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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning

07/01, 2014, and ending

06/30, 2015

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

HARVARD NEURODISCOVERY CENTER, INC.

Doing business as

Number and street (or P O box if mail is not delivered to street address)

25 SHATTUCK STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

BOSTON, MA 02115

F Name and address of principal officer

LYNN W. HARWELL

25 SHATTUCK STREET, BOSTON, MA 02115

D Employer identification number

31-1745145

E Telephone number

(617) 432-1142

G Gross receipts \$ 2,667,148.

H(a) Is this a group return for subordinates? ☐ Yes ☒ NoH(b) Are all subordinates included? ☐ Yes ☒ No

If "No," attach a list (see instructions)

H(c) Group exemption number N/A

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527

J Website WWW.HCNR.MED.HARVARD.EDU

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other L Year of formation 2000 M State of legal domicile MA

Part I Summary

1 Briefly describe the organization's mission or most significant activities NEUROSCIENCE-RELATED RESEARCH

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

3 8.

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 1.

5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)

5 0

6 Total number of volunteers (estimate if necessary)

6 1.

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a 0

b Net unrelated business taxable income from Form 990-T, line 34

7b 0

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	4,517,091.	1,621,673.
	9 Program service revenue (Part VIII, line 2g)	1,911,517.	1,034,371.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	56,477.	11,104.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,485,085.	2,667,148.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,757,095.	4,481,857.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)		
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,627,999.	1,295,857.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,385,094.	5,777,714.
	19 Revenue less expenses Subtract line 18 from line 12	99,991.	-3,110,566.
	20 Total assets (Part X, line 16)	10,719,170.	7,170,452.
	21 Total liabilities (Part X, line 26)	910,708.	477,445.
	22 Net assets or fund balances Subtract line 21 from line 20	9,808,462.	6,693,007.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer *Lynn W. Harwell*
Type or print name and title *Lynn W. Harwell*

5/13/2016
Date

Paid Preparer Use Only

Print/Type preparer's name

ERIN COUTURE

Preparer's signature

Erin Couture

Date

05/11/2016

Check ☐ if self-employed

PTIN

P01390592

Firm's name PRICEWATERHOUSECOOPERS LLP

Firm's EIN 13-4008324

Firm's address 101 SEAPORT BOULEVARD BOSTON, MA 02210

Phone no 617-530-5000

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

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SCANNED JUN 24 2016

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

- 1** Briefly describe the organization's mission
NEUROSCIENCE-RELATED RESEARCH

- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O
- 4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ 5,203,490. including grants of \$ 4,481,857) (Revenue \$ 1,034,371.)
MEDICAL RESEARCH PROGRAMS, INCLUDING, BUT NOT LIMITED TO, THE
LABORATORY FOR DRUG DISCOVERY NEURODEGENERATION PROGRAM, THE 3T
MRI AND PET PROGRAM, THE BIOMARKER PROGRAM, ETC.

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses **▶** 5,203,490.

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 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	3	X
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	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5	X
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	X
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	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8	X
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	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a X	
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	X
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c	X
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 X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e X	
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	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.	12a	X
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 X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
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	X
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	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	X
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	X
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	X
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	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
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? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
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>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I.</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
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>		X
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)		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
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.	X	

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Part V. Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

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

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI ☐**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	8	
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	1	
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?		X
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? . .		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . .		X
6 Did the organization have members or stockholders?		X
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?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
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		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► MA,
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☒ Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►

CHERYL O'TOOLE 180 LONGWOOD AVENUE, BOSTON, MA 02215

617-432-5633

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DENNIS J. SELKOE, MD DIRECTOR/TRUSTEE	1.00 4.00	X						0	104,532.	10,594.
(2) JEFFREY S. FLIER, MD PRESIDENT/TRUSTEE	1.00 35.00	X		X				0	601,688.	53,676.
(3) MICHAEL GREENBERG DIRECTOR/TRUSTEE	1.00 35.00	X						0	520,370.	33,417.
(4) BRADLEY HYMAN, MD, PHD DIRECTOR/TRUSTEE	1.00 0	X						0	0	0
(5) NATHALIE APCHIN DIRECTOR/TRUSTEE (SINCE 1/15)	1.00 35.00	X						0	226,683.	53,036.
(6) JEFFREY W. HARPER DIRECTOR/TRUSTEE (SINCE 7/14)	1.00 35.00	X						0	301,130.	43,220.
(7) LYNN W. HARWELL EXECUTIVE DIRECTOR/TRUSTEE	40.00 0	X		X				0	113,392.	7,127.
(8) JUDITH GLAVEN DIRECTOR/TRUSTEE	1.00 35.00	X						0	243,686.	42,110.
(9) DEIRDRE B. PHILLIPS EXEC. DIR. AUTISM CONSORTIUM	35.00 0					X		0	214,860.	38,193.
(10) NANCY MAHER SENIOR PROGRAM MANAGER	35.00 1.00					X		0	108,221.	19,836.
(11)										
(12)										
(13)										
(14)										

[illegible]

	Yes	No
3		X
4	X	
5		X

(A) Name and business address	(B) Description of services	(C) Compensation

Form 990 (2014)

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII. ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,621,673			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		1,621,673			
Program Service Revenue				Business Code			
	2a	LAB SERVICES	541700	140,903	140,903		
	b	REIMBURSEMENT PAYMENTS	541700	892,635	892,635		
	c	ACADEMIC SUPPORT	541700	833	833		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		1,034,371			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts).		11,104			11,104
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
			(i) Real	(ii) Personal			
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		0			
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
c	Net income or (loss) from sales of inventory		0				
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		0				
12	Total revenue. See instructions		2,667,148	1,034,371		11,104	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,481,857.	4,481,857.		
2 Grants and other assistance to domestic individuals See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	0			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	0			
10 Payroll taxes	0			
11 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	426.		426.	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	61,588.	61,588.		
12 Advertising and promotion	0			
13 Office expenses	25,410.	8,976.	16,434.	
14 Information technology	8,823.	6,635.	2,188.	
15 Royalties	0			
16 Occupancy	248,125.		248,125.	
17 Travel	16,348.	15,506.	842.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	15,103.		15,103.	
20 Interest	139.		139.	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	119,875.	119,875.		
23 Insurance	0			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a TAX TO MA	515.		515.	
b PERSONNEL CHARGEBACK	799,505.	509,053.	290,452.	
c				
d				
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	5,777,714.	5,203,490.	574,224.	
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

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	549,978.	3	683,889.
	4 Accounts receivable, net	0	4	0
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	8,925.	9	50,917.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,951,598.		
	b Less accumulated depreciation	10b 1,553,617.	507,044.	10c 397,981.
	11 Investments - publicly traded securities	21,138.	11	0
	12 Investments - other securities See Part IV, line 11	0	12	0
	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	9,632,085.	15	6,037,665.
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,719,170.	16	7,170,452.	
Liabilities	17 Accounts payable and accrued expenses	26,043.	17	25,000.
	18 Grants payable	0	18	0
	19 Deferred revenue	523,626.	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	361,039.	25	452,445.
	26 Total liabilities. Add lines 17 through 25	910,708.	26	477,445.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-1,248,242.	27	-5,877,476.
	28 Temporarily restricted net assets	11,056,704.	28	12,570,483.
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	9,808,462.	33	6,693,007.
34 Total liabilities and net assets/fund balances	10,719,170.	34	7,170,452.	

Form **990** (2014)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,667,148.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,777,714.
3	Revenue less expenses Subtract line 2 from line 1	3	-3,110,566.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,808,462.
5	Net unrealized gains (losses) on investments	5	-4,889.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,693,007.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
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	

Form **990** (2014)

SCHEDULE A
(Form 990 or 990-EZ)

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

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☒ **Type I** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the 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**.
- b ☐ **Type II** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete **Part IV, Sections A and C**.
- c ☐ **Type III functionally integrated** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete **Part IV, Sections A, D, and E**.
- d ☐ **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 ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
ATTACHMENT 1						
(A)						
(B)						
(C)						
(D)						
(E)						
Total					1,960,867.	

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

Schedule A (Form 990 or 990-EZ) 2014

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
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	%
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 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 test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		☐
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		☐

Part III 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 in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
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% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐		

Part IV 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

	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.	X	
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).		X
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		X
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.		
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.		
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.		X
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.		
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)? 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.		
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).		X
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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 .	X	
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).		X
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 I of Schedule L (Form 990).		X
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 .		X
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? If "Yes," provide detail in Part VI .		X
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 .		X
10a 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.		X
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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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	X
b A family member of a person described in (a) above?	11b	X
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	X

Section 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	X
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	X

Section 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	

Section 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	

Section 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 instructions)
- a** ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see 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 Parent of Supported Organizations Answer (a) and (b) below.		
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 .	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each 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 Type III 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)			
a 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			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

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

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI) See instructions		
7	Total annual distributions. Add lines 1 through 6		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions		
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 required-see instructions)			
3	Excess distributions carryover, if any, to 2014			
a				
b				
c				
d				
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	Applied 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				
b				
c				
d	Excess from 2013			
e	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART IV, SECTION A, LINE 6:

HNDC IS AN AFFILIATE OF HARVARD MEDICAL SCHOOL, WHICH IS PART OF
PRESIDENT & FELLOWS OF HARVARD COLLEGE (SUPPORTED ORGANIZATION). TO
ADVANCE ITS MISSION, HNDC PROVIDES SUPPORT TO ITS SUPPORTED ORGANIZATION
AND ORGANIZATIONS THAT ARE AFFILIATED WITH PRESIDENT & FELLOWS OF HARVARD
COLLEGE.

SCHEDULE A, PART I - INFORMATION ABOUT SUPPORTED ORGANIZATIONSATTACHMENT 1

(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	(III) TYPE OF ORGANIZATION		(IV) YES NO	(V) AMOUNT OF SUPPORT	(VI) OTHER SUPPORT AMOUNT
PRESIDENT & FELLOWS OF HARVARD COLLEGE	04-2103580	02		X	1,960,867	0
TOTAL AMOUNT OF SUPPORT					<u>1,960,867.</u>	<u>0</u>

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6

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

Part II Conservation Easements.

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

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

(i) Revenue included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

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

a Revenue included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

Schedule D (Form 990) 2014

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a ☐ Public exhibition d ☐ Loan or exchange programs
- b ☐ Scholarly research e ☐ Other _____
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	40,935.	1,419,440.	2,022,066.	9,801,202.	9,007,407.
b Contributions					
c Net investment earnings, gains, and losses	-8,388.	68,418.	-102,626.	-2,055,581.	793,795.
d Grants or scholarships					
e Other expenditures for facilities and programs	27,439.	72,676.	500,000.	5,723,555.	
f Administrative expenses	5,098.	1,374,247.			
g End of year balance	10.	40,935.	1,419,440.	2,022,066.	9,801,202.

