH ST STE 3 NEW YORK, NY 10027	46-4125267	N/A	50,000		FM∨		Research			
GRAPHIKA INC (FRMR MORNINGSIDE ANALYTICS)116 W 23RD ST 5TH FL NEW YORK, NY 10011	46-4386048	-	100,294		FM∨		Research			

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B&D ENGINEERING AND CONSULTING LLC7419 STATE HIGHWAY 789 LANDER,WY 82520	46-5624420	-	69,041		FMV		Research			
SOUTH DAKOTA STATE UNIVERSITYADMIN 133 BOX 2201 BROOKINGS,SD 57007	46-6000364	SD	163,027		FM∨		Research			
CREIGHTON UNIVERSITY HIXSON LIED SCIENCE BLGD OMAHA,NE 68178	47-0376583	501(c)(3)	91,718		FM∨		Research			

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UNIVERSITY OF KANSAS CENTER FOR2385 IRVING HILL ROAD LAWRENCE,KS 66044	48-0680117	501(c)(3)	209,272		FMV		Research			
KANSAS STATE UNIVERSITY2 FAIRCHILD HALL MANHATTAN,KS 665061103	48-0771751	KS	38,681		FMV		Research			
UNIVERSITY OF KANSAS MEDICAL CENTERMSN 1039 3901 RAINBOW BLVD KANSAS,KS 66160	48-1108830	501(c)(3)	36,425		FM∨		Research			

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LIONSHARE MARKETING ING7830 BARTON LENEXA,KS 66214	48-1175473	N/A	6,600		FMV		Research			
NEIGHBORHOOD LEGAL SERVICES INC237 MAIN ST STE 400 BUFFALO,NY 14203	51-0198935	501(C)(3)	37,186		FMV		Research			
DELAWARE STATE UNIVERSITY1200 N DUPONT HIGHWAY DOVER, DE 19901	51-0305893	DE	129,321		FMV		Research			

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UNIVERSITY OF DELAWARE 210 HULLIHEN HALL NEWARK,DE 197161551	51-6000297	DE	78,084		FM∨		Research			
JOHNS HOPKINS UNIV APPLIED PHYSICS LAB LLC 11100 JOHN HOPKINS ROAD LAUREL,MD 20723	52-0595110	501(C)(3)	175,574		FM∨		Research			
AMERICAN BIRD CONSERVANCY (ABC)PO BOX 249 THE PLAINS,VA 20198	52-1501259	501(C)(3)	45,256		FMV		Research			

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INT'L SERV FOR THE ACQ OF AGRI-BIOTECH APP105 LELAND LAB ITHACA,NY 14853	52-1740743	501(C)(3)	72,064		FMV		Research				
J CRAIG VENTER INSTITUTE9704 MED CTR DR ROCKVILLE, MD 20850	52-1842938	501(C)(3)	131,936		FMV		Research				
UNIVERSITY OF MARYLAND3112 LEE BLDG COLLEGE PARK, MD 207425141	52-6002033	MD	163,744		FMV						

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GEORGE WASHINGTON UNIVERSITY44983 KNOLL SQUARE ASHBURN,VA 20147	53-0196584	501(C)(3)	26,155		FM∨		Research			
GEORGETOWN UNIVERSITY37TH O ST NW WASHINGTON,DC 20057	53-0196603	501(C)(3)	452,360		FMV		Research			
EVIDERA INC7101 WISCONSIN AVE 600 BETHESDA,MD 20814	54-1759539	N/A	128,448		FMV		Research			

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UNIVERSITY OF VIRGINIA PO BOX 400195 CHARLOTTESVILLE,VA 22904	54-6001796	VA	84,836		FMV		Research			
VA POLYTECHNIC INSTITUTE & STATE UNIVERSITY300 TURNER ST NW BLACKSBURG, VA 24060	54-6001805	501(C)(3)	81,660		FMV		Research			
NATIONAL INSTITUTE OF STATISTICAL SCIENCESPO BOX 14006 RSRCH TRIANGLE PARK,NC 27709		501(C)(3)	32,436		FMV		Research			

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NC AGRICULTURAL & TECHNOLOGY STATE UNIV 1601 E MARKET ST GREENSBORO,NC 27411	56-6000007	501(C)(3)	52,046		FM∨		Research			
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL9201 UNIV CITY BLVD CHARLOTTE,NC 28223	56-6001393	NC	136,649		FM∨		Research			
FERMI NATIONAL ACCELERATOR LABORATORYPO BOX 500 MS 112 BATAVIA,IL 60510	57-1239010	501(C)(3)	30,000		FM∨		Research			

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CLEMSON UNIVERSITY300 BRACKETT HALL CLEMSON,SC 296345702	57-6000254	501(C)(3)	58,220		FMV		Research			
EMORY UNIVERSITY954 GATEWOOD RD NE ATLANTA,GA 303294208	58-0566256	501(c)(3)	140,468		FMV		Research			
UNIVERSITY OF GEORGIA RESEARCH FDN INC200 DW BROOKS DR ATHENS, GA 30602	58-1353149	501(C)(3)	121,602		FMV		Research			

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UNIVERSITY OF MIAMIPO BOX 405803 MIAMI,FL 30384	59-0624458	501(c)(3)	109,501		FM∨		Research			
UNIVERSITY OF CENTRAL FLORIDA12424 RESEARCH PKWY ORLANDO,FL 32826	59-6211832	501(c)(3)	12,473		FMV		Research			
UNIVERSITY OF KENTUCKY RESEARCH109 KINKEAD HALL LEXINGTON, KY 405060057	61-6033693	501(c)(3)	228,618		FMV		Research			

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RHODES COLLEGE2000 NORTH PARKWAY MEMPHIS,TN 381121690	62-0476301	501(C)(3)	22,558		FMV		Research			
VANDERBILT UNIVERSITY MEDICAL3319 WEND AVE STE 800 NASHVILLE,TN 37203	62-0476822	501(c)(3)	288,183		FMV		Research			
UNIVERSITY OF TENNESSEE2621 MORGAN CIR DR KNOXVILLE,TN 379964530	62-6001636	TN	189,058		FMV		Research			

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CARDIOLOGY ASSOCIATES OF MOBILE INC3715 DAUPHIN ST STE 4400 MOBILE,AL 33608	63-0889615	N/A	5,200		FM∨		Research			
ALABAMA A&M UNIVERSITYPATTON HALL ROOM 316 NORMAL,AL 35762	63-6001097	501(C)(3)	14,052		FM∨		Research			
THE UNIVERSITY OF SOUTHERN MISSISSIPPI 118 COLLEGE DRIVE HATTIESBURG,MS 39406	64-6000818	501(C)(3)	26,791		FMV		Research			

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EDU INC6900-29 DANIELS PKWY FORT MYERS,FL 33912	65-0434251	-	30,000		FM∨		O ther			
USDA-ARS600 E MERMAID LANE WYNDMOOR,PA 190380598	72-0564834	FEDERAL	1,057,700		FMV		Research			
OKLAHOMA CITY UNIVERSITY2501 N BLACKWELDER OKLAHOMA CITY,OK 73106	73-0579265	501(C)(3)	18,589		FM∨		Research			