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

- a Board designated or quasi-endowment $\blacktriangleright$ 100.0000 %
- b Permanent endowment $\blacktriangleright$ %
- c Temporarily restricted endowment $\blacktriangleright$ %
- The percentages in lines 2a, 2b, and 2c should equal 100%

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		1,951,598.	1,553,617.	397,981.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) $\blacktriangleright$ 397,981.

Schedule D (Form 990) 2014

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(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		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DUE FROM HARVARD UNIVERSITY	6,037,665.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15).	6,037,665.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
	(1) Federal income taxes	
	(2) DUE TO RELATED PARTIES	452,445.
	(3)	
	(4)	
	(5)	
	(6)	
	(7)	
	(8)	
	(9)	
Total (Column (b) must equal Form 990, Part X, col (B) line 25) ►		452,445.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

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

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

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information.

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

SEE PAGE 5

Part XIII Supplemental Information *(continued)*

SCHEDULE D, PART V, LINE 4

THE HARVARD NEURODISCOVERY CENTER'S QUASI-ENDOWMENT FUNDS WILL BE USED TO FURTHER SCIENTIFIC PROGRAMS IN ACCORDANCE WITH ITS MISSION: TO DRAW THE BEST INVESTIGATORS INTO A COLLABORATIVE AND COORDINATED EFFORT TO UNDERSTAND THE CAUSES OF NEURODEGENERATIVE DISEASES; TO BRING TO THIS EFFORT A FOCUS ON TRANSLATIONAL RESEARCH; AND TO DEVELOP A MULTI-DISEASE EXPERTISE WHEREBY INSIGHTS, EXPERIMENTAL APPROACHES, TOOLS, AND TECHNIQUES DEVELOPED IN RESPONSE TO ONE DISEASE ARE RELEVANT TO OTHER NEURODEGENERATIVE DISEASES.

SCHEDULE I
(Form 990)

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

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BRIGHAM & WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115	04-2312909	501(C)(3)	1,903,689		N/A		GRANTS FOR RESEARCH PROGRAMS
(2) MASSACHUSETTS GENERAL HOSPITAL 54 FRUIT STREET BOSTON, MA 02114	04-1564655	501(C)(3)	584,915		N/A		GRANTS FOR RESEARCH PROGRAMS
(3) PRESIDENT & FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVE CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	1,960,867		N/A		GRANTS FOR RESEARCH PROGRAMS
(4) WHITEHEAD INSTITUTE NINE CAMBRIDGE CTR CAMBRIDGE, MA 02142	06-1043412	501(C)(3)	32,386		N/A		GRANTS FOR RESEARCH PROGRAMS
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							4.
3 Enter total number of other organizations listed in the line 1 table							

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

Schedule I (Form 990) (2014)

JSA

4E1288 1 000

SD9013 7377

V 14-7.16

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

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

SCHEDULE I, PART I, LINE 2

GRANT PAYMENTS ARE MANAGED BY THE HARVARD NEURODISCOVERY CENTER, INC.
("HNDC") OFFICE, INCLUDING REVIEWING AND APPROVING THE SUBMITTED INVOICES
AND SUPPORT ACCOUNTING BACK-UP. HNDC REQUIRES THE PERIODIC REPORTS TO BE
REVIEWED. FOR EXAMPLE, THE RECIPIENTS OF HNDC'S PILOT GRANTS ARE REQUIRED
TO SUBMIT FINAL REPORTS WHEN THEIR GRANT PERIODS CONCLUDE.

**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" on 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.

OMB No 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☐ Compensation survey or study |
| ☐ Form 990 of other organizations | ☐ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- | | | |
|--|-----------|---|
| a Receive a severance payment or change-of-control payment? | 4a | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | X |
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- | | | |
|------------------------------------|-----------|---|
| a The organization? | 5a | X |
| b Any related organization? | 5b | X |
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- | | | |
|------------------------------------|-----------|---|
| a The organization? | 6a | X |
| b Any related organization? | 6b | X |
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2014

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1 JEFFREY S FLIER, MD PRESIDENT/TRUSTEE	(i) 0 (ii) 597,117.	0	0	0	0	0	0	0
2 MICHAEL GREENBERG DIRECTOR/TRUSTEE	(i) 0 (ii) 436,094.	0	0	4,571.	33,150.	20,526.	655,364.	0
3 DEIRDRE B PHILLIPS EXEC DIR AUTISM CONSORTIUM	(i) 0 (ii) 210,558.	75,000.	0	9,276.	33,150.	267.	553,787.	0
4 NATHALIE APCHIN DIRECTOR/TRUSTEE (SINCE 1/15)	(i) 0 (ii) 216,566.	4,000.	0	302.	27,218.	10,975.	253,053.	0
5 JEFFREY W. HARPER DIRECTOR/TRUSTEE (SINCE 7/14)	(i) 0 (ii) 154,620.	10,000.	0	117.	29,623.	23,413.	279,719.	0
6 JUDITH GLAVEN DIRECTOR/TRUSTEE	(i) 0 (ii) 228,340.	146,306.	0	204.	18,958.	24,262.	344,350.	0
7	(i) 0 (ii)	15,000.	0	346.	31,483.	10,627.	285,796.	0
8	(i) 0 (ii)							
9	(i) 0 (ii)							
10	(i) 0 (ii)							
11	(i) 0 (ii)							
12	(i) 0 (ii)							
13	(i) 0 (ii)							
14	(i) 0 (ii)							
15	(i) 0 (ii)							
16	(i) 0 (ii)							

Schedule J (Form 990) 2014

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information

SCHEDULE J, PART II

OFFICERS AND DIRECTORS/TRUSTEES ARE NOT COMPENSATED IN THEIR CAPACITY AS OFFICERS AND/OR DIRECTORS/TRUSTEES OF HARVARD NEURODISCOVERY CENTER, INC.

("HNDC"). HOWEVER, THE INDIVIDUALS LISTED WERE ALSO EMPLOYEES OF THE

PRESIDENT & FELLOWS OF HARVARD COLLEGE ("COLLEGE"), POSITIONS FOR WHICH

THEY RECEIVED COMPENSATION. THEY SERVED AS OFFICERS AND/OR

DIRECTORS/TRUSTEES OF HNDC AS PART OF THEIR DUTIES TO THE COLLEGE.

DURING FY 2015, THE COLLEGE COMPENSATED THESE INDIVIDUALS AS DESCRIBED IN

PART II.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

FORM 990, PART V, LINE 2A

HARVARD NEURODISCOVERY CENTER, INC. ("HNDC") HAS NO EMPLOYEES. HNDC
REIMBURSES PRESIDENT AND FELLOWS OF HARVARD COLLEGE FOR PERSONNEL
EXPENSES RELATED TO SERVICES PERFORMED ON BEHALF OF HNDC.

FORM 990, PART VI, LINE 11A

THE ORGANIZATION'S TAX RETURN IS PREPARED BY EXTERNAL TAX PREPARERS AND
WAS REVIEWED BY MANAGEMENT. A FINAL COPY OF FORM 990 WAS PROVIDED TO EACH
VOTING MEMBER OF THE BOARD PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, LINES 12C, 13 & 14

HARVARD NEURODISCOVERY CENTER, INC. ("HNDC") HAS NO SEPARATE WRITTEN
POLICIES. AS AN AFFILIATED ENTITY OF THE PRESIDENT & FELLOWS OF HARVARD
COLLEGE ("COLLEGE"), HNDC ADHERES TO THE COLLEGE'S, AND MORE
SPECIFICALLY, HARVARD MEDICAL SCHOOL'S ("HMS"), CONFLICT OF INTEREST
POLICY, DOCUMENT RETENTION POLICY, AND WHISTLEBLOWER POLICY. OFFICERS,
DIRECTORS, AND TRUSTEES ARE REQUIRED TO DISCLOSE INTERESTS THAT COULD
GIVE RISE TO CONFLICTS. MONITORING TAKES PLACE WITHIN THE FRAMEWORK OF
HMS.

FORM 990, PART VI, LINE 15

OFFICERS AND DIRECTORS/TRUSTEES ARE NOT COMPENSATED IN THEIR CAPACITY AS
OFFICERS AND DIRECTORS/TRUSTEES OF HARVARD NEURODISCOVERY CENTER, INC.
("HNDC"). HOWEVER, THE INDIVIDUALS LISTED WERE ALSO EMPLOYEES OF THE

Name of the organization

Employer identification number

HARVARD NEURODISCOVERY CENTER, INC.

31-1745145

PRESIDENT & FELLOWS OF HARVARD COLLEGE ("COLLEGE"), POSITIONS FOR WHICH
THEY RECEIVED COMPENSATION. THEREFORE, THEIR COMPENSATION AND BENEFITS
ARE DETERMINED BY THE COLLEGE.

FORM 990, PART VI, LINE 18

THE ORGANIZATION'S FORM 990 IS ALSO AVAILABLE THROUGH WWW.GUIDESTAR.ORG.

FORM 990, PART VI, LINE 19 GOVERNING DOCUMENTS ARE NOT AVAILABLE TO THE

PUBLIC. HNDC FOLLOWS THE CONFLICT OF INTEREST POLICY OF PRESIDENT &

FELLOWS OF HARVARD COLLEGE, AND MORE SPECIFICALLY, HARVARD MEDICAL

SCHOOL, WHICH IS AVAILABLE ON THE INSTITUTION'S WEBSITE. HNDC'S FINANCIAL

STATEMENTS ARE AVAILABLE UPON REQUEST, IN ACCORDANCE WITH FEDERAL

REGULATIONS.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	AFRICA ACADEMY FOR PUBLIC HEALTH P O BOX 79810, MWAI KIBAKI RD DAR ES SALAAM, TZ	RESEARCH	TZ	FOREIGN/EXE	N/A	HPF	X
(2)	AMERICAN REPERTORY THEATRE COMPANY, INC 64 BRATTLE ST CAMBRIDGE, MA 02138	PERF. ARTS	MA	501 (C) (3)	9	HPF	X
(3)	ASSOCIACAO DAVID ROCKEFELLER CENTER DE U AVENIDA PAULISTA 1337, CJ 171 SAO PAULO, BR	EDUCATION	BR	FOREIGN/EXE	N/A	HPF	X
(4)	BLUE MARBLE HOLDINGS CORP 600 ATLANTIC AVE BOSTON, MA 02210	INV. MGMT.	MA	501 (C) (3)	TYPE I	HPF	X
(5)	BOTSWANA-HARVARD AIDS INSTITUTE PRIVATE BAG BO 320 GABORONE, BC	RESEARCH	BC	FOREIGN/EXE	N/A	HPF	X
(6)	CENTRE RECHERCHE EUROPEEN DE LA HBS 62 RUE FRANCOIS, 1 ER PARIS, FR	RESEARCH SUPP	FR	FOREIGN/EXE	N/A	HPF	X
(7)	DEMETER HOLDINGS CORP 600 ATLANTIC AVE BOSTON, MA 02210	INV. MGMT.	MA	501 (C) (3)	TYPE I	HPF	X

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

Schedule R (Form 990) 2014

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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