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OKLAHOMA MEDICAL RESEARCH825 NE 13TH STREET OKLAHOMA CITY,OK 73104	73-0580274	501(c)(3)	25,946		FM∨		Research			
OKLAHOMA STATE UNIVERSITY203 WHITEHURST HALL STILLWATER,OK 74078	73-6017987	ок	103,389		FM∨		Research			
THE METHODIST HOSPITAL FOUNDATION PO BOX 4384 HOUSTON,TX 77210	74-1180155	501(c)(3)	34,251		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER 7703 FLOYD CURL DR SAN ANTONIO,TX 78229	74-1586031	501(c)(3)	13,748		FMV		Research			
UNIVERSITY OF TEXAS- SAN ANTONIOONE UTSA CIRCLE SAN ANTONIO,TX 78249	74-1717115	501(c)(3)	7,479		FMV		Research			
TEXAS ENGINEERING EXPERMENT STATION1470 WILLIAM PKWY COLLEGE STA,TX 77845	74-1974733	501(c)(3)	7,997		FM V		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NATIONAL JEWISH HEALTH 1400 JACKSON ST DENVER,CO 80205	74-2044647	501(c)(3)	110,666		FM∨		Research			
THE AZ BOARD OF REGENTS UNIVERSITY OF AZPO BOX 210158 TUCSON,AZ 857210158	74-2652689	501(C)(3)	216,979		FMV		Research			
UNIVERSITY OF TEXAS AT AUSTIN24 GUADALAUPE PO BOX 7398 AUSTIN,TX 78713	74-6000203	ТХ	343,736		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS A&M UNIVERSITY 400 HARVEY MITCHELL PKWY COLL STA,TX 77845	74-6000531	501(C)(3)	152,680		FM∨		Research			
TEXAS A & M AGRILIFE RESEARCH2147 TAMU COLLEGE STATION,TX 78743	74-6000541	ТХ	227,439		FM∨		Research			
UNIVERSITY OF TEXAS MEDICAL301 UNIV BLVD BSB 1106 GALVESTON,TX 77555	74-6000949	TX	84,392		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF TEXAS MD ANDERSON1515 HOLCOMBE BLVD HOUSTON,TX 77030	74-6001118	ТХ	14,349		FM∨		Research			
SOUTHERN METHODIST UNIVERSITYPO BOX 750302 DALLAS,TX 752750302	75-0800689	501(C)(3)	70,524		FM∨		Research			
THE UNIVERSITY OF TEXAS AT DALLAS800W CAMPBELL RD MP15 RICHARDSON,TX 75080	75-1305568	501(C)(3)	25,816		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
TEXAS TECH UNIVERSITY 203 HOLDEN HALL LUBBOCK,TX 794091035	75-6002622	501(C)(3)	16,778		FM∨		Research			
THE UNIVERSITY OF TEXAS SOUTHWESTER5323 HARRY HINES BLVD DALLAS,TX 78590	75-6002868	ТХ	144,451		FM∨		Research			
NEW YORK GENOME CENTER INC101 AVE OF THE AMERICAS NEW YORK, NY 10013	80-0631734	501(c)(3)	916,989		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SATHGURU INC88 BROAD STREET BOSTON,MA 02110	80-0664005	-	1,608,631		FM∨		Research			
MONTANA STATE UNIVERSITY309 MONTANA HALL BOZEMAN,MT 59717	81-6010045	МТ	51,875		FMV		Research			
UNIVERSITY OF IDAHO875 PERIMETER DR MS 3020 MOSCOW,ID 83844	82-6000945	ID	5,992		FM∨		Research			

<u>Form 990,Schedule I, Pai</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
COLORADO STATE UNIVERSITY2002 CAMPUS DELIVERY FORT COLLINS,CO 80523	84-6000545	СО	8,133		FMV		Research				
NATIONAL CENTER FOR GENOME RESOURCES2935 RODEO PARK DR E SANTE FE,NM 87505	85-0418280	501(C)(3)	77,793		FMV		Research				
UNIVERSITY OF NEW MEXICO1 UNIV OF NM ALBUQUERQUE,NM 87131	85-6000642	NM	28,767		FMV		Research				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BRIGHAM YOUNG UNIVERSITYA-285 ASB CAMPUS DR PROVO,UT 84602	87-0217280	501(C)(3)	15,997		FMV		Research			
METHODIST HOSPITAL 6670 BERTNER AVE HOUSTON,TX 77030	87-0721923	501(c)(3)	284,438		FMV		Research			
UNIVERSITY OF UTAH201 S PRSIDNTS CIR SALT LAKE CITY,UT 84112	87-6000525	UT	247,171		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HONEYBEE ROBOTICS LTD P O BOX 27420 BROOKLYN,NY 11202	88-0193033	-	37,984		FMV		Research			
UNIVERSITY OF ALASKA- ANCHORAGE3211 PROVIDENCE DR ANCHORAGE, AK 995084614	92-6000147	AK	20,968		FM V		Research			
REED COLLEGE3203 SE WOODSTOCK BLVD PORTLAND,OR 97202	93-0386908	501(C)(3)	86,092		FMV		Research			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MALIN SPACE SCIENCE SYSTEMS (MSSS)PO BOX 910148 SAN DIEGO, CA 921910148	93-1046372	-	7,979		FMV		Research			
SAN FRANCISCO STATE UNIVERSITY1600 HOLLOWAY AVE SAN FRANCISCO,CA 94132	93-1137247	501(C)(3)	127,406		FMV		Research			
OREGON HEALTH & SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK PORTLAND,OR 97239	93-1176109	501(c)(3)	61,192		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KAISER FOUNDATION RESEARCH INSTITUT1800 HARRISON ST 16TH FL OAKLAND,CA 94612	94-1105628	501(c)(3)	31,682		FMV		Research			
REGENTS OF THE UNIV OF SANTA CRUZ1156 HIGH ST SANTA CRUZ,CA 950641077	94-1539563	N/A	13,436		FMV		Research			
REGENTS OF THE UNIVERSITY OF CALIFORNIA 2150 SHATTUCK AVE 313 BERKELEY, CA 94720	94-6002123	501(C)(3)	211,160		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REGENTS OF THE UNIV OF CALIFORNIA-DAVIS1850 RESEARCH PARK DR 300 DAVIS,CA 95618	94-6036494	501(C)(3)	943,259		FM∨		Research			
CALIFORNIA INSTITUTE OF TECHNOLO GY1200 E CALIFORNIA BLVD PASADENA,CA 91125	95-1643307	501(C)(3)	243,304		FM∨		Research			
CEDARS SINAI MEDICAL CENTER8700 BEVERLY BLVD W HOLLYWOOD,CA 90048	95-1644600	501(c)(3)	144,349		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CAL POLY CORPORATION BUILDING 38 102 SAN LUIS OBISPO, CA 93407	95-1648180	501(C)(3)	9,999		FMV		Research			
MICROSEMI FREQUENCY AND TIME CORPORATION 34 TOZER ROAD BEVERLY, MA 019155510	95-1906306	-	152,223		FMV		Research			
REGENTS OF THE UNIVERSITY OF CALIFORNIA5171 CALIFORNIA AVE 150 IRVINE,CA 92697	95-2226406	501(C)(3)	60,032		FM∨		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REGENTS OF THE UNIVERSITY OF CALIFORNIA9500 GILMAN DR LA JOLLA, CA 920930934	95-2872494	501(C)(3)	196,103		FMV		Research			
PVHMC FOUNDATION1798 N GAREY AVENUE POMONA,CA 91767	95-3403287	501(c)(3)	11,397		FMV		Research			
REGENTS OF THE UNIVERSITY OF CALIFORNIA11000 KINROSS AVE LOS ANGELES, CA 90095	95-6006143	501(C)(3)	47,772		FMV		Research			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
REGENTS OF THE UNIVERSITY OF CALIFORNIA 32 27 CHEADLE HALL SANTA BARBARA, CA 93106	95-6006145	501(C)(3)	905,297		FMV		Research			
THE PARENT NETWORK OF THE CAPITAL REGION1190 TROY-SCHENECTADY RD LATHAM,NY 12110	22-2717094	501(C)(3)	70,466		FMV					
THE PARENT NETWORK OF WNY1000 MAIN ST BUFFALO,NY 14202	22-2717094	501(C)(3)	106,279		FMV					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RESEARCH FOUNDATION OF THE STATE UNIVERSITY OF NY402 CROFTS HALL BUFFALO,NY 14260	14-1368361	501(c)(3)	82,953		FMV					
RUTGERS THE STATE UNIVERSITY OF NEW JERSEY3 RUTGERS PLAZA NEW BRUNSWICK, NJ 08901	22-6001086	501(C)(3)	15,934		FMV		OTHER			
UNIVERSITY OF NEW HAMPSHIRE51 COLLEGE RD 2ND FL DURHAM,NH 03824	02-6000937	NH	14,453		FMV		OTHER			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RUTGERS THE STATE UNIVERSITY OF NEW JERSEY3 RUTGERS PLAZA NEW BRUNSWICK, NJ 08901	22-6001086	501(C)(3)	319,723		FM∨					
THE REGENTS OF THE UNIVERSITY OF MINNESOTA 200 OAK STREET SE 450 MINNEAPOLIS, MN 55455	41-6007513	ми	12,524		FM∨		OTHER			
UNIVERSITY OF NEBRASKA MEDICAL5100 NEBRASKA MEDICAL CENTER OMAHA,NE 68198	47-0049123	NE	89,572		FM∨					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF MARYLAND3112 LEE BLDG COLLEGE PARK,MD 20742	52-6002033	MD	9,231		FMV		OTHER			
UNIVERSITY OF MARYLAND EASTERN SHORE11868 ACADEMIC OVAL PRINCESS ANNE, MD 21853	52-6002033	501(C)(3)	139,414		FMV					
STANFORD UNI BRD OF LELAND STANFORD JR UNI 3160 PORTER DRIVE PALO ALTO,CA 94304	94-1156365	501(C)(3)	240,927		FMV		OTHER			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF VERMONT 340 WATERMAN BLDG BURLINGTON,VT 05405	03-0179440	VT	12,820		FM∨		OTHER			
TUFTS UNIVERSITY136 HARRISON AVENUE BOSTON,MA 02111	04-2103634	501(C)(3)	18,508		FM∨		OTHER			
UNIVERSITY OF MASSACHUSETTS70 BUTTERFIELD TERRACE AMHERST, MA 01003	04-3167352	МА	25,829		FMV		OTHER			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE GENERAL HOSPITAL CORP DBA MA GEN HOSP55 FRUITE STREET BOSTON,MA 02114	04-3230035	501(C)(3)	27,550		FM∨		OTHER			
UNIVERSITY OF CONNECTICUT (UCONN) 438 WHITNEY RD EXT 1133 STORRS,CT 06269	06-0772160	СТ	21,837		FMV		OTHER			
CORNELL COOPERATIVE EXTENSION SUFFOLK CTY 423 GRIFFING AVE 100 RIVERHEAD, NY 11901	11-6081424	501(C)(3)	48,354		FM∨		OTHER			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
RSRCH FDN CUNY ON BEHALF OF LEHMAN COLLEGE230 W 41ST STREET NEW YORK, NY 10036	13-1988190	501(C)(3)	14,044		FMV		OTHER			
COLUMBIA UNIVERSITY 615 W 131 ST MC NEW YORK, NY 10027	13-5598093	501(C)(3)	76,696		FMV		OTHER			
RSRCH FDN FOR THE STATE UNIV OF NEW YORK PO BOX 9 ALBANY,NY 12201	14-1368361	501(C)(3)	75,380		FM V		OTHER			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
CORNELL COOPERATIVE EXTENSION DUTCHESS CTY2715 US ROUTE 44 1 MILLBROOK, NY 12545	14-6036882	501(C)(3)	74,365		FMV		OTHER		
SYRACUSE UNIVERSITY 113 BOWNE HALL SYRACUSE,NY 13244	15-0532081	501(C)(3)	265,095		FM∨		OTHER		
UNIVERSITY OF ROCHESTER515 HYLAN BLDG 270140 ROCHESTER,NY 14627	16-0743209	501(C)(3)	90,246		FM∨		OTHER		

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
USDA-ARS600 E MERMAID LANE WYNDMOOR,PA 19038	72-0564834	FEDERAL	8,571		FMV		OTHER			
STANFORD UNIVERSITY BECKMAN CENTER ROOM B062 STANFORRD, CA 943055301	95-1642394	501(C)(3)	43,678		FMV					
COLORADO STATE UNIVERSITY601 SOUTH HOWES ST 408 UNIV SVC C FORT COLLINS, CO 805232002	84-6000545	со	339,785		FMV					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
UNIVERSITY OF FLORIDA 219 GRINTER HALL GAINESVILLE,FL 32826	59-2924021	FL	139,720		FM∨					
PENNSYLVANIA STATE UNIVERSITY110 TECH CTR BLDG UNIVERSITY PARK,PA 168027000	24-6000376	501(C)(3)	55,972		FMV		OTHER			
TRUSTEES OF THE UNIVERSITY OF PAPO BOX 785541 PHILADELPHIA,PA 19178	23-1352685	501(C)(3)	191,507		FM∨					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CORNELL COOPERATIVE EXTENSION YATES COUNTY417 LIBERTY STREET PENN YAN,NY 14527	16-6072900	501(C)(3)	22,999		FMV		OTHER			
NEW YORK UNIVERSITY25 WEST 4TH STREET 4TH FLOOR NEW YORK,NY 10012	13-5596826	501(C)(3)	7,527		FMV					

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DLN: 93493134073186

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Cornell University

Employer identification number

15-0532082

Pa	rt I Questions Regarding Compensation	1	·			
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	\vdash	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	<u>~</u>	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Exec			2	Yes	
			Theorem, regarding the reality effection in the 14		res	
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all th used by a related organization to establish compens	at appl	y Do not check any boxes for methods			
	✓ Compensation committee	厂	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt?	4a		No
b	Participate in, or receive payment from, a supplemen	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizat	ions m	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a		Νo
ь	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7	Yes	
8	Were any amounts reported in Form 990, Part VII, p					
	subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	rebutt	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) 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 o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns (B)(ı)-(D)	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits		column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

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
2	PAYMENT OR REIMBURSEMENT OF THE EXPENSES DESCRIBED IN 1A IS COVERED BY THE UNIVERSITY'S TRAVEL POLICIES OR SPECIFIC EMPLOYMENT CONTRACTS AND INCLUDES THE UNIVERSITY'S IMPLEMENTATION OF AN ACCOUNTABLE PLAN THERE IS OCCASIONALLY UNIT DISCRETION THE UNIVERSITY PROVIDES THE EXPENSES LISTED IN SCHEDULE J, PART I, LINE 1A TO DAVID J SKORTON, PRESIDENT AND LAURIE GLIMCHER, DEAN AND PROVOST OF MEDICAL AFFAIRS WHERE BENEFITS ARE TAXABLE, SUCH AMOUNTS ARE INCLUDED AS TAXABLE WAGES ON THEIR RESPECTIVE FORMS W-2
, ,	THE PRESIDENT PARTICIPATES IN A BOARD AUTHORIZED DEFERRED COMPENSATION AGREEMENT UNDER IRC SECTION 457(F) NO AMOUNTS WERE PAID TO THE PRESIDENT UNDER THE IRC SECTION 457(F) PLAN DURING 2014
,	BONUS PAYMENTS ARE PROVIDED TO INDIVIDUALS IN RECOGNITION OF ACCOMPLISHMENTS OF SPECIFIC GOALS OR OVERALL PERFORMANCE SCHEDULE J, PART II, LINE 7 HARRY KATZ STARTED HIS TERM AS INTERIM PROVOST ON NOVEMBER 14, 2014 PRIOR TO SERVING AS INTERIM PROVOST, HARRY KATZ SERVED AS THE DEAN OF THE SCHOOL OF INDUSTRIAL AND LABOR RELATIONS THE BALANCE OF COMPENSATION REPORTED ON THE FORM 990 PART VII AND SCHEDULE J PART II IS THE COMPENSATION PAID FOR HIS SERVICES AS THE DEAN OF INDUSTRIAL AND LABOR RELATIONS AND FOR HIS TWO MONTHS SERVING AS INTERIM PROVOST
	THE CORNELL BOARD INCLUDES FACULTY, STAFF AND STUDENTS FACULTY MEMBERS ELECT TWO (2) MEMBERS, THE STUDENT BODY ELECTS TWO (2) MEMBERS, THE 'EMPLOYEE ASSEMBLIES' ELECT ONE (1) MEMBER

Schedule J (Form 990) 2014

Software ID: Software Version:

EIN: 15-0532082

Name: Cornell University

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

Form 990, Schedule J, Pa	art II - Officers, Direc	ctors, Trustees, Re	y Employees, and	i nighest compens	ateu Employees	•	
(A) Name and Title	(B) Breakdown o (i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	GC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
David J Skorton, President & Ex Officio Trustee	(I) 872,800 (II) 0		14,800	26,000	110,468 0	1,644,328	0
Barbara A Baird, Trustee/Prof of Chemistry	(I) 182,884 (II) 0	0	63,682 0	25,104 0	21,124 0	292,794 0	0
Alan L Mittman, Trustee/Dir Workforce Policy	(I) 133,356 (II) 0	0	200	14,063	22,259 0	169,878 0	0
Mariana F Wolfner, Trustee/Prof Molecular Bio	(I) 168,997 (II) 0	0 0	15,125 0	18,883	16,2 4 1 0	219,246 0	0
Joanne M DeStefano, VP of Finance & CFO	(I) 453,881 (II) 0	21,587	22,046	38,505 0	16,015 0	552,034 0	0
W Kent Fuchs, Provost (through 11/14)	(I) 592,216 (II) 0	0	24,993 0	26,000 0	32,267 0	711,087 0	0 0
Harry Katz, Interim Provost (from 11/14)	(I) 406,569 (II) 0	ő	6,715 0	47,706 0	24,749 0	485,739 0	0 0
Laurie H Glimcher, Dean and Provost Med Affrs	(I) 813,349 (II) 0	Ö	692,127 0	36,150 0	22,096 0	1,563,722 0	0
James J Mingle, Univ Counsel & Secretary	(I) 442,899 (II) 0	0	30,561 0	26,000 0	24,001 0	543,092 0	0 0
Albert J Edwards, Chief Investment Officer	(I) 570,167 (II) 0	0	0 0	26,000 0	23,476 0	1,121,676 0	0
Daniel Knowles MD, Chair & Professor of Pathology	(I) 426,630 (II) 0	ő	1,456,909 0	36,150 0	44,297 0	1,963,986 0	0
Robert A Buhrman, Sr VP for Research	(I) 370,102 (II) 0	ő	17,500 0	26,000 0	15,255 0	428,857 0	0
Stephen M Cohen, Executive Vice Provost	(I) 862,268 (II) 0	Ö	84,967 0	36,150 0	44 ,938 0	1,028,323	0 0
Zev Rosenwaks MD, Director Cohen Cntr Rprdc Med	(I) 313,287 (II) 0	0 0	5,284,036 0	36,150 0	33,951 0	5,667,424 0	0 0
Hey-Joo Kang MD, Prof Obs Gyn & Reproduct Med	(I) 87,436 (II) 0	0	3,432,763 0	15,150 0	32,749 0	3,568,098 0	0 0
Steven D Spandorfer MD, Prof Obs Gyn & Reproduct Med	(I) 97,272 (II) 0	1 "1	3,356,549 0	36,150 0	36,331 0		0 0
Theodore Schwartz MD, Prof of Neurological Surgery	(I) 229,947 (II) 0	0	3,163,167 0	25,650 0	34,781 0	3,453,545 0	0
Pak H Chung MD, Prof Obs Gyn & Reproduct Med	(I) 103,521 (II) 0	0	3,253,868 0	36,150 0	32,616 0	3,426,155 0	0
Anthony Gotto MD, Fmr Ofcr/Dean of WMC/Provost	(I) 769,154 (II) 0	0	4,944 0	409,320	182,227	1,365,645	0
Rosemary J Avery, Fmr Trustee/Chair Dept Mgmt	(I) 229,754 (II) 0	0	77,722 0		12,893 0	358,874 0	0

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

(A) Name and Title	((B) Breakdown of (i) Base Compensation	kdown of W-2 and/or 1099-MISC compensation (ii) Bonus & (iii) Other Incentive reportable compensation compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
Nelson G Hairston, Fmr Trustee/Prof Envrnm Sci	(I) (II)	179,665 0	0 0	2,594 0	18,413	20,341	221,013	0
Beth McKinney, Fmr Trustee/Dir Wellness Prgm	(I) (II)	82,438 0	0 0	0	8,806 0	18,764 0	110,008	0 0

DLN: 93493134073186

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

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.

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

Employer identification number

	ne of the organization									Emp	ою уег та	entifica	tion num	рег	
	<u> </u>									15-	-05320	8 2			
Р	art I Bond Issues	1		1											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Descriptio) Description of purpose		feased	(h) beha ıss	alf of		Pool ncing
										Yes	No	Yes	No	Yes	No
A	TCIDA (SERIES 2008A 70 MILLION PAR)	16-1214039	890099EQ3	06-23-2010	75,30			UND 2008 B 0/2008)	ONDS		Х		Х		Х
В	DASNY (SERIES 1990B - 5045 MILLION PAR)	14-6000293	649905ZH2	05-03-2010	55,99			REFUND 1990 BONDS (12/19/1990)			Х		Х		Х
с_	DASNY (SERIES 2004A&B - 921 MILLION PAR)	14-6000293	64983TRF2	05-27-2004	92,10			SUPPLEMEN DRMATION	NTAL		×		Х		Х
D	DASNY (SERIES 2006A - 250 MILLION PAR)	14-6000293	64983QL98	05-11-2006	258,47			SEE SUPPLEMENTAL INFORMATION			Х		Х		Х
Pa	rt III Proceeds						I						ļ. l		
					<u> </u>	Δ		В	3		С			D	
1	A mount of bonds retired					7,430,	,000	-	13,200,000		20,600	0,000		92,	205,000
_2	A mount of bonds legally defe	ased					0		0			0			0
3	Total proceeds of issue					75,307	,598	į	55,997,134		92,663	3,883		261,	813,216
4	Gross proceeds in reserve fu	nds					0		0			0			0
5	Capitalized interest from proc	ceeds					0 0				0			0	
6	Proceeds in refunding escrow	/S					0 0				0	0		0	
7	Issuance costs from proceed	ls				520,	,432		0		842	2,345		1,0	698,799
8	Credit enhancement from pro	ceeds					0		0			0			0
9	Working capital expenditures	from proceeds					0		0			0			0
10	Capital expenditures from pro	oceeds					0		0		50,376	5,296		79,	584,039
11	O ther spent proceeds					74,787,	,166	Ī	55,997,134		41,445	5,242		180,	530,378
12	O ther unspent proceeds						0		0			0			0
13	Year of substantial completion			20	10		20	10	20	006			2008		
					Yes	No)	Yes	No	Yes	N	0	Yes		No
14	Were the bonds issued as pai	rt of a current refund	ling issue?		X			x		X			X		
15	Were the bonds issued as part of an advance refunding issue?				Х			Х		X				Х	
16	Has the final allocation of pro	ceeds been made?			Х			Х		Х	Ī		Х		
17	Does the organization mainta allocation of proceeds?	ın adequate books a	and records to supp	port the final	Х			Х		Х			Х		

Part IIII Private Business Use

			Α		<u> В</u>		<u> </u>)
		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?		×		х		×		×
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X		X		X	
=						•			

Schedule K (Form 990) 2014

Part III Private Business Use (Continued)

		Α		В		С			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?	Х		Х		Х		Х	
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?	×		Х		X		x	
С	Are there any research agreements that may result in private business use of bond-financed property?	Х		Х		Х		х	
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?	Х		Х		Х		х	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 510 %		0 130 %		0 020 %		0 050 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 590 %		0 040 %		0 030 %		0 020 %
6	Total of lines 4 and 5		1 100 %		0 170 %		0 050 %		0 070 %
7	Does the bond issue meet the private security or payment test?		Х		Х		Х		Х
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?		х		х		х		х
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of				•				
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		×		х		Х		Х
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?	Х		Х		Х		х	
Do	-TV Arbitrage								

Part IV Arbitrage

		Yes	No	Yes	No	Yes	No	Yes	No								
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		Х		Х		Х								
2	If "No" to line 1, did the following apply?																
а	Rebate not due yet?		Х		Х		Х		Х								
ь	Exception to rebate?		×	Х			Х		Х								
С	No rebate due?	Х			Х	Х		Х									
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed				•		•	•									
3	Is the bond issue a variable rate issue?		Х		Х	Х			Х								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		х		Х		Х		х								
b	Name of provider	0		0		0											
С	Term of hedge																
d	Was the hedge superintegrated?																
e	Was the hedge terminated?																
		•	•	•	•	•	Sc	Schedule K (Form 990) 2014									

Α

В

С

		A		В	В			D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		x		X
ь	Name of provider	0		0	0		0		
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х		X		x		x
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		x	

Part V Procedures To Undertake Corrective Action

	Α	Α		В		С		
	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		X		X		Х	

	Part VI Supplemental Info	ormation. Provide additional information for responses to questions on Schedule K (see instructions).
ĺ	Return Reference	Explanation

SERIES 2008A

PART I REFUND 2008 TCIDA BONDS (ISSUED JANUARY 30,2008) PART IV, QUESTION 2 ARBITRAGE REBATE COMPUTATION COMPLETED 9/12/2012

Return Reference	Explanation									
SERIES 1990B	PART IV, QUESTION 2 SERIES 1990B BONDS REFINANCE EXISTING DEBT WITH NO NEW MONEY COMPONENT EXEMPT FROM REBATE CALCULATION									

Return Reference	Explanation										
2004 BONDS	PART I REFUNDED 1998 TAX EXEMPT COMMERCIAL PAPER (\$40,805,000) AND FINANCED NEW PROJECTS PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 7/24/2007										

Return Reference	Explanation										
SERIES 2006	PART I REFUNDED 1996 BONDS (63,717,543 DATE OF ISSUE 6/20/1996), REFUNDED TAXABLE CP (\$40,000,000), REFUNDED TAX EXEMPT CP (\$75,000,000), AND FINANCED CAPITAL CONSTRUCTION OF THE ITHACA AND WEILL MEDICAL COLLEGE CAMPUSES PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 5/31/2008										

DLN: 93493134073186

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

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.