(1)	(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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	DOYUKAI FUND FOR HARVARD, INC 800 BOYLSTON ST BOSTON, MA 02199 04-3478889	RESEARCH SUPP	MA	501 (C) (3)	TYPE I	HPF	X
(2)	DUBAI HARVARD FOUNDATION FOR MEDICAL RES 401 PARK DR BOSTON, MA 02215 52-2446955	EDUCATION AND	MA	501 (C) (3)	TYPE I	HPF	X
(3)	ENDOWMENT FOR RESEARCH IN HUMAN BIOLOGY, 160 FEDERAL ST BOSTON, MA 02115 04-2702030	RESEARCH	MA	501 (C) (3)	TYPE III	HPF	X
(4)	FUNDACION CENTRO DE INVESTIGACION DE LA CARLOS PELLEGRINI 1163,PISO 12 BUENOS AIRES, AR 04-3478889	RESEARCH SUPP	AR	FOREIGN/EXE	N/A	HPF	X
(5)	FUNDACION DECLAS CHILE AVENIDA DAG HAMARSKJOLD 3269 SANTIAGO, CI 04-3293162	FACULTY AND S	CI	FOREIGN/EXE	N/A	HPF	X
(6)	GIOVANNI ARMENISE-HARVARD FOUNDATION FOR HMS, DEAN OF FAC OF MED BOSTON, MA 02115 04-3293162	RESEARCH SUPP	MA	501 (C) (3)	TYPE I	HPF	X
(7)	HARVARD BUSINESS SCHOOL INTERACTIVE, INC SOLDIERS FIELD RD BOSTON, MA 02163 04-3395140	EXEC. EDU.	MA	501 (C) (3)	TYPE I	HPF	X

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

Schedule R (Form 990) 2014

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	HARVARD BUSINESS SCHOOL PUBLISHING CORP 20 GUEST ST, STE 700 BRIGHTON, MA 02135 04-3177990	PUBLISHING	MA	501(C)(3)	TYPE I	HPF	X
(2)	HARVARD DEDICATED ENERGY LIMITED 1033 MASS AVE, 3RD FL CAMBRIDGE, MA 02138 03-0425512	ELECTRICITY P	MA	501(C)(3)	TYPE I	HPF	X
(3)	HARVARD GLOBAL RESEARCH AND SUPPORT SERV 114 MOUNT AUBURN ST, 5TH FL CAMBRIDGE, MA 02138 45-4535664	GLOBAL SUPP	MA	501(C)(3)	TYPE I	HPF	X
(4)	HARVARD GLOBAL UK VERNON HOUSE, 22 SICILIAN AVE LONDON, UK 04-6112308	RESEARCH	UK	FOREIGN/EXE	N/A	HARVARD GLOB	X
(5)	HARVARD MAGAZINE, INC 7 WARE ST CAMBRIDGE, MA 02138 23-7361259	PUBLISHING	MA	501(C)(3)	TYPE III	HPF	X
(6)	HARVARD MANAGEMENT COMPANY, INC 600 ATLANTIC AVE BOSTON, MA 02210 04-3070522	INV.NMGMT.	MA	501(C)(3)	TYPE I	HPF	X
(7)	HARVARD MANAGEMENT PRIVATE EQUITY CORP 600 ATLANTIC AVE BOSTON, MA 02210	INV. MGMT.	MA	501(C)(3)	TYPE I	HPF	X

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

Schedule R (Form 990) 2014

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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

(1)	(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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	HARVARD MEDICAL CENTER 25 SHATTUCK ST BOSTON, MA 02115 04-2213292	MEDICAL EDU	MA	501 (C) (3)	TYPE I	N/A	X
(2)	HANSJORG WYSS INST FOR BIO ENGIN AT HARVARD UNIV 3 BLACKFAN CIR, 5 FL, BOSTON MA 02115 30-0773387	RESEARCH	MA	501 (C) (3)	TYPE I	HPF	X
(3)	HARVARD PRIVATE CAPITAL HOLDINGS, INC 600 ATLANTIC AVE. BOSTON, MA 02210 04-3070519	INV. MGMT.	MA	501 (C) (3)	TYPE I	HPF	X
(4)	HARVARD PRIVATE CAPITAL REALTY, INC. 600 ATLANTIC AVE BOSTON, MA 02210 22-3138409	INV. MGMT.	MA	501 (C) (3)	TYPE I	HPF	X
(5)	HARVARD REAL ESTATE - ALLSTON, INC 1033 MASS AVE, 3RD FL CAMBRIDGE, MA 02138 04-3373410	TITLE HOLD. C	MA	501 (C) (25)	N/A	HPF	X
(6)	HARVARD REAL ESTATE, INC 1033 MASS AVE, 3RD FL CAMBRIDGE, MA 02138 04-2649303	RE BROKERAGE	MA	501 (C) (3)	TYPE I	HPF	X
(7)	HARVARD-YENCHING INSTITUTE VANSERG HALL, 25 FRANCIS AVE CAMBRIDGE, MA 02138 04-2062394	EDUCATION	MA	501 (C) (3)	TYPE I	N/A	X

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

Schedule R (Form 990) 2014

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	ION, INC 1350 MASS AVE CAMBRIDGE, MA 02138 22-3032677	RESEARCH	MA	501 (C) (3)	TYPE I	HPF	X
(2)	LONGWOOD MEDICAL ENERGY COLLABORATIVE, I 160 LONGWOOD AVE. BOSTON, MA 02115 04-3476764	ENERGY SERV.	MA	501 (C) (3)	TYPE I	N/A	X
(3)	MASSACHUSETTS GREEN HIGH PERFORMANCE COM 100 BIGELOW ST HOLYOKE, MA 01040 27-3014805	RESEARCH	MA	501 (C) (3)	TYPE I	N/A	X
(4)	MGPCC HOLYOKE, INC 100 BIGELOW ST HOLYOKE, MA 01040 45-2257442	RESEARCH	MA	501 (C) (3)	TYPE I	N/A	X
(5)	PHEMUS CORP 600 ATLANTIC AVE BOSTON, MA 02210 04-2997367	INV. MGMT.	MA	501 (C) (3)	TYPE I	HPF	X
(6)	PRESIDENT AND FELLOWS OF HARVARD COLLEGE 1033 MASS AVE, 3RD FL CAMBRIDGE, MA 02138 04-2103580	EDUC & RES.	MA	501 (C) (3)	2	N/A	X
(7)	PUTNAM SQUARE APARTMENTS, INC HRES, 1350 MASS AVE CAMBRIDGE, MA 02138 04-6251287	REAL ESTATE	MA	501 (C) (3)	9	HPF	X

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

Schedule R (Form 990) 2014

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

HARVARD NEURODISCOVERY CENTER, INC.

Employer identification number

31-1745145

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)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	RED TOP, INC 51-0189788 MURR CTR, 65 NORTH HARVARD ST BOSTON, MA 02163	ATHLETICS	MA	501(C)(3)	TYPE I	HPF	X
(2)	SHIPPING VENTURE CORP 600 ATLANTIC AVE BOSTON, MA 02210	INV. MGMT	MA	501(C)(3)	TYPE I	HPF	X
(3)	STUDENT CLUBS OF HBS, INC SOLDIERS FIELD RD BOSTON, MA 02163	STUDENT SUPP.	MA	501(C)(3)	TYPE I	HPF	X
(4)	THE CARL J SHAPIRO INSTITUTE FOR EDUCAT 330 BROOKLINE AVE BOSTON, MA 02215	MED EDU & RES	MA	501(C)(3)	TYPE I	N/A	X
(5)	TRUSTEES FOR HARVARD UNIVERSITY 1033 MASS AVE, 3RD FL CAMBRIDGE, MA 02138	EDUCATION	DC	501(C)(3)	TYPE II	HPF	X
(6)							
(7)							