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

Inspection Employer identification number

	Cornell University					15-0532082									
D:	art I Bond Issues								113	03320	02				
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Description of purpose		(g) De	(g) Defeased		On alf of uer	(i) Pool financing		
									Yes	No	Yes	No	Yes	No	
Α	DASNY (2009A - 305 MILLION PAR)	14-6000293	649905DC7	04-22-2009	312,1		SEE SUPPLEMENTAL INFORMATION			X		X		X	
В	DASNY (SERIES 2010A - 285000000)	14-6000293	649905R99	06-09-2010	310,5		SEE SUPPLEMENTAL INFORMATION			Х		Х		Х	
c _	DASNY CP PROGRAM (MAY 122011 TAX CERTIFICATE)	14-6000293	64983L000	05-12-2011	59,0	00,000	FINANCE CAPITAL PROJECTS		S	Х		Х		Х	
D	DASNY (SERIES 2008B&C - 127785 MILLION PAR)	14-6000293	649905A97	05-03-2010	139,6		REFUNDED 2008 DASNY BONDS			х		Х		Х	
Pa	rt III Proceeds										ı	1			
						Α		В		С			D		
1_	1 A mount of bonds retired				23,540,0	000		6,110,000			12,670,000				
_2	A mount of bonds legally defea	sed ————————————————————————————————————					0	0			0				
_3	Total proceeds of issue				3	12,520,9	924 301,900,097		59,000,038			139,688,300			
4	Gross proceeds in reserve fun						0	0			0			0	
5	Capitalized interest from proceeds					16,444,6	,611 29,036,727		0			0			
6	Proceeds in refunding escrows						0 0		0			0 0			
7	Issuance costs from proceeds					2,307,605 2,113,328		0			770,300				
8	Credit enhancement from proc						0 0			0			0		
9	Working capital expenditures from proceeds					0	0			0					
10	Capital expenditures from proceeds				141,571,634 218,375,984		17,845,038			0					
11	Other spent proceeds			152,197,074 52,374,058		41,155,000			138,918,000						
12	O ther unspent proceeds			0		0	0 0			0	0 0				
13	3 Year of substantial completion			2011		20	2014		2013			2010			
					Yes	No	Yes	No	Yes	N	lo	Yes		No	
14	4 Were the bonds issued as part of a current refunding issue?		Х		X		Х			Х					
15	Were the bonds issued as part of an advance refunding issue?					Х		Х)	<			X	
16	Has the final allocation of proceeds been made?				Х		X		Х			Х			
Does the organization maintain adequate books and records to support the final allocation of proceeds?				Х		Х		Х			Х				
Pa	rt IIII Private Business U	se				-							•		
					A		В		С			D			
					Yes	No	Yes	No	Yes	N	lo	Yes		No	

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

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

Х

Χ

Χ

Χ

Χ

Χ

Schedule K (Form 990) 2014

Part III Private Business Use (Continued)

	Frivate Business Ose (Continueu)	1						Τ	
	i		Α		B		<u>C</u>		D
	j	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X		×		×		×	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	×		x		x		х	
С	Are there any research agreements that may result in private business use of bond-financed property?	Х		Х		х		х	
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?	Х		Х		Х		Х	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 040 %		0 %		0 010 %		0 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 050 %	0 %		0 010 %		%	
6	Total of lines 4 and 5		0 090 %		0 %		0 020 %		0 %
7	Does the bond issue meet the private security or payment test?		Х		Х		Х		Х
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?		х		х		х		х
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		×		×		×		х
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?	Х		Х		х		х	
Par	t IV Arbitrage		<u>. </u>		_				

		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		×		X		Х
2	If "No" to line 1, did the following apply?								-
а	Rebate not due yet?		X		Х		Х		Х
b	Exception to rebate?		Х		Х		Х	Х	
	No rebate due?	Х		Х		Х			Х
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed		·	•	•				
3	Is the bond issue a variable rate issue?		Х		Х	Х			Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		х		Х		Х		Х
b	Name of provider	0		0		0			
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
	Schedule K (Form 990) 2014								

		А		В	В		С		
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		x		X
b	Name of provider	0		0		0		0	
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		x		X
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		X		X		X	

Part V Procedures To Undertake Corrective Action

	Α		В		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		X		Х		X	

Part VT	Supplemental Information. Provide additional information for r	responses to questions on Schedule K (see instructions)	$\overline{}$
I GILC AT	Supplemental Information: From the additional information for t	responses to questions on senedule it (see instructions)	,.

Return Reference Explanation					
SERIES 2009	PART I REFUND \$150 MILLION OF TAX-EXEMPT CP AND FINANCE CAPITAL PROJECTS ON ITHACA AND WEILL MEDICAL COLLEGE CAMPUSES PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 4/30/2012				

Explanation
PART I REFUNDED \$50 MILLION OF TAXABLE DEBT AND FINANCED CONSTRUCTION OF A MEDICAL BUILDING ON THE WEILL MEDICAL COLLEGE CAMPUS PART III REFUNDED \$50 MILLION OF COMMERCIAL PAPER AND FINANCED NEW BUILDING AT WEILL MEDICAL CAMPUS PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 7/31/2012

Return Reference	Explanation
SERIES 1998 COMMERCIAL PAPER	PART I FINANCE CAPITAL CONSTRUCTION ON ITHACA AND WEILL MEDICAL COLLEGE CAMPUSES PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 5/12/2013

Return Reference	Explanation
SERIES 2008 B&C	PART I REFUND 2008 DASNY BONDS (ISSUED APRIL 10, 2008) PART IV, QUESTION 2 SERIES 2008 REFUNDED EXISTING BONDS WITH NO NEW MONEY COMPONENT EXEMPT FROM ARBITRAGE REBATE CALCULATION

DLN: 93493134073186

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

person

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.

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

Name of the organization **Employer identification number** Cornell University 15-0532082 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) 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 (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 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 (b) Relationship (c) (d) Loan to (e)Original (f)Balance (i)Written **(g)** In (h) with organization Purpose of or from the Approved agreement? ınterested principal due default? organization? by board or person loan amount committee? Yes Yes Τо From No Yes No No Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested (b) Relationship between (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance

interested person and the organization

Part IV Business Transactions Involving Interested Persons.						
Complete if the organization	<u>n answered "Yes" on F</u>	Form 990, Part IV, lin	e 28a, 28b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
See Additional Data Table						

Part V Supplemental Information

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

Return Reference	Explanation
	Schedule I (Form 990 or 990-F7) 2014

Additional Data

Software ID: Software Version:

EIN: 15-0532082

Name: Cornell University

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

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) Ennead Architects LLP	Trustee-Rodriguez	2,057,780	Purchase of services		No
(2) First Reserve Funds	Trustee-Macaulay	1,911,718	Distribution to Univ		No
(3) Kionix	Trustee-Galvın	698,157	Royalties Paid to Univ		No
(4) MC Partners	Trustee-Croll	518,182	Distribution to Univ		No
(5) P DeStefano	Officer-Spouse	86,245	Compensation		No
(6) R Davisson	Officer-Spouse	256,339	Compensation		No
(7) SB Ashley Management Co	Former Trustee - A shley	339,024	RE MNGT fees paid by univ		No

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DLN: 93493134073186

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OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

Corn	ell University				15-0532082			
Pa	rt I Types of Property				13-0332082			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contributior amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		_	ınts
1	Art—Works of art	Х	32	700,91	. 0 Appraisal			
2	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications	X		573,48	3 Appraisal			
5	Clothing and household goods							
6	Cars and other vehicles	X	1	5.00	0 Appraisal			
	Boats and planes			,				
8	Intellectual property							
9	Securities—Publicly traded .	Х	1,450	52,451,95	0 Appraisal			
10	Securities—Closely held stock .	Χ	7	995,69	0 Appraisal			
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous	X	2		23 Appriasal			
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .	X	1	75,00	0 Appraisal			
16	Real estate—Commercial							
17	Real estate—Other	X	1		00 Appraisal			
18	Collectibles	X	2	50,00	00 Appraisal			
	,							
20 21	Drugs and medical supplies . Taxidermy							
22	,							
	Scientific specimens							
	Archeological artifacts							
25	Other►(nputers)	Х	3	68,00	00 Appraisal			
26	Other ► (Ical Equipment)	Х	1	32,00	00 Appraisal			
27	Other► (-Capital Equipmt)	Х	51	5,116,20	8 Appraisal			
	Other►(ses)	Х	22	85,02	20 Appraisal			
29	Number of Forms 8283 received by the for which the organization completed				29			30
				_			Yes	No
30a	During the year, did the organization	receive by	contribution any property r	reported in Part I, lines	1 through 28, that			
	ıt must hold for at least three years f	rom the dat	e of the initial contribution,	, and which is not requii	ed to be used			
	for exempt purposes for the entire ho	lding period	17			30a		No
b	If "Yes," describe the arrangement i	n Part II						
31	Does the organization have a gift acc		,	•		31	Yes	<u> </u>
32a	Does the organization hire or use thi contributions?	•	r related organizations to s	olicit, process, or sell r	oncash • • •	32a		No
ь	If "Yes," describe in Part II							
33	If the organization did not report an a	amount in co	olumn (c) for a type of prop	erty for which column (a	a) is checked,			

Page 2

Schedule M (Form 990) (2014)

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 (Form 990) (2014)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493134073186

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization
Cornell University

Employer identification number
15-0532082

Return Reference	Explanation
FORM 990, PART III, LINE 1	ORGANIZATION'S MISSION THE ORGANIZATION'S MISSION IS TO PROVIDE UNDERGRADUATE AND GRADUATE DEGREE PROGRAMS, DISCOVER, PRESERVE, AND DISSEMINATE KNOWLEDGE, PRODUCE CREATIVE WORK AND PROMOTE A CULTURE OF BROAD INQUIRY

Return Reference	Explanation
FORM 990, PART III, LINE 4D	DESCRIPTION OF OTHER PROGRAM SERVICES OTHER PROGRAM SERVICE ACCOMPLISHMENTS INCLUDE, BUT ARE NOT LIMITED TO, THE LAND-GRANT MISSION, ACADEMIC CONFERENCES, PUBLICATIONS AND ROOM AND BOARD FOR THE STUDENT BODY

Return Reference	Explanation
FORM 990, PART VI, LINE 4	SIGNIFICANT CHANGES TO GOVERNING DOCUMENTS THE ONLY CHANGES MADE TO THE UNIVERSITY BY-LAWS WERE APPROVED BY THE BOARD ON JANUARY 30, 2015 AMENDMENTS TO ARTICLE III, SECTION 1, ADDED LANGUAGE TO DELEGATE "OVERSIGHT" (BUT NOT FINAL GOVERNANCE AUTHORITY) TO A BOARD OF OVERSEERS FOR CORNELL NY C TECH AND THE DESIGNATION OF "STANDING COMMITTEES" TO COMMITTEES OF THE BOARD AMENDMENTS TO ARTICLE III, SECTION 12 ADDED LANGUAGE TO ESTABLISH A COMMITTEE OF THE BOARD - THE COMMITTEE ON COMPENSATION

Return Reference	Explanation
FORM 990, PART VI, LINE 7A	POWER TO ELECT OR APPOINT MEMBERS PURSUANT TO THE UNIVERSITY'S CHARTER, THE BOARD OF TRUSTEES CONSISTS OF 64 MEMBERS OF THIS NUMBER, THE GOVERNOR, THE TEMPORARY PRESIDENT OF THE SENATE, THE SPEAKER OF THE ASSEMBLY AND THE PRESIDENT OF THE UNIVERSITY ARE EX OFFICIO TRUSTEES DURING THEIR TERMS OF OFFICE FURTHER, THE ELDEST LINEAL DESCENDANT OF EZRA CORNELL IS APPOINTED AS A TRUSTEE FOR HIS OR HER LIFE THE GOVERNOR ALSO APPOINTS THREE TRUSTEES ADDITIONALLY, ACADEMIC FACULTY APPOINT TWO MEMBERS, THE STUDENT BODY APPOINTS TWO MEMBERS, THE NON-ACADEMIC STAFF APPOINT ONE MEMBER AND THE ALUMNI ELECT EIGHT MEMBERS ALL REMAINING TRUSTEES ARE ELECTED BY THE BOARD OF TRUSTEES

Return Reference	Explanation
11B	PROCESS USED TO REVIEW THE FORM 990 IN ADVANCE OF FILING, THE UNIVERSITY PRESENTS A DRAFT OF FORM 990 TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AT THEIR SPRING MEETING WHICH GENERALLY OCCURS IN MARCH OF EACH YEAR FURTHER, PRIOR TO THE SPRING AUDIT COMMITTEE MEETING, ALL VOTING MEMBERS OF THE BOARD OF TRUSTEES ARE NOTIFIED OF MATERIALS BEING REVIEWED BY THE COMMITTEE AND A DRAFT FORM 990 IS INCLUDED IN THIS NOTIFICATION IF ANY CHANGES ARE MADE, PRIOR TO FILING, THE FINAL 990 IS POSTED TO THE BOARD OF TRUSTEES' PASSWORD-PROTECTED WEBSITE AN EMAIL NOTIFICATION IS SENT TO ALL VOTING MEMBERS OF THE BOARD OF TRUSTEES INFORMING THEM THAT CHANGES HAVE BEEN MADE WITH A LINK TO THE SECURE WEBSITE