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

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) 170 BROADWAY, LLC 46-4145333 767 5TH AVE., STE 2400	INVESTMENTS	DE	N/A	N/A								
(2) 2007 86TH STREET, LLC 46-38480 767 5TH AVE., STE 2400	INVESTMENTS	DE	N/A	N/A								
(3) 441 ROCKAWAY OWNER, LLC 30-082 767 5TH AVE., STE 2400	INVESTMENTS	DE	N/A	N/A								
(4) ALCION REAL ESTATE PARTNERS II ONE POST OFFICE SQUARE, STE 3	INVESTMENTS	DE	N/A	N/A								
(5) ALCION REAL ESTATE PARTNERS, L ONE POST OFFICE SQUARE, STE 3	INVESTMENTS	DE	N/A	N/A								
(6) ALPINE APARTMENTS, LLC 90-0908 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(7) AMERRA AGRI OPPORTUNITY FUND, 1195 AVE OF THE AMERICAS, 18T	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) 2226081 ONTARIO, LTD 333 BAY ST., STE 3400 M5H 2S7 TORONTO, CA	INVESTMENTS	CA	N/A	C CORP				X
(2) 365 CHURCH STREET, LP 4711 YONGE ST., STE 1400 M2N 7E4 TORONTO, CA	INVESTMENTS	CA	N/A	C CORP				X
(3) ADELAIDE-PETER DEVELOPMENTS 4711 YONGE ST., STE 1400 M2N 7E4 TORONTO, CA	INVESTMENTS	CA	N/A	C CORP				X
(4) AGRICOLA BRINZAL, LTDA AV SANTA MARIA 6350, OFICINA 307 VITACURA, CI	INVESTMENTS	CI	N/A	C CORP				X
(5) AGRICOLA DURAMEN, LTDA AV SANTA MARIA 6350, OFICINA 307 VITACURA, CI	INVESTMENTS	CI	N/A	C CORP				X
(6) AGRICOLA E INVERSIONES PAMPA ALEGRE, S A AV SANTA MARIA 6350, OFICINA 307 VITACURA, CI	INVESTMENTS	CI	N/A	C CORP				X
(7) AGRICOLA EL CARDONAL, LTDA DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP				X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ATLANTIC CT HOLDINGS II, LLC 4 65 ENTERPRISE, STE 150	INVESTMENTS	DE	N/A	N/A								
(2) ATLANTIC CT HOLDINGS, LLC 46-2 65 ENTERPRISE, STE 150	INVESTMENTS	DE	N/A	N/A								
(3) ATLANTIC P3 LIFE SCIENCE HOLDI 4380 LAJOLLA VILLAGE DR, STE	INVESTMENTS	DE	N/A	N/A								
(4) ATLANTIC REGENT HOLDINGS, LLC 11990 SAN VICENTE BLVD, STE	INVESTMENTS	DE	N/A	N/A								
(5) ATLANTIC SCIO TO HOLDINGS, LLC 575 MADISON AVE, 16TH FL	INVESTMENTS	DE	N/A	N/A								
(6) ATLANTIC TORONTO, LP 35-238478 HMC INC, 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(7) BAINBRIDGE CC URBANA APARTMENT 12765 W FOREST HILL BLVD, ST	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) AGRICOLA FUNDO BUCALEMU, LTDA DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X
(2) AGRICOLA LOS RIOS, S P A AV SANTA MARIA 6350, OFICINA 307 VITACURA, CI	INVESTMENTS	CI	N/A	C CORP					X
(3) AGRICOLA RAPEL, LTDA DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X
(4) AGRICOLA RETIRO, LTDA DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X
(5) AGRICOLA RIBERA, LTDA DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X
(6) AGROFLORESTAL VERDE SUL, S A RODOVIA RS473, KM 22, R S SALSO DISTRICT MATARAZZO, BR	INVESTMENTS	BR	N/A	C CORP					X
(7) AQUILA, INC WALKER HSE, MARY ST, POB908GT KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) BAUPOST INSTITUTIONAL REALTY P 10 ST JAMES AVE., STE. 1700	INVESTMENTS	MA	N/A	N/A								
(2) BAUPOST INSTITUTIONAL REALTY P 10 ST JAMES AVE., STE. 1700	INVESTMENTS	MA	N/A	N/A								
(3) BAYNORTH REALTY FUND IV, LP 04 200 CLARENDON ST., 54TH FL	INVESTMENTS	MA	N/A	N/A								
(4) BAYNORTH REALTY FUND V, LP 04- 200 CLARENDON ST., 54TH FL	INVESTMENTS	MA	N/A	N/A								
(5) B-BROOK-B, S A R L 98-0558809 20 RUE DE LA POSTE L-2346	INVESTMENTS	LU	N/A	N/A								
(6) BH INVESTMENTS FUND, LLC 04-30 655 THIRD AVE - 11TH FL	INVESTMENTS	DE	N/A	N/A								
(7) BLUE ATLANTIC ACQUISITION GROU 353 NORTH CLARK ST., STE. 730	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) ARA, INC WALKER HSE, MARY ST., POB908GT KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(2) ARACARI, S A P H PLAZA 2000 BLDG., 50TH ST REPUBLIC OF PANAMA, PM	INVESTMENTS	PM	N/A	C CORP					X
(3) ARROWSTREET CAPITAL GLOBAL EQUITY LONG/ P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(4) ASIA LANDMARK SPECIAL FUND, LTD OGIER, 89 NEXUS WAY KY1-9007 CAMANA BAY, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(5) ATLANTIC AVENUE REALTY, LTD P O BOX 309, UGLAND HOUSE GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(6) ATLANTIC CT REIT, INC. 65 ENTERPRISE, STE. 150 ALISO VIEJO, CA 92656	INVESTMENTS	DE	N/A	C CORP					X
(7) ATLANTIC DV HOLDINGS, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) BLUE ATLANTIC ACQUISITION GROU 353 NORTH CLARK ST., STE. 730 BPR CO-INVESTOR, LLC 20-837634	INVESTMENTS	DE	N/A	N/A								
(2) BPR CO-INVESTOR, LLC 20-837634 7121 FAIRWAY DR., STE. 410	INVESTMENTS	DE	N/A	N/A								
(3) BUCKINGHAM ATLANTIC, LLC 46-05 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(4) CA USQUARE, LLC 47-3889463 767 5TH AVE., STE. 2400	INVESTMENTS	DE	N/A	N/A								
(5) CARMEL HOUSE APARTMENTS, LLC 4 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(6) CCC INVESTORS HOLDINGS II, LP 2310 WASHINGTON ST	INVESTMENTS	DE	N/A	N/A								
(7) CCI-B INST, LLC 39-2060908 800 BRAZOS ST., STE. 600	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) ATLANTIC EUROPE INVESTMENTS GP, LTD 50 LOTHIAN RD., FESTIVAL SQUARE EH39WJ EDINBURGH, UK	INVESTMENTS	UK	N/A	C CORP					X
(2) ATLANTIC EUROPE INVESTMENTS, LP 50 LOTHIAN RD., FESTIVAL SQUARE EH39WJ EDINBURGH, UK	INVESTMENTS	UK	N/A	C CORP					X
(3) ATLANTIC FM, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(4) ATLANTIC NBS, LTD 47 ESPLANADE JEI OBD ST HELIER, JE	INVESTMENTS	JE	N/A	C CORP					X
(5) ATLANTIC NREP, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(6) ATLANTIC P3 PROGRAM REIT, INC 4380 LAJOLLA VILLAGE DR., STE. 230 SAN DIEGO, CA 92122	INVESTMENTS	DE	N/A	C CORP					X
(7) ATLANTIC REGENT REIT, INC 11990 SAN VICENTE BLVD., STE. 200 LOS ANGELES, CA 90049	INVESTMENTS	DE	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CERBERUS MA PARTNERS, LP 36-47 190 ELGIN AVE GEORGE TOWN,	INVESTMENTS	CJ	N/A	N/A								
(2) CH NBS, LTD 98-1207239 767 5TH AVE, 24TH FL	INVESTMENTS	JE	N/A	N/A								
(3) CH OCEANSIDE, LLC 46-2568911 767 5TH AVE, STE. 2400	INVESTMENTS	DE	N/A	N/A								
(4) CHAMBERS BURGER PROPERTY, LP 4 CB EQUITY LLC, 1360 AVE OF AM	INVESTMENTS	DE	N/A	N/A								
(5) CHEROKEE INVESTMENT PARTNERS I 111 E. HARGETT ST, STE 300	INVESTMENTS	DE	N/A	N/A								
(6) COMPOSITION CAPITAL ASIA FUND WTC - TOWER D, 12TH FL	INVESTMENTS	NL	N/A	N/A								
(7) CONTEL TELECOM ASSETS, LP 20-3 200 CLARENDON ST	INVESTMENTS	TX	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) ATLANTIC REIT I, INC HMC, INC., 600 ATLANTIC AVE BOSTON, MA 02210	INVESTMENTS	DE	N/A	C CORP				X
(2) ATLANTIC TORONTO 365 CHURCH STREET GENER 355 BURNARD ST., STE 1900 V6C 2G8 VANCOUVER, CA	INVESTMENTS	CA	N/A	C CORP				X
(3) ATLANTIC TORONTO A-P GENERAL PARTNER, IN 355 BURNARD ST, STE 1900 V6C 2G8 VANCOUVER, CA	INVESTMENTS	CA	N/A	C CORP				X
(4) ATLANTIC TORONTO GRENVILLE GENERAL PARTN 355 BURNARD ST, STE 1900 V6C 2G8 VANCOUVER, CA	INVESTMENTS	CA	N/A	C CORP				X
(5) ATLANTIC TORONTO HOLDINGS, INC 355 BURNARD ST., STE 1900 V6C 2G8 VANCOUVER, CA	INVESTMENTS	CA	N/A	C CORP				X
(6) ATLANTIC URBAN RETAIL, INC HMC, INC., 600 ATLANTIC AVE BOSTON, MA 02210	INVESTMENTS	DE	N/A	C CORP				X
(7) AZALEA ROJO, LLC HMC, INC., 600 ATLANTIC AVE BOSTON, MA 02110	INVESTMENTS	DE	N/A	C CORP				X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CORAL SENIOR HOUSING II, LLC 3 1275 PENNSYLVANIA AVE NW, 2ND	INVESTMENTS	DE	N/A	N/A								
(2) CORAL SENIOR HOUSING III, LLC 1275 PENNSYLVANIA AVE NW, 2ND	INVESTMENTS	DE	N/A	N/A								
(3) CORAL SENIOR HOUSING, LLC 27-3 1275 PENNSYLVANIA AVE NW, 2ND	INVESTMENTS	DE	N/A	N/A								
(4) CORAL-FSP INVESTMENT FUND I, L 3820 MANSELL RD, STE 275	INVESTMENTS	DE	N/A	N/A								
(5) CORAL-FSP INVESTMENT FUND II, 1275 PENNSYLVANIA AVE NW, 2ND	INVESTMENTS	DE	N/A	N/A								
(6) CORE EM DIVERSIFIED EQUITY FUN HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(7) CREEKSIDE GLEN APARTMENTS, LLC HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) BAINBRIDGE CC URBANA APARTMENTS REIT, IN 47-1171921 12765 W FOREST HILL BLVD, ST 1307 WELLINGTON, FL 33414	INVESTMENTS	DE	N/A	C CORP					X
(2) BLACK KITE PTY, LTD LEVEL 38, 201 ELIZABETH ST NSW 2000 SYDNEY, AS 98-6063158	INVESTMENTS	AS	N/A	C CORP					X
(3) BLACK KITE TRUST LEVEL 38, 201 ELIZABETH ST NSW 2000 SYDNEY, AS 46-1452116	INVESTMENTS	AS	N/A	C CORP					X
(4) BLUE ATLANTIC INVESTORS II, INC 353 NORTH CLARK ST, STE 730 CHICAGO, IL 60654	INVESTMENTS	DE	N/A	TRUST					X
(5) BLUE ATLANTIC INVESTORS, INC 353 NORTH CLARK ST, STE 730 CHICAGO, IL 60654	INVESTMENTS	DE	N/A	C CORP					X
(6) BLUE ATLANTIC SHUTTLE, LLC 353 NORTH CLARK ST., STE 730 CHICAGO, IL 60654	INVESTMENTS	DE	N/A	C CORP					X
(7) BRODIAEA, INC 5757 PACIFIC AVE., STE 222 STOCKTON, CA 95207	INVESTMENTS	DE	N/A	C CORP					X

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

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							Yes	No		Yes	No	
(1) CROSSPOINT TECHNOLOGY HOLDINGS 300 3RD AVE., STE 2	INVESTMENTS	DE	N/A	N/A								
(2) CROWN ATLANTIC INTL OLIVE, LLC 767 5TH AVE., STE 2400	INVESTMENTS	DE	N/A	N/A								
(3) CROWN ATLANTIC RETAIL, LLC 46- 767 5TH AVE., STE. 2400	INVESTMENTS	DE	N/A	N/A								
(4) CROWN ICS 5TH ACQUISITIONS, LL 767 5TH AVE., STE 2400	INVESTMENTS	DE	N/A	N/A								
(5) CROWN SRP, LLC 47-2106149 767 5TH AVE., STE 2400	INVESTMENTS	DE	N/A	N/A								
(6) CSH-STAR ESCONDIDO, LLC 61-167 1275 PENNSYLVANIA AVE NW, 2ND	INVESTMENTS	DE	N/A	N/A								
(7) CVI CHVE, LP 80-0941373 9320 EXCELSIOR BLVD.	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CARACARA, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(2) CARACOL AGROPECUARIA, LTDA AV. CARLOS GOMES 1200, SALA 502 CEP 9048 PORTO ALEGRE, B	INVESTMENTS	BR	N/A	C CORP					X
(3) CCA JAPAN INVESTMENT, B V WTC - TOWER D, 12TH FL 1077 XV AMSTERDAM, NL	INVESTMENTS	NL	N/A	C CORP					X
(4) CENTRO HARVARD-D ROCKEFELLAR PARA ESTUD EDIF BALMORI, ORIZABA 101-102 COL MEXICO CITY D F, MX	FACULTY AND STUDE	MX	N/A	C CORP					X
(5) CHARITABLE LEAD TRUSTS (44)	CHARITABLE TRUST	MA	N/A	TRUST					X
(6) CHARITABLE REMAINDER TRUSTS (778)	CHARITABLE TRUST	MA	N/A	TRUST					X
(7) CHENNAI 2007 CO IFS LTD, IFS COURT, TWENTY EIGH CYBERCITY, MP	INVESTMENTS	MP	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CYPRESS CREEK APARTMENTS, LLC HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(2) CYPRESS REALTY IV, LP 74-30001 301 CONGRESS AVE., STE 500	INVESTMENTS	DE	N/A	N/A								
(3) DENHAM COMMODITY PARTNERS FUND 200 CLARENDON ST., 25TH FL	INVESTMENTS	DE	N/A	N/A								
(4) DENHAM COMMODITY PARTNERS FUND 200 CLARENDON ST., 25TH FL	INVESTMENTS	DE	N/A	N/A								
(5) DEVONIAN, LLC 90-0721046 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(6) DS CO-INVESTORS, LLC 55-091180 7121 FAIRWAY DR., STE 410	INVESTMENTS	DE	N/A	N/A								
(7) EAE ATLANTIC, LLC 36-4743445 1065 AVE. OF THE AMERICAS, 31S	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) CHEVAL SP PARTICIPACOES, LTDA RUA DO FORUM, SN, SALA B CEP 64840 CENTRO, BR	INVESTMENTS	BR	N/A	C CORP				X
(2) CLAG (CHILE), S P A DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP				X
(3) COMPOSITION CAPITAL ASIA FUND, C V WTC - TOWER D, 12TH FL 1077 XV AMSTERDAM, NL	INVESTMENTS	NL	N/A	C CORP				X
(4) COMPOSITION CAPITAL ASIA II FEEDER, C V WTC - TOWER D, 12TH FL 1077 XV AMSTERDAM, NL	INVESTMENTS	NL	N/A	C CORP				X
(5) COMPOSITION CAPITAL EUROPE FUND, C V WTC - TOWER D, 12TH FL 1077 XV AMSTERDAM, NL	INVESTMENTS	NL	N/A	C CORP				X
(6) COMPOSITION CAPITAL EUROPE II FEEDER, C WTC - TOWER D, 12TH FL 1077 XV AMSTERDAM, NL	INVESTMENTS	NL	N/A	C CORP				X
(7) COMPOSITION FEEDER, GMBH BOSENSTRASSE 2-4 60313 60313 FRANKFURT AM MAIN, GM	INVESTMENTS	GM	N/A	C CORP				X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) GAVEA JUS BG 1 - MASTER, LP 46 3500 S DUPONT HWY	INVESTMENTS	DE	N/A	N/A								
(2) GBE INVESTMENTS, LP POB 309GT, UGLAND HOUSE, S CHURCH	INVESTMENTS	CJ	N/A	N/A								
(3) GERRITY ATLANTIC RETAIL PARTNE 977 LOMAS SANTA FE DR., STE. A	INVESTMENTS	DE	N/A	N/A								
(4) GREENFIELD BIR FINANCE PARTNER 50 NORTH WATER ST	INVESTMENTS	DE	N/A	N/A								
(5) GREENFIELD BIR PARTNERS, LP 20 50 NORTH WATER ST	INVESTMENTS	DE	N/A	N/A								
(6) GREENHAVEN APARTMENTS, LLC 27- HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(7) GUEPARDO MASTER FUND, LLC 98-0 700, 14 ANDAR SAO PAULO,	INVESTMENTS	BR	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) COMTEL ASSETS CORP 433 E LAS CALINAS BL IRVING, TX 75039	INVESTMENTS	DE	N/A	C CORP				X
(2) COMTEL ASSETS, INC 433 E LAS CALINAS BL IRVING, TX 75039	INVESTMENTS	DE	N/A	C CORP				X
(3) COOPERATIE CC ASIA KOREA FEEDER, U.A WTC - TOWER D, 12TH FL 1077 XV AMSTERDAM, NL	INVESTMENTS	NL	N/A	C CORP				X
(4) COPAYAPU, S P A 2939 AV ISIDORA GOYENECHEA, 11 FL LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP				X
(5) CSH PROGRAM REIT II, INC 1275 PENNSYLVANIA AVE, NW, 2ND FL WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP				X
(6) CSH PROGRAM REIT III, INC 1275 PENNSYLVANIA AVE, NW, 2ND FL WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP				X
(7) CSH PROGRAM REIT, INC 1275 PENNSYLVANIA AVE, NW, 2ND FL WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP				X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) HAMPDEN INSURANCE PARTNERS I, 94 SOLARIS AVE CANANA BAY, HARVARD COMMINGLED ACCOUNT 04-	INVESTMENTS	CJ	N/A	N/A								
HMC INC., 600 ATLANTIC AVE	INVESTMENTS	MA	N/A	N/A								
(3) HARVARD CV, LLC 80-0641747 1033 MASS AVE., 3RD FL	REAL ESTATE	MA	N/A	N/A								
(4) HARVARD INVESTMENT ASSOCIATES HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(5) HB INSTITUTIONAL, LP 04-342568 10 ST JAMES AVE., STE. 1700	INVESTMENTS	MA	N/A	N/A								
(6) HFMM 770 BAY, LP 250 YONGE ST., STE. 2400	INVESTMENTS	CA	N/A	N/A								
(7) HFMM, LP 4711 YONGE ST., STE. 1400	INVESTMENTS	CA	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CSH TRS HOLDING II, LLC 1275 PENNSYLVANIA AVE., NW, 2ND FL. WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP					X
(2) CSH TRS HOLDING III, LLC 1275 PENNSYLVANIA AVE., NW, 2ND FL. WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP					X
(3) CSH TRS HOLDING IV, LLC 1275 PENNSYLVANIA AVE., NW, 2ND FL. WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP					X
(4) CSH TRS HOLDING, LLC 1275 PENNSYLVANIA AVE., NW, 2ND FL. WASHINGTON, DC 20004	INVESTMENTS	DE	N/A	C CORP					X
(5) DAIRY FARMS PARTNERSHIP 113 RUTHERFORD RD. PUKEKOHE, NZ	INVESTMENTS	NZ	N/A	C CORP					X
(6) DG PARTICIPANTS, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(7) EAE ATLANTIC I, INC 1065 AVE. OF THE AMERICAS, 31ST FL. NEW YORK, NY 10024	INVESTMENTS	DE	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) HMC JUWHEEL HOLDINGS, LP PO BOX 309, UGLAND HOUSE	INVESTMENTS	CJ	N/A	N/A								
(2) IEC ATLANTIC I, LLC 27-3609237 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(3) IEC ATLANTIC II, LLC 37-165736 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(4) IEC ATLANTIC III, LLC 32-03904 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(5) IEC BREAKWATER, LLC 45-4447102 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(6) IEC HIDDEN CREEK, LLC 45-30830 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(7) IEC JEFFERSON 2, LLC 45-546616 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) EAE ATLANTIC II, INC 1065 AVE OF THE AMERICAS, 31ST FL. NEW YORK, NY 10024 80-0954229	INVESTMENTS	DE	N/A	C CORP					X
(2) EAE ATLANTIC III, INC 1065 AVE OF THE AMERICAS, 31ST FL. 10024 NEW YORK, NY 30-0835462	INVESTMENTS	DE	N/A	C CORP					X
(3) EASTERN ROSELLA TRUST 201 ELIZABETH ST NSW 2000 SYDNEY, AS 98-1131698	AGRICULTURE	AS	N/A	C CORP					X
(4) ECO CEBACO, S A 52 Y E MENDEZ, P O BOX 0816-06805	INVESTMENTS	PM	N/A	C CORP					X
(5) ECONOMIZA AGROPECUARIA, LTDA ESTADA GERAL COND BOA ESPERANCA GRANDE DO RIBEIRO, BR 98-0492706	INVESTMENTS	BR	N/A	C CORP					X
(6) ECUADOR TIMBER, LP P O BOX 309, UGLAND HOUSE KY1-1104	INVESTMENTS	CJ	N/A	C CORP					X
(7) EL MARIA, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP					X