PORM 990, PART VI, EINE 12C MONITORING AND ENFORCEMENT OF COMPLIANCE WITH CONFLICT OF INTEREST POLICY, INFORMATION ON MONITORING CONFLICT OF INTEREST UNDER THE UNIVERSITY'S CONFLICT OF INTEREST POLICY, OFFICERS, DIRECTORS, OTHER KEY EMPLOYES, AND FACULTY MEMBERS MUST FILE AN ANNUAL CONFLICT OF INTEREST STATEMENT ANY CONFLICT IDENTIFIED IS REPORTED TO THE APPROPRIATE OFFICE RESPONSIBLE FOR MANAGING THE CONFLICT, SUCH AS THE REAL ESTATE OFFICE FOR REAL ESTATE MATTERS THIS PROCEDURE IS DESIGNED TO HELP ENSURE THAT SUCH TRANSACTIONS ARE SUBJECT TO ADDITIONAL REVIEW AND AUTHORIZATION ANY MEMBER OF THE BOARD OF TRUSTEES, BOARD OF OVERSEERS, AN OFFICER OF THE CORPORATION, OR OTHER SENIOR ADMINISTRATOR MUST REPORT ANNUALLY, IN WRITING, ANY EXTERNAL INTERESTS, OR THOSE OF A FAMILY MEMBER OR ASSOCIATE, TO THE UNIVERSITY COUNSEL AND SECRETARY OF THE CORPORATION THE UNIVERSITY COUNSEL AND SECRETARY OF THE CORPORATION WILL ADVISE THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES REGARDING SUCH MATTERS AS INCESSARY INCLUDING DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS AND HOW CORNELL UNIVERSITY SHOULD BEST MANAGE A CONFLICT OF INTEREST AN INDIVIDUAL IS CONSIDERED TO HAVE A CONFLICT OF INTEREST WHEN HE OR SHE, A MEMBER OF HIS OR HER FAMILY, OR AN ASSOCIATE (TO HIS OR HER PRESENT KNOWLEDGE) EITHER (1) HAS AN EXISTING OR POTENTIAL SIGNIFICANT ENANCIAL INTEREST OR OTHER MATERIAL INTEREST OR RELATIONSHIP THAT IMPAIRS OR MIGHT APPEAR TO IMPAIRANT THE INDIVIDUAL'S INDEPENDENCE AND OBJECTIVITY IN THE DISCHARGE OF HIS OR HER RESPONSIBILITIES TO THE UNIVERSITY, OR (2) MAY RECEIVE A FINANCIAL OR OTHER MATERIAL BURJETT FROM INFORMATION CONFIDENTIAL TO THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OPPORTUNITY TO INFLUENCE THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OPPORTUNITY TO INFLUENCE THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OOFFICIT CAN BE MANAGED THAT THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE	Return Reference	Explanation
	PART VI,	CONFLICT OF INTEREST UNDER THE UNIVERSITY'S CONFLICT OF INTEREST POLICY, OFFICERS, DIRECTORS, OTHER KEY EMPLOYEES, AND FACULTY MEMBERS MUST FILE AN ANNUAL CONFLICT OF INTEREST STATEMENT ANY CONFLICT DENTIFIED IS REPORTED TO THE APPROPRIATE OFFICE RESPONSBILE FOR MANAGING THE CONFLICT, SUCH AS THE REAL ESTATE OFFICE FOR REAL ESTATE WATTERS THIS PROCEDURE IS DESIGNED TO HELP BUSURE THAT SUCH TRANSACTIONS ARE SUBJECT TO ADDITIONAL REVIEW AND AUTHORIZATION ANY MEMBER OF THE BOARD OF TRUSTEES, BOARD OF OVERSEERS, AN OFFICER OF THE CORPORATION, OR OTHER SENIOR ADMINISTRATOR MUST REPORT ANNUALLY, IN WRITING, ANY EXTERNAL INTERESTS, OR THOSE OF A FAMILY MEMBER OR ASSOCIATE, TO THE UNIVERSITY COUNSEL AND SECRETARY OF THE CORPORATION WILL ADVISE THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES REGARDING SUCH MATTERS AS NECESSARY INCLUDING DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS AND HOW CORNELL UNIVERSITY SHOULD BEST MANAGE A CONFLICT OF INTEREST AN INDIVIDUAL IS CONSIDERED TO HAVE A CONFLICT OF INTEREST (1) HAS AN EXSTING OR POTENTIAL SIGNIFICANT FINANCIAL INTEREST OR OTHER MATERIAL INTEREST OR RELATIONSHIP THAT IMPAIRS OR MIGHT APPEAR TO IMPAIR THE INDIVIDUAL'S INDEPENDENCE AND OBJECTIVITY IN THE DISCHARGE OF HIS OR HER RESPONSIBILITIES TO THE UNIVERSITY, OR (2) MAY RECEIVE A FINANCIAL OR OTHER MATERIAL BEDIETIF FROM INFORMATION CONFIDENTIAL TO THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OPPORTUNITY TO INFLUENCE THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OPPORTUNITY TO INFLUENCE THE UNIVERSITY. BUSINESS, ADMINISTRATIVE, ACADEMIC, OR OTHER BEDIETIF FROM INFORMATION CONFIDENTIAL TO THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OPPORTUNITY TO INFLUENCE THE UNIVERSITY MAY ARROVED THAT THE LONDUCE THAT THE UNIVERSITY MAY ARROVE THE TRANSACTION OR AFFILIATION, FROM JOB PROVED THAT THE CONFLICT CAN BE MANAGED IN MANY CASES, THE CONFLICT ANNUALLY THE UNIVERSITY WAY APPROVE A TRANSACTION OR AFFILIATI

PART VI, AND MANAGE COMPENSATION ISSUES THE PROCEDURES IDENTIFIED BELOW APPLY TO ALL OFFICERS, ALL FORMER	Return Reference	Explanation
THE VP AND HER INTERNAL STAFF DEVELOP FORMAL PRESENTATIONS FOR THE COMPENSATION COMMITTEE AND THE EXECUTIVE COMMITTEE OF THE BOARD THE COMPENSATION COMMITTEE REVIEWS THE INFORMATION, MODIFIES IT IF DEEMED APPROPRIATE, APPROVES CASES PER ITS DELEGATED AUTHORITY, AND INFORMS THE EXECUTIVE COMMITTEE OF THOSE APPROVALS THE COMPENSATION COMMITTEE RECOMMENDS COMPENSATION FOR CASES EXCEEDING ITS AUTHORITY FOR FINAL REVIEW AND APPROVAL TO THE EXECUTIVE COMMITTEE OF THE BOARD IN ADDITION, THE UNIVERSITY MAINTAINS CONTEMPORANEOUS WRITTEN RECORDS OF THE PROCEDURES THAT, TOGETHER WITH THE FOREGOING, GIVE RISE TO A REBUTTABLE PRESUMPTION OF REASONABLENESS NOTE COMPENSATION PROPOSALS WHICH OCCUR OUTSIDE THE SPRING TIMELINE AND REQUIRE COMPENSATION COMMITTEE AND/OR EXECUTIVE COMMITTEE APPROVAL ARE PRESENTED FOR REVIEW AND APPROVAL IN A PRIVATE SESSION OF THE APPROPRIATE COMMITTEE. IF	FORM 990, PART VI, LINE 15	OFFICERS WHO CONTINUE TO PROVIDE SERVICES TO THE INSTITUTION AS A WHOLE, ALL EMPLOYEES WHO OCCUPY CERTAIN ROLES SUCH AS DEAN AND VICE PRESIDENT, AND ALL EMPLOYEES WHOSE COMPENSATION EXCEEDS A PREESTABLISHED THRESHOLD THE VICE PRESIDENT AND CHIEF HUMAN RESOURCES OFFICER (VP) DEVELOPS THE LIST OF INDIVIDUALS SUBJECT TO REVIEW AND OBTAINS COMPARATIVE DATA FROM EXTERNAL, INDEPENDENT CONSULTING FIRMS THE VP AND HER INTERNAL STAFF DEVELOP FORMAL PRESENTATIONS FOR THE COMPENSATION COMMITTEE AND THE EXECUTIVE COMMITTEE OF THE BOARD THE COMPENSATION COMMITTEE REVIEWS THE INFORMATION, MODIFIES IT IF DEEMED APPROPRIATE, APPROVES CASES PER ITS DELEGATED AUTHORITY, AND INFORMS THE EXECUTIVE COMMITTEE OF THOSE APPROVALS THE COMPENSATION COMMITTEE RECOMMENDS COMPENSATION FOR CASES EXCEEDING ITS AUTHORITY FOR FINAL REVIEW AND APPROVAL TO THE EXECUTIVE COMMITTEE OF THE BOARD IN ADDITION, THE UNIVERSITY MAINTAINS CONTEMPORANEOUS WRITTEN RECORDS OF THE PROCEDURES THAT, TOGETHER WITH THE FOREGOING, GIVE RISE TO A REBUTTABLE PRESUMPTION OF REASONABLENESS NOTE COMPENSATION PROPOSALS WHICH OCCUR OUTSIDE THE SPRING TIMELINE AND REQUIRE COMPENSATION COMMITTEE AND/OR EXECUTIVE COMMITTEE APPROVAL ARE PRESENTED FOR REVIEW AND APPROVAL IN A PRIVATE SESSION OF THE APPROPRIATE COMMITTEE IF THERE IS A DISCRETIONARY COMPONENT OF COMPENSATION, IT IS LIMITED BY AMOUNT PERCENTAGE OR OTHER CLEARLY

Return Reference	Explanation
FORM 990, PART VI, LINE 16A	PROCEDURES FOR PARTICIPATION IN JOINT VENTURES THE UNIVERSITY HAS NUMEROUS CONTROLS IN PLACE TO ENSURE THAT ANY INVESTMENT IN, CONTRIBUTION OF ASSETS TO, OR PARTICIPATION IN A JOINT VENTURE OR SIMILAR ARRANGEMENT WITH A TAXABLE OR NON-TAXABLE ENTITY ARE IN FULL COMPLIANCE WITH UNIVERSITY POLICIES, INCLUDING, BUT NOT LIMITED TO, THE POLICY ON TRANSACTION AUTHORITY AND UNRELATED BUSINESS INCOME. COMPLIANCE WITH THE UNIVERSITY'S POLICIES SERVES TO PROTECT THE ORGANIZATION'S EXEMPT STATUS