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) IEC JEFFERSON, LLC 45-3679129 HMC INC., 600 ATLANTIC AVE.	INVESTMENTS	DE	N/A	N/A								
(2) IEC NINTH AVE, LLC 45-5466236 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(3) INDY BLUE EQUITY, LLC 45-36688 1360 AVE. OF AMERICA	INVESTMENTS	DE	N/A	N/A								
(4) IRON POINT CO-INVESTMENT I, LL 201 MAIN ST., STE 2300	INVESTMENTS	DE	N/A	N/A								
(5) IRON POINT REAL ESTATE PARTNER 201 MAIN ST., STE 2300	INVESTMENTS	DE	N/A	N/A								
(6) IRON POINT REAL ESTATE PARTNER 201 MAIN ST., STE 2300	INVESTMENTS	DE	N/A	N/A								
(7) IRON POINT REAL ESTATE PARTNER 201 MAIN ST., STE 2300	INVESTMENTS	TX	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) EMBARCADERO CAPITAL INVESTORS II REIT, I 1301 SHOREWAY RD., STE 250 BELMONT, CA 94002	INVESTMENTS	MD	N/A	C CORP					X
(2) EMERALD CATASTROPHE FUND, LTD STE 193, 48 PAR-LA-VILLE RD HM 11 HAMILTON, BD	INVESTMENTS	BD	N/A	C CORP					X
(3) EMPRESA ECOLOGICA DEL ORINOCO, S A S CRA 9 NO 77 - 67, OFC 804 BOGOTA D C, CO	INVESTMENTS	CO	N/A	C CORP					X
(4) EMPRESAS VERDES ARGENTINA, S A CARLOS PELLEGRINI 1138 PISO 1 W3400BAT CORRIENTES, AR	INVESTMENTS	AR	N/A	C CORP					X
(5) ESTANCIA CELINA, S A SUIPACHA 1111 - PISO 18 C1008AAW BUENOS AIRES, AR	INVESTMENTS	AR	N/A	C CORP					X
(6) FLAMENCO, S.P.A 2939 AVE ISIDORA GOYEN, 11 EL LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X
(7) FLORESTAS DO SUL AGROFLORESTAL, LTDA RUA TAQUARY, 335 DRISTAL CEP 90810 PORTO ALEGRE, BR	INVESTMENTS	BR	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ISIA VISTA ACQUISITION GROUP, 353 NORTH CLARK ST., STE. 730 ISLAND C-III ATLANTIC HOLDINGS	INVESTMENTS	DE	N/A	N/A								
(2) 300 N MAIN ST., STE. 402 JEN CAPITAL II REAL ESTATE FUN	INVESTMENTS	DE	N/A	N/A								
(3) 19 WORLDWIDE HOUSE, 19 DES. VOE L-A SATURN ACQUISITION, LP 30-	INVESTMENTS	CH	N/A	N/A								
(4) HMC INC., 600 ATLANTIC AVE LIQUID REALTY PARTNERS, IV (PFL	INVESTMENTS	DE	N/A	N/A								
(5) 101 MARKET ST., #769 CAMANA BA LIQUID REALTY PARTNERS, IV INVE	INVESTMENTS	CJ	N/A	N/A								
(6) 199 E LINDA MESA AVE., #10 LIQUID REALTY PARTNERS, IV INVE	INVESTMENTS	DE	N/A	N/A								
(7) 199 E LINDA MESA AVE., #10	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) FORESTAL BOSQUEPALM CIA, LTDA AVE PATRIA E4-41 Y AVE. AM, FL5, OFC5 QUITO, EC	INVESTMENTS	EC	N/A	C CORP					X
(2) FORESTAL DEL RIO, S.A CARLOS PELLEGRINI 1138 PISO 1 W3400BAT CORRIENTES, AR	INVESTMENTS	AR	N/A	C CORP					X
(3) FORESTAL FORESVERGAL CIA, LTDA AVE PATRIA E4-41 Y AVE. AM, FL5, OFC5 QUITO, EC	INVESTMENTS	EC	N/A	C CORP					X
(4) FORTALEZA AGROINDUSTRIAL, LTDA FAZENDA FORTALEZA, SN - ZONA RURAL SANTA FILOMENA, BR	INVESTMENTS	BR	N/A	C CORP					X
(5) FRANCOLIN P O BOX 309, UGLAND HOUSE KY1-1104	INVESTMENTS	CJ	N/A	C CORP					X
(6) FRIENDS OF HARVARD HONG KONG TRUST 8 STORY ST. CAMBRIDGE, MA 02138	TRUST FOR CONTRIB	HK	N/A	TRUST					X
(7) FSP TRS HOLDING, LP 3820 MANSELL RD., STE. 275 ALPARETTA, GA 30022	INVESTMENTS	DE	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) LIQUID REALTY PARTNERS IV TAX 101 MARKET ST., #769 CAMANA BA	INVESTMENTS	CJ	N/A	N/A								
(2) LMI PEARL APARTMENT HOMES HOLD 700 NW 107TH AVE., STE. 400	INVESTMENTS	DE	N/A	N/A								
(3) LONGFELLOW ATLANTIC HOLDINGS, 260 FRANKLIN ST.	INVESTMENTS	DE	N/A	N/A								
(4) LUBERT-ADLER CAPITAL REAL ESTA 2929 ARCH ST., STE. 1650	INVESTMENTS	DE	N/A	N/A								
(5) LUBERT-ADLER REAL ESTATE FUND 2929 ARCH ST., STE. 1650	INVESTMENTS	DE	N/A	N/A								
(6) MCRB, LLC 46-1235435 152 WEST 57TH ST., 46TH FL.	INVESTMENTS	DE	N/A	N/A								
(7) MCRS, LLC 27-3637201 152 WEST 57TH ST., 46TH FL.	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) GALILEIA AGROINDUSTRIAL, LTDA AV. PEDROSO DE MORAES, 1201, 2AN, S4 PINHEIROS, BR	INVESTMENTS	BR	N/A	C CORP					X
(2) GATEWAY REAL ESTATE FUND III - TE, LP 22ND FL., 1 LYNHURST TOWER KY1-1111 HONG KONG, HK	INVESTMENTS	CH	N/A	C CORP					X
(3) GAVEA INVESTMENT FUND II B, LP PO886, GARD CRT, STE. 3307, 45 MKT ST KY1- CAMANA BAY, CJ	TRADING	CJ	N/A	C CORP					X
(4) GAVEA JUS BG 1 - FEEDER, LP P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(5) GAVEA JUS BRAZILIAN GOVERNMENT LIABILITY POB 896GT, GARD CRT, S3307, 45 MKT ST KY1- CAMANA BAY, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(6) GBE DEVELOPMENT I, LTD PO 309GT, UGLAND HSE, S CHURCH ST. GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(7) GBE DEVELOPMENT II, LTD PO 309GT, UGLAND HSE, S CHURCH ST. GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) MDH ATLANTIC HOLDINGS, LLC 46-3715 NSIDE PKWY NW, BDLG400, S	INVESTMENTS	DE	N/A	N/A								
(2) PATIO GARDENS, LLC 45-5311665 HMC INC, 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(3) PSI ATLANTIC HOLDINGS, LLC 46-530 OAK COURT DR, STE 185	INVESTMENTS	DE	N/A	N/A								
(4) PUTNAM SQUARE APTS CO, LP 04 HRES, 1350 MASS AVE	REAL ESTATE	MA	N/A	N/A								
(5) QUEENS VENTURES, LLC 80-096366 1065 AVE OF THE AMERICAS, 315	INVESTMENTS	DE	N/A	N/A								
(6) ROUND TABLE INTEREST RATE INTE WINDWARD I, 2FL, REG OFC PRK W	INVESTMENTS	CJ	N/A	N/A								
(7) RUBY ATLANTIC AJCP HOLDINGS, L 133 NORTH JEFFERSON ST, 4TH F	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
(1) GBE DEVELOPMENT III, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(2) GBE DEVELOPMENT IV, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(3) GBE DEVELOPMENT V, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(4) GBE DEVELOPMENT VI, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(5) GBE FAZENDAS, LTD AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	CJ	N/A	C CORP				X
(6) GBE HOLDINGS, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	BR	N/A	C CORP				X
(7) GBE INVESTMENTS, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
								X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) SOIL INNOVATIONS, LLC 90-05384 AV DR CARDOSO DE MELO, 1340-11	INVESTMENTS	DE	N/A	N/A								
(2) SOUTHWOOD GARDENS, LLC 45-4154 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(3) TETRIS PROPERTY, LP 46-1625319 1360 AVE. OF AMERICAS	INVESTMENTS	DE	N/A	N/A								
(4) THE ECO PRODUCTS FUND 26-13299 400 MADISON AVE., STE 14A	INVESTMENTS	DE	N/A	N/A								
(5) THE TRITON FUND II NO. 2, LP 22 GRENVILLE ST ST HELIER,	INVESTMENTS	JE	N/A	N/A								
(6) THE VILLAGE 1, LLC 45-3419666 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(7) THE VILLAGE 2, LLC 45-3159941 HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) GBE PROJETOS AGRICOLAS II, LTDA AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP					X
(2) GBE PROJETOS AGRICOLAS VII, LTDA RUA DO FORUM, SN, SALA B CEP 64840 CENTRO, BR	INVESTMENTS	BR	N/A	C CORP					X
(3) GBE PROPERTIES I, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(4) GBE PROPERTIES II, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(5) GBE PROPERTIES III, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(6) GBE PROPERTIES IV, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(7) GBE PROPERTIES V, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1085)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) THE WILDHORN FUND, LP 98-05272 POB1234 GT., QUNSGTE HSE, S CRCH	INVESTMENTS	CJ	N/A	N/A								
(2) TRAVIS COAL RESTRUCTURED HOLDI 200 CLARENDON ST	INVESTMENTS	DE	N/A	N/A								
(3) USRA ATLANTIC CAPITAL PARTNERS 1360 AVE OF AMERICA	INVESTMENTS	DE	N/A	N/A								
(4) VERBENA, LLC DBA PURPLE VERBEN HMC INC., 600 ATLANTIC AVE	INVESTMENTS	DE	N/A	N/A								
(5) WASHINGTON HEIGHTS I, LLC 80-0 1065 AVE. O THE AMER, 31ST FL	INVESTMENTS	DE	N/A	N/A								
(6) WBH KIRBY HILL CO-INVESTMENT, 7121 FAIRWAY DR., STE 410	INVESTMENTS	DE	N/A	N/A								
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) GBE PROPERTIES VI, LTD PO 309GT, UGLAND HSE, S CHURCH ST. GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(2) GBE PROPIEDADES E EMPREENDIMENTOS IMOBI AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP				X
(3) GBE PROPIEDADES E EMPREENDIMENTOS IMOBI AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP				X
(4) GBE PROPIEDADES E EMPREENDIMENTOS IMOBI AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP				X
(5) GBE PROPIEDADES E EMPREENDIMENTOS MINAS AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP				X
(6) GBE PROPIEDADES GUADALUPE, LTDA RUA DO FORUM, SN, SALA B CEP 64840 CENTRO, BR	INVESTMENTS	BR	N/A	C CORP				X
(7) GERRY ATLANTIC RETAIL PARTNERS II, INC 977 LOMAS SANTA FE DR., STE A SOLANA BEACH, CA 92075	INVESTMENTS	DE	N/A	C CORP				X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
(1) GERRITY ATLANTIC RETAIL PARTNERS, INC 977 LOMAS SANTA FE DR, STE A SOLANA BEACH, CA 92075	INVESTMENTS	DE	N/A	C CORP				X
(2) GRANARY INVESTMENTS IFS COURT, TWENTY EIGHT CYBERCITY, MP	INVESTMENTS	MP	N/A	C CORP				X
(3) GREEN ROSELLA TRUST 201 ELIZABETH ST NSW 2000 SYDNEY, AS	AGRICULTURE	AS	N/A	C CORP				X
(4) GREENGOLD AGRIROM, S R L 24 CONSTANTIN NOICA ST	INVESTMENTS	RO	N/A	C CORP				X
(5) GREENGOLD EUROPEAN CAPITAL, S A 5, RUE GUILLAUME KROLL L-1882	INVESTMENTS	LU	N/A	C CORP				X
(6) GREENGOLD FUTURE TREES, S R L 14 BIHORULUI ST, BLOCK 21, APP 62	INVESTMENTS	RO	N/A	C CORP				X
(7) GREENGOLD VALUE FORESTS LATVIA, S I A KULDIGAS RAJONS, KURM PAGASTS 3301 BRALI, LG	INVESTMENTS	LG	N/A	C CORP				X

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

line 34 because it had one or more related organizations located in a foreign country for the tax year.									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes No	
(1) GREENGOLD VALUE FORESTS LITHUANIA, U A B 98-1117259 JOGAILIOS G 9 LT-01116 VILNIUS, LH	INVESTMENTS	LH	N/A	C CORP				X	
(2) GREENGOLD VALUE FORESTS, S R L 24 CONSTANTIN NOICA ST	INVESTMENTS	RO	N/A	C CORP				X	
(3) GUANARE, A A R L 98-0641951 JUNCAL 1327, 21 FL 11000 MONTEVIDEO, UY	INVESTMENTS	UY	N/A	C CORP				X	
(4) GUANARE, S A JUNCAL 1327, 21 FL 11000 MONTEVIDEO, UY	INVESTMENTS	UY	N/A	C CORP				X	
(5) HARVARD ARASTIRMA VE EGITIM MERKEZI ISTA 185 BUYUKDERE CAD, KANYON OFIS 3 34394 INSTANBUL, TU	RESEARCH SUPPORT	TU	N/A	C CORP				X	
(6) HARVARD BUSINESS SCHOOL PUBLISHING ASIA 80 RAFFLES PL, #25-01, UOB PLAZA	SALES SUPPORT	SN	N/A	C CORP				X	
(7) HARVARD BUSINESS SCHOOL PUBLISHING EUROP 23 SICILIAN AVE LONDON, UK	SALES SUPPORT	UK	N/A	C CORP				X	