Return Reference	Explanation
FORM 990, PART VI, LINE 19	PROCESS FOR MAKING DOCUMENTS AVAILABLE TO THE PUBLIC THE UNIVERSITY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC VIA THE UNIVERSITY'S WEBSITE FORM 990, PART VIII, PART IX AND X CURRENT YEAR REVENUE AND EXPENSE PRESENTS DATA OF CORNELL UNIVERSITY DECONSOLIDATED ON EACH LINE FROM ITS RELATED ORGANIZATIONS THAT ARE INCLUDED IN CORNELL'S CONSOLIDATED FINANCIAL STATEMENTS PRIOR YEAR REVENUE AND EXPENSE WERE PRESENTED ON A CONSOLIDATED BASIS WITH THE DECONSOLIDATION PRESENTED IN THE RECONCILIATION BETWEEN THE FORM 990 AND THE CONSOLIDATED FINANCIAL STATEMENTS BOTH FORMS 990 DISCLOSE COMPLETE AND ACCURATE INFORMATION REGARDING CORNELL UNIVERSITY BOTH THE BEGINNING OF YEAR AND END OF YEAR BALANCE SHEETS FOR CORNELL UNIVERSITY HAVE BEEN PRESENTED DECONSOLIDATED FROM THE RELATED ORGANIZATIONS INCLUDED IN CORNELL'S CONSOLIDATED FINANCIAL STATEMENTS FORM 990, PART VIII, LINE 1H THE CORNELL UNIVERSITY FOUNDATION IS A DONOR ADVISED FUND PROVIDING A SERVICE FOR CORNELL ALUMNI AND FRIENDS WHO WISH TO MAKE CHARITABLE GIFTS THROUGH THE STRUCTURE OF A DONORADVISED FUND AMOUNTS GRANTED FROM THIS FOUNDATION TO CORNELL UNIVERSITY HAVE BEEN INCLUDED IN THE CONTRIBUTION TOTAL FOR CORNELL UNIVERSITY BEGINNING WITH THE 2014 FORM 990

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES TO NET ASSETS FAS 158 (\$47,422,157) LOSS ON SWAP TERMINATION (\$16,419,094) CHANGES IN FMV OF SPLIT INTEREST (\$12,050,378) TOTAL (\$75,891,600)

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SCHEDULE R (Form 990)

Department of the Treasury

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.

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

Name of the organization Cornell University

N16 78J

Internal Revenue Service

LONDON

Employer identification number

15-0532082

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			
(1) CORNELL UNIVERSITY FOUNDATION UK LTD 19 NORCOTT ROAD	UK DONATIONS	UK	60,212	29,332	CORNELL UNIV			

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	1 ' ' 1	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section ! (13) cor entit	512(b) ntrolled
						Yes	No
See Additional Data Table							

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h		(i)	(j		(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of total	Share of end-	Disprop	rtionate	Code V-UBI	Gener	ral or	Percentage
related organization		domicile	controlling	income(related,	ıncome	of-year	allocati	ions?	amount in	mana	iging	ownership
-		(state or	entity	unrelated,		assets			box 20 of	partr	ner?	·
		foreign	<i>'</i>	excluded from					Schedule K-1	•		
		country)		tax under					(Form 1065)			
		''		sections 512-					[`			
				514)								
				,			Yes	No		Yes	No	
(1) ITHACA LP	INVESTMENTS	JE	CORNELL	Related	-4,213,004	42,359,461		No			No	100 000 %
· ·			UNIV		, ,	, ,						
35 THORNWOOD DR												
ITHACA, NY 14850												
		1								I		

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)	Legal Direct controlling domicile entity arte or foreign		(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	on 512 (13) trolled tity?	
								Yes	No	
(1) TOWER INNOVATIVE LEARNING SOLUTIONS INC 950 DANBY ROAD ITHACA, NY 14850 16-1593492	DIST LEARNING	NY	CORNELL UNIV	C Corp	1	1	100 000 %	Yes		
(2) LENROC CORPORATION 15 THORNWOOD DR ITHACA, NY 14850 16-1450466	REAL ESTATE	NY	CORNELL UNIV	C Corp	1	1	100 000 %	Yes		
(3) UNIVERSITY VETERINARY SPECIALISTS INC 800 CANAL ST STAMFORD, CT 06902 27-2461725	VET SERVICES	СТ	CORNELL UNIV	C Corp	770,202	8,701,190	100 000 %	Yes		
(4) CHARITABLE REMAINDER TRUSTS (43)	INVESTMENT	NY	CORNELL UNIV					Yes		
(5) CHARITABLE LEAD TRUSTS (6)	INVESTMENT	NY	CORNELL UNIV					Yes		

See Additional Data Table

cnec	dule k (Form 990) 2014		Ра	ge 3
Par	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		Yes	No
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)	1b		No
c	Gift, grant, or capital contribution from related organization(s)	1 c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1f	Yes	
g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
	Exchange of assets with related organization(s)	1i		No
	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1р	Yes	
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	
r	O ther transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s	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 Method of determining amount involved Method of determining amount involved	ount i	nvolved	i

Schedule R (Form 990) 2014

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

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No	
								<u>, </u>	\Box	1			

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Part VII Supplemental Information

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

Return Reference Explanation

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Software ID: Software Version:

EIN: 15-0532082

Name: Cornell University

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

Form 990, Schedule R, Part II - Identification of Re		=					_
(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	Section (b)(: contr	g) on 512 (13) rolled city?
						Yes	. No
(1) CORNELL CENTER OF NEW YORK	SOCIAL CLUB	NY	501(c)(7)	9	CORNELL UNIV	Yes	
6 EAST 44TH ST NEW YORK, NY 10017 16-1301416							
(1) MRSI MANAGEMENT INC	MEDICAL SERV	NY	501(c)(3)	11d TYPEIII	CORNELL UNIV	Yes	
575 LEXINGTON AVE NEW YORK, NY 10022 13-3366821							
(2) CORNELL REAL PROPERTY SERVICES INC	PROPERTY SERV	NY	501(c)(3)	11d TYPEIII	CORNELL UNIV	Yes	T 1
15 THORNWOOD DR ITHACA, NY 14850 16-1450535							
(3) CORNELL RESEARCH FOUNDATION INC	HOLDS IP PROP	NY	501(c)(2)	9	CORNELL UNIV	Yes	
CORNELL UNIV DAY HALL ITHACA, NY 14850 16-6050703							
(4) SAMUEL CURTIS JOHNSON FOUNDATION	SUPPORT ORG	NY	501(c)(3)	11c TYPEIII	CORNELL UNIV	Yes	
130 SENECA PLACE ITHACA, NY 14850 22-2572815							
(5) CORNELL UNIVERSITY FOUNDATION	SUPPORT ORG	NY	501(c)(3)	11a TYPE I	CORNELL UNIV	Yes	
130 SENECA PLACE ITHACA, NY 14850 22-2848738							
(6) ROBERT J MIN MD PC	MEDICAL SERV	NY	501(c)(3)	9	CORNELL UNIV	Yes	
575 LEXINGTON AVE NEW YORK, NY 10022 13-3366820							
(7) THE FRNDS OF THE CORNELL LAB OF ORN INC	SUPPORT ORG	DE	501(c)(3)	11a TYPE I	NA		No
1209 ORANGE ST WILMINGTON, DE 19801 46-1979945							
(8) NY WEILL CORNELL MEDICAL CTR FUND INC	SUPPORT ORG	NY	501(C)(3)	11A TYPE I	CORNELL UNIV	Yes	
575 LEXINGTON AVENUE SUITE 9TH FL NEW YORK, NY 10022 13-6094042							
(9) CORNELL MEDICAL BENEFITS TRUST	SUPPORT ORG	IL	501(C)(3)	11A TYPE I	CORNELL UNIV	Yes	
10 S DEARBORN IL1-0117 CHICAGO, IL 60603 16-1457001						!	

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

(a) Name of related organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
UNIVERSITY VETERINARY SPECIALISTS INC	a	415,193	FMV
UNIVERSITY VETERINARY SPECIALISTS INC	f	400,000	FMV
CORNELL UNIVERSITY FOUNDATION UK LTD	С	75,460	FMV
UNIVERSITY VETERINARY SPECIALISTS INC	S	158,212	FMV
SAMUEL CURTIS JOHNSON FOUNDATION	С	2,642,149	FMV
CORNELL REAL PROPERTY SERVICES INC	I	50,000	FMV
CORNELL UNIVERSITY FOUNDATION	С	13,693,987	FMV
MRSI MANAGEMENT INC	p	1,911,496	FMV
MRSI MANAGEMENT INC	q	168,239	FMV