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) HARVARD BUSINESS SCHOOL PUBLISHING FRANC 23 RUE DU ROULE PARIS, FR	SALES SUPPORT	FR	N/A	C CORP					X
(2) HARVARD BUSINESS SCHOOL PUBLISHING INDIA UNIT #423, GRAND HYATT MUMBAI MUMBAI, IN	PUBLISHING SUPPORT	IN	N/A	C CORP					X
(3) HARVARD CENTER SHANGHAI CO., LTD 5TH FL INTL FIN CTR, 8 CENT AVE 20012 SHANGHAI, CH	RESEARCH SUPPORT	CH	N/A	C CORP					X
(4) HARVARD PRIVATE CAPITAL PROPERTIES II, I HMC, INC., 600 ATLANTIC AVE BOSTON, MA 02110	INVESTMENTS	DE	N/A	C CORP					X
(5) HARVARD PRIVATE CAPITAL PROPERTIES III, HMC, INC., 600 ATLANTIC AVE BOSTON, MA 02110	INVESTMENTS	DE	N/A	C CORP					X
(6) HARVARD UNIVERSITY PRESS OF NEW YORK HU PRESS, 79 GARDEN ST CAMBRIDGE, MA 02138	PUBLISHING	NY	N/A	C CORP					X
(7) HARVARD UNIVERSITY PRESS, LTD VERNON HOUSE, 23 SICILIAN AVE LONDON, UK	BOOK DISTRIBUTION	UK	N/A	C CORP					X

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) HB CAYMAN, LTD P O BOX 309 GT	INVESTMENTS	CJ	N/A	C CORP				X
(2) HG GULF FZ, LLC MAKTUUM ACAD MED CTR 2 FL DUBAI, AE	EDUCATION AND RES	AE	N/A	C CORP				X
(3) HMC ADAGE MANAGER, INC HMC, INC, 600 ATLANTIC AVE BOSTON, MA 02110	INVESTMENTS	DE	N/A	C CORP				X
(4) HMC JUWEL INVESTORS, LP P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(5) HOUND PARTNERS LONG FUND, LTD 89 NEXUS WAY KY1-9007 CAMANA BAY, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(6) HPC PATRON SCOTLAND, LP 50 LOTHIAN RD, FESTIVAL SQUARE EH3 9BY EDINBURGH, UK	INVESTMENTS	UK	N/A	C CORP				X
(7) INSOLO AGROINDUSTRIAL, S A AV PEDROSO DE MORAES, 1201, 2AM, S4 PINHEIROS, BR	INVESTMENTS	BR	N/A	C CORP				X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) INVERSIONES CATIVAL, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NI 98-11111292	INVESTMENTS	NI	N/A	C CORP				X
(2) INVERSIONES HEFEI, S A C LAS BEGONIAS 475, 6TH FL SAN ISIDORO, PE 98-11110859	INVESTMENTS	PE	N/A	C CORP				X
(3) INVERSIONES LEFKADA, S A C LAS BEGONIAS 475, 6TH FL SAN ISIDORO, PE 98-11110734	INVESTMENTS	PE	N/A	C CORP				X
(4) INVERSIONES MOSQUETA, S A C LAS BEGONIAS 475, 6TH FL SAN ISIDORO, PE 98-11111636	INVESTMENTS	PE	N/A	C CORP				X
(5) INVERSIONES PIRONA, S A C LAS BEGONIAS 475, 6TH FL SAN ISIDORO, PE	INVESTMENTS	PE	N/A	C CORP				X
(6) INVERSIONES SANTA RITA, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU 98-0446986	INVESTMENTS	NU	N/A	C CORP				X
(7) INVERSIONES TRES CUMBRES, LTDA ROGER DE FLOR 2736 DE 8 COMUNA LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP				X

Schedule R (Form 990) 2014

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

line 34 because it had one or more related organizations treated as a corporation or trust for

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
									Yes No
(1)	IPE AGROINDUSTRIAL, LTDA AV. PEDROSO DE MORAES, 1201, 2AN, S4 PINHEIROS, BR 27-3070185	INVESTMENTS	BR	N/A	C CORP				X
(2)	ISLA VISTA FOOD SERVICES, LLC 353 NORTH CLARK ST , STE 730 CHICAGO, IL 60654	INVESTMENTS	DE	N/A	C CORP				X
(3)	ISLA VISTA INVESTORS, INC 353 NORTH CLARK ST , STE 730 CHICAGO, IL 60654	INVESTMENTS	DE	N/A	C CORP				X
(4)	JACANA PROPERTIES, S A P H PLAZA 2000 BLDG , 50TH ST REPUBLIC OF PANAMA, PM	INVESTMENTS	PM	N/A	C CORP				X
(5)	JUNCO PROPERTIES, S A P H. PLAZA 2000 BLDG , 50TH ST REPUBLIC OF PANAMA, PM	INVESTMENTS	PM	N/A	C CORP				X
(6)	LA JACARANDA, S A V FINI, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X
(7)	LA MORA, S A V FINI, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

ning 34 because it had one or more related organizations treated as a corporation for at least one of the ten years.									
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
									Yes No
(1)	LA ZARZA, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X
(2)	LABELLE SP PARTICIPACOES, LTDA RUA DO FORUM, SN, SALA B CEP 64840 CENTRO, BR	INVESTMENTS	BR	N/A	C CORP				X
(3)	LAS ACACIAS, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X
(4)	LAS MISIONES, S A SUTPACHA 1111 - PISO 18 C1008AAW BUENOS AIRES, AR	INVESTMENTS	AR	N/A	C CORP				X
(5)	LASALLE ASIA OPPORTUNITY CAYMAN I, LTD P O BOX 309, UGLAND HOUSE GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(6)	LIFETIME CENTRE COURT GRENVILLE, LP 22 ST CLAIR AVE EAST, STE 1010 M4T 2S TORONTO, CA	INVESTMENTS	CA	N/A	C CORP				X
(7)	LINDENE, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X

Schedule R (Form 990) 2014

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

Filing of Form 277E by U.S. persons who are shareholders of, or have a beneficial ownership interest in, a foreign entity									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes No	
(1) LIQUID REALTY PARTNERS IV TAX EXEMPT (PF) 199 E LINDA MESA AVE., #10 DANVILLE, CA 94526 98-0560775	INVESTMENTS	JE	N/A	C CORP				X	
(2) LIQUID REALTY PARTNERS IV TAX EXEMPT (PF) 199 E LINDA MESA AVE., #10 DANVILLE, CA 94526 98-0555927	INVESTMENTS	JE	N/A	C CORP				X	
(3) LONGFELLOW ATLANTIC REIT, INC 260 FRANKLIN ST BOSTON, MA 02110 46-4628691	INVESTMENTS	DE	N/A	C CORP				X	
(4) LONGSTOCKING INVESTMENT CORP HMC, INC, 600 ATLANTIC AVE BOSTON, MA 02210 52-2116455	INVESTMENTS	MA	N/A	C CORP				X	
(5) LONGTERM FOREST PARTNERS CIA, LTDA AVE PATRIA E4-41 Y AVE AM, FL5, OFC5 QUITO, EC	INVESTMENTS	EC	N/A	C CORP				X	
(6) LOS ARRAYANES, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X	
(7) LOS LAURELES, S A V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X	

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) MAGUARI, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-1097957	INVESTMENTS	CJ	N/A	C CORP					X
(2) MASDEVALLIA, LTD P.O. BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-1083311	INVESTMENTS	CJ	N/A	C CORP					X
(3) MCRB REAL ESTATE INVESTMENT TRUST, INC 152 WEST 57TH ST, 46TH FL NEW YORK, NY 10019 46-1195422	INVESTMENTS	DE	N/A	C CORP					X
(4) MCRB TENANT HOLDCO, LLC 152 WEST 57TH ST, 46TH FL NEW YORK, NY 10019 46-1195591	INVESTMENTS	DE	N/A	C CORP					X
(5) MCBS REAL ESTATE INVESTMENT TRUST, INC 152 WEST 57TH ST, 46TH FL NEW YORK, NY 10019 27-3605599	INVESTMENTS	DE	N/A	C CORP					X
(6) MCBS TENANT HOLDCO, LLC 152 WEST 57TH ST, 46TH FL NEW YORK, NY 10019 27-3869467	INVESTMENTS	DE	N/A	C CORP					X
(7) MDH ATLANTIC REIT, INC 3715 NSIDE PKWY, BLDG 400, S240 ATLANTA, GA 30327 46-5247314	INVESTMENTS	DE	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) MIRABILIS, S. A. CALLE LAS BEGONIAS 475, DPTO. 702 SAN ISIDORO, PE	INVESTMENTS	PE	N/A	C CORP					X
(2) NAZARE AGROINDUSTRIAL, LTDA AV. PEDROSO DE MORAES, 1201, 2AN, S4 PINHEIROS, BR	INVESTMENTS	BR	N/A	C CORP					X
(3) NCH AGRIBUSINESS INVESTORS CORP PO 309GT, UGLAND HSE, S CHURCH ST KY1-1 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(4) NCH INVESTORS FUND (HU) CORP P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(5) NEW VERNON INDIA (CAYMAN) FUND, LP 2330 PLAZA FIVE JERSEY CITY, NJ 07311	INVESTMENTS	CJ	N/A	C CORP					X
(6) NGL HOLDINGS, INC 200 CLARENDON ST BOSTON, MA 02116	INVESTMENTS	DE	N/A	C CORP					X
(7) NICA TECA, S. A. V FINT, DEL CL TER 2 C ABAJO, 1 C AL MANAGUA, NI	INVESTMENTS	NI	N/A	C CORP					X

Schedule R (Form 990) 2014

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) NICARAO I, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-0643167	INVESTMENTS	CJ	N/A	C CORP				X
(2) NICARAO II, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-0643169	INVESTMENTS	CJ	N/A	C CORP				X
(3) NICARAO, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-0643164	INVESTMENTS	CJ	N/A	C CORP				X
(4) NICATECA, INC WALKER HOUSE, 87 MARY ST GEORGE TOWN, CJ 98-0520487	INVESTMENTS	CJ	N/A	C CORP				X
(5) OPERA, S A V FINT, DEL CL TER 2 C ABAJO, I C AL MANAGUA, NI	INVESTMENTS	NI	N/A	C CORP				X
(6) PARFEN, S R L JUNCAL 1305, 21 FL MONTEVIDEO, UY	INVESTMENTS	UY	N/A	C CORP				X
(7) PATRIOT INTEREST HOLDINGS, INC 200 CLARENDON ST BOSTON, MA 02116 01-0938844	INVESTMENTS	DE	N/A	C CORP				X

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.

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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.

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)	PEARL RETAIL, INC P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, MA CJ 98-1048757	INVESTMENTS	CJ	N/A	C CORP					X
(2)	PERMIAN MIDSTREAM CORP 200 CLARENDON ST BOSTON, MA 02116 01-0938834	INVESTMENTS	TX	N/A	C CORP					X
(3)	PINARES, A A R L JUNCAL 1305, 21 FE 11000 MONTEVIDEO, MA UY 98-0641950	INVESTMENTS	UY	N/A	C CORP					X
(4)	POOLED INCOME FUNDS (3)									
(5)	PRADARIA AGROFLORESTAL, LTDA AVE ALFONSO PENA, 3 504, RM 73, CTR CEP CAMPO GRANDE, BR 98-0642732	CHARITABLE TRUST	MA	N/A	TRUST					X
(6)	PROMONTORIA HOLDING MAP, B V OUDE UTRECHTSEWEG 32 3643 KN BAARN, NL	INVESTMENTS	BR	N/A	C CORP					X
(7)	PSI ATLANTIC REIT, INC 530 OAK COURT DR, STE. 185 MEMPHIS, TN 37117 46-4502358	INVESTMENTS	NL	N/A	C CORP					X
			DE	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
(1) PSI ATLANTIC TRS, LLC 530 OAK COURT DR, STE 185 MEMPHIS, 37117 PULAR, S P A.	INVESTMENTS	DE	N/A	C CORP				X
(2) 2939 AV ISIDORA GOYENECHEA, 11 FL LAS CONDES, CI QUETZAL BLUE, S A	INVESTMENTS	CI	N/A	C CORP				X
(3) CALLE 52, Y ELVIRA MENDEZ PANAMAN, PM REGENT OFFICE FUND II REIT	INVESTMENTS	PM	N/A	C CORP				X
(4) HMC, INC, 600 ATLANTIC AVE BOSTON, MA 02210	INVESTMENTS	DE	N/A	C CORP				X
(5) REPRESA PROPERTIES, LTD PO 309GT, UGLAND HSE, S CHURCH ST GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(6) RETIREMENT PLAN TRUST FOR EMPLOYEES OF H 1033 MASS AVE, 3RD FL CAMBRIDGE, MA 02138	INVESTMENTS	MA	N/A	TRUST				X
(7) RIO MIRA PARTICIPACOES, LTDA AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP				X

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) ROARING FORK INVESTMENT TRUST 250 YONGE ST., STE. 4200 M5B 2M6 TORONTO, CA 98-0458290	INVESTMENTS	CA	N/A	C CORP				X
(2) ROMPLY MEROPS, S.R.L. 28-C, C-TIN BUDIISTEANUI ST., 3RD FL BUCHAREST, RO 98-0646095	INVESTMENTS	RO	N/A	C CORP				X
(3) ROSELLIA HOLD TC PTY, LTD 201 ELIZABETH ST NSW 2000 SYDNEY, AS 98-1126654	AGRICULTURE	AS	N/A	C CORP				X
(4) ROSELLIA SUB TC PTY, LTD 201 ELIZABETH ST NSW 2000 SYDNEY, AS 98-1126678	AGRICULTURE	AS	N/A	C CORP				X
(5) ROSELLIA, LTD P O BOX 309, UGLAND HOUSE KY1-1104 98-1120479	AGRICULTURE	CJ	N/A	C CORP				X
(6) ROUND TABLE INTEREST RATE FUND, LTD 2ND FLR, REGATTA OF PRK, W BAY RD KY1 1 98-1120479	INVESTMENTS	CJ	N/A	C CORP				X
(7) RUBY ATLANTIC AJCP PROGRAM TRS, LLC 133 NORTH JEFFERSON ST., 4TH FL CHICAGO, IL 60661 98-1120479	INVESTMENTS	DE	N/A	C CORP				X

Schedule R (Form 990) 2014

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

ninc 34 because it had one of more related organizations treated as a corporation and was not a tax year.									
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
									YesNo
(1)	RUBY ATLANTIC REIT, INC 46-4632061 HMC, INC., 600 ATLANTIC AVE BOSTON, MA 02210	INVESTMENTS	DE	N/A	C CORP				X
(2)	SANTA FILOMENA AGROINDUSTRIAL, LTDA 46-4632061 AV PEDROSO DE MORAES, 1201,2AN,S4 PINHEIROS, BR	INVESTMENTS	BR	N/A	C CORP				X
(3)	SCOLOPAX, S R L BRASOV, 8 VICTORIEI ST, BI 42 BIS BRASOV COUNTY, RO	INVESTMENTS	RO	N/A	C CORP				X
(4)	SCOUT CAPITAL LONG TERM, LTD 89 NEXUS WAY KY1-9007 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(5)	SERRA GRANDE AGROINDUSTRIAL, LTDA AV PEDROSO DE MORAES, 1201,2AN,S4 PINHEIROS, BR	INVESTMENTS	BR	N/A	C CORP				X
(6)	SOBRALIA, LTD 98-1084076 P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(7)	SOCIEDAD EXPLOTADORA AGRICOLA, S P A 98-0632838 DEL INCA NO 4446, OFICINA 1007 LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP				X

Schedule R (Form 990) 2014

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)	SORA, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-1098256	INVESTMENTS	CJ	N/A	C CORP					X
(2)	SOROTIVO AGROPECUARIA, LTDA AV PEDROSO DE MORAES, 1201, 2AN, S4 PINHEIROS, BR 98-1083800	INVESTMENTS	BR	N/A	C CORP					X
(3)	STELIS, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ 98-0639215	INVESTMENTS	CJ	N/A	C CORP					X
(4)	SUSTAINABLE TEAK PARTICIPACOES, LTDA AVE GVRN P DE ARRUDA, 1 0545, ARPT CEP VAREZEA GRANDE, 98-1120143	INVESTMENTS	BR	N/A	C CORP					X
(5)	SUSTAINABLE TIMBERS, S A AVE JUSTO AROSEMANA 6 32 ST E CORREGIMIENTO DE CALIDONI	INVESTMENTS	PM	N/A	C CORP					X
(6)	TACORA, S P A 2939 AV. ISIDORA GOYENECHEA, 11 FL LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X
(7)	TAGUA, S P A 2939 AV ISIDORA GOYENECHEA, 11 FL LAS CONDES, CI	INVESTMENTS	CI	N/A	C CORP					X

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													

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

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
									Yes No
(1)	TDR SCOTLAND, LP 98-0471766 ONE STANHOPE GATE WIK LAF LONDON, UK	INVESTMENTS	UK	N/A	C CORP				X
(2)	TERENA, S A JUNCAL 1327, 21 FL 11000 MONTEVIDEO, UY	INVESTMENTS	UY	N/A	C CORP				X
(3)	TERRACAL ALIMENTOS E BIOENERGIA - UNIDAD FAZENDA BOQUEIRAO, SN CEP 47100 ZONA RURAL, BR	INVESTMENTS	BR	N/A	C CORP				X
(4)	TERRACAL ALIMENTOS E BIOENERGIA - UNIDAD FAZENDA SANTO ANT DA MANGA, SN CEP 6566 ZONA RURAL, BR	INVESTMENTS	BR	N/A	C CORP				X
(5)	TERRACAL ALIMENTOS E BIOENERGIA - UNIDAD FAZENDA FLEXAS, SN CEP 39290 ZONA RURAL, BR	INVESTMENTS	BR	N/A	C CORP				X
(6)	TERRACAL ALIMENTOS E BIOENERGIA - UNIDAD FAZENDA OITEIROS, SN CEP 64840 ZONA RURAL, BR	INVESTMENTS	BR	N/A	C CORP				X
(7)	TERRACAL ALIMENTOS E BIOENERGIA - UNIDAD FAZ ESP,RODOVIA EST TO-373, KM 101 CEP 7 PEIXE, BR	INVESTMENTS	BR	N/A	C CORP				X

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
								Yes	No		Yes	No	
(1)													
(2)													
(3)													
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(5)													
(6)													
(7)													

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

(1)	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
									Yes	No
(1)	TERRACAL ALIMENTOS E BIOENERGIA, LTDA AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP					X
(2)	TERRACAL PARTICIPACOES, LTDA AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP					X
(3)	TERRACAL PROPRIEDADES, LTDA AV DAS AMERICAS, 700, BLOCO 5 CEP 22640 CIDADE DO RIO DE	INVESTMENTS	BR	N/A	C CORP					X
(4)	THIRD WRANGLER, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GEORGE TOWN, CJ	INVESTMENTS	CJ	N/A	C CORP					X
(5)	TINAMOU P O BOX 309, UGLAND HOUSE N/A KY1-1104	INVESTMENTS	CJ	N/A	C CORP					X
(6)	TOUCANET, S A PLAZA 2000, 16TH FL 50TH ST REPUBLIC OF PANAMA, PM	INVESTMENTS	PM	N/A	C CORP					X
(7)	TROGON PROPERTIES, S A P H PLAZA 2000 BLDG , 50TH ST REPUBLIC OF PANAMA, PM	INVESTMENTS	PM	N/A	C CORP					X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
(1) TUNUYAN, S A V FINT, DEL CL TER 2 C ABAJO, I C AL MANAGUA, NU	INVESTMENTS	NU	N/A	C CORP				X
(2) UNITECA AGROFLORESTAL, S A AVE GVRN P DE ARRUDA, I 0545, ARPT CEP VAREZEA GRANDE, 45-2732642	INVESTMENTS	BR	N/A	C CORP				X
(3) USRA ATLANTIC NET LEASE CAPITAL CORP 1360 AVE OF AMERICAS NEW YORK, NY 10019	INVESTMENTS	DE	N/A	C CORP				X
(4) VALHOLL, LTD P O BOX 309, UGLAND HOUSE KY1-1104 GRAND CAYMAN, CJ	INVESTMENTS	CJ	N/A	C CORP				X
(5) VERIWASTE, LP 20-22 BEDFORD ROW WC1R 4JS LONDON, UK	INVESTMENTS	UK	N/A	C CORP				X
(6) VISTA VERDE AGROINDUSTRIAL, LTDA AV PEDROSO DE MORAES, 1201, 2AN, S4 PINHEIROS, BR	INVESTMENTS	BR	N/A	C CORP				X
(7) WESTERN ROSELLA TRUST 201 ELIZABETH ST NSW 2000 SYDNEY, AS	AGRICULTURE	AS	N/A	C CORP				X

Schedule R (Form 990) 2014

HARVARD NEURODISCOVERY CENTER, INC.

31-1745145

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

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

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

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

e Loans or loan guarantees by related organization(s).

f Dividends from related organization(s).

g Sale of assets to related organization(s).

h Purchase of assets from related organization(s).

i Exchange of assets with related organization(s).

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

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

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

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

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

o Sharing of paid employees with related organization(s).

p Reimbursement paid to related organization(s) for expenses.

q Reimbursement paid by related organization(s) for expenses.

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

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

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(1)	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
					Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Part VII **Supplemental Information**

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