Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

OMB No 1545-0052

Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf Internal Revenue Service For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number BRISTOL-MYERS SQUIBB FOUNDATION, INC. 13-3127947 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 345 PARK AVENUE, 3RD FL (212) 546-4000 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW YORK, NY 10154 Initial return G Check all that apply: Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 116,385,594. ▶\$ (Part I, column (d) must be on cash basis) Part I | Analysis of Revenue and Expenses (d) Disbursements for charitable purpose (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 50,000,000 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 174,715. STATEMENT 1 174,715. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 174,715 50,174,715. 12 Total Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees 141,444. STMT 2 141,444. c Other professional fees 17 Interest
18 Taxes
19 Depreciation and depletion
20 Occupancy
21 Travel, conferences, and meetings 17 Interest 22 Printing and publications
23 Other expenses S'
24 Total operating and administrative expenses. Add lines 13 through 23
25 Contributions, gifts, grants paid STMT 3 1,679. 0. 0. 1,679. 143,123, 0 0 143,123. 31,340,634. 32,926,461. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 33,069,584 31,483,757. Add lines 24 and 25 Subtract line 26 from line 12: 17,105,131 8 Excess of revenue over expenses and disbursaments 174,715

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Form 990-PF (2016)

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Cash - non-interest-bearing Surveys and temporary cash investments S, 339, 705, S, 281, 710, G, 281, 710, S Surveys and temporary cash investments S, 339, 705, S, 281, 710, G, 281, 710, S Surveys and temporary cash investments S, 339, 705, S, 281, 710, G, 281, 710, S Grants receivable	P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
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Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 4 89,623,207. 5 Multiply line 4 by line 3 5 24,863,629. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 7 24,865,376. 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	2011		,							
Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	2 Total of line 1, column (d)						2		1.387121	
the foundation has been in existence if less than 5 years 3 .277424 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.		ar base period - divide the total	on line 2 by 5,	or by the number	of ye	ars		1		
5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.			•	-			3		.277424	
6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	4 Enter the net value of noncharitable-u	se assets for 2016 from Part X,	line 5				4		89,623,207.	
6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	5 Multiply line 4 by line 3						5		24,863,629.	
7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.										
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	6 Enter 1% of net investment income (1	% of Part I, line 27b)					-6	+	1,747.	
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.	7 Add lines 5 and 6						7		24,865,376.	
	8 Enter qualifying distributions from Part XII, line 4					8		31,483,757.		
		e 7, check the box in Part VI, lin	e 1b, and comp	olete that part usi	ng a 1	% tax rate.				

	990-PF (2016) BRISTOL-MYERS SQUIBB FOUNDATION, INC. 13- rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	-3127947 see inst	ruct	ions	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%				747.
_	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b).	}			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
	Add lines 1 and 2	 		1,	747.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	 			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	 			747.
	Credits/Payments. 2016 estimated tax payments and 2015 overpayment credited to 2016 8,968.	1			
	Exempt foreign organizations - tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 6c				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d			8.	968.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	1			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	†			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			7,	221.
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax				0.
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u> _		Yes	No
	any political campaign?	L.	1a	\longrightarrow	<u>x</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	<u> </u>	1b		<u>x</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	}		j	
	distributed by the foundation in connection with the activities	ļ		i	
	Did the foundation file Form 1120-POL for this year?	ļ	1c		<u>x</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation \$\\$ \text{9.} \text{1.2} \text{0. foundation managers.} \text{8.} \text{9.}	ļ	- }		
	(1) On the foundation. \$\Bigsless \frac{0}{2}\$ On foundation managers. \$\Bigsless \frac{0}{2}\$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
е					
9	managers. \$0. Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х
2	If "Yes," attach a detailed description of the activities	<u> </u>	-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				v
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	<u> </u>	3		<u>x</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	. –	4a 4b	-	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	···	5	\dashv	x
J	If "Yes," attach the statement required by General Instruction T		~	1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1	
·	By language in the governing instrument, or	{			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				i
	remain in the governing instrument?		6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	-	7	Х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)				
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation	<u> </u>	8b	х .	 -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	j			
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	<u> </u>	9		X
_10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses		10 990	-PF	(2016)

_ F 6	it VII-A Statements negarating Activities (continued)			
		ł	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1	}	
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11_		<u>x</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1.0	,	х
10	If "Yes," attach statement (see instructions) Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	x	<u> </u>
13	Website address WWW.BMS.COM/FOUNDATION	13		L
14	The books are in care of ► FRED EWELL Telephone no. ► 609-252-	7960		
•	Located at RTE 206 & PROVINCE LINE ROAD, PRINCETON, NY ZIP+4 >08			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	
	and enter the amount of tax-exempt interest received or accrued during the year	N,	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>x</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	}		
	foreign country			L
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		126	- A-I
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 	Yes	No
18	t During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
			l	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	{	[{
	for the benefit or use of a disqualified person)?	1	ĺ	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1	1	
	if the foundation agreed to make a grant to or to employ the official for a period after	1	1	•
	termination of government service, if terminating within 90 days.)	1		
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			Ì
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16	 -	X
	Organizations relying on a current notice regarding disaster assistance check here	Ì	İ	
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1	x
•	before the first day of the tax year beginning in 2016? Taxon on failure to distribute process (postupe 4042) (does not exply for years the foundation was a private operating foundation.	1c		 ^
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	1		
,	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ł	Ì	İ
	before 2016? Yes X No	ì	(l
	If "Yes," list the years ▶		1	l
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1	{	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		1
	statement - see instructions.) N/A	2b	 	ـــــ
(the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	l	Ì	{
	<u> </u>	1	Ì	1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	1	1	1
		1	1	
'	b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	{	1	1
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1	}	
	Form 4720, to determine if the foundation had excess business holdings in 2016)	36	}	1
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	Τ_	Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	46	<u> </u>	х
	Fi	orm 99	0-PF	(2016)

orm 990-PF (2016) BRISTOL-MYERS SQUIBB FOUNDATION, INC			13-3127947	·	Page	6
Part VII-B Statements Regarding Activities for Which Fo	orm 4720 May Be Re	equired (continu	ıed)			_
5a During the year did the foundation pay or incur any amount to:		·				_
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	☐ Ye	s X No	į	i	
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on, directly or indire	ctly,	_	- {	ł	
any voter registration drive?		☐ Ye	s X No	ł		
(3) Provide a grant to an individual for travel, study, or other similar purposes?)	☐ Ye		J)	
(4) Provide a grant to an organization other than a charitable, etc., organization				i	l	
4945(d)(4)(A)? (see instructions)	adoportous in occion	X Ye	s No	ĺ	[
(5) Provide for any purpose other than religious, charitable, scientific, literary, i	or educational nurnoses, or fo		• - "	- 1	1	
the prevention of cruelty to children or animals?	or educational purposes, or it		s X No	}	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	or the exceptions described in		2 IAO	ļ		
	•	i negulations	}	E.	x	
section 53.4945 or in a current notice regarding disaster assistance (see instruc	•		▶ ┌─┐	5b	- 	-
Organizations relying on a current notice regarding disaster assistance check he				ĺ	1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	om the tax decause it maintail		I	ì	ì	
expenditure responsibility for the grant?		X Ye	s L No	Ì		
If "Yes," attach the statement required by Regulations section 53 4945-	• *))	,	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on			j	1	
a personal benefit contract?		Ye	s X No	1		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contract?		1	6b	x	_
If "Yes" to 6b, file Form 8870				ł	- 1	
7a At any time during the tax year, was the foundation a party to a prohibited tax st	nelter transaction?	Ye	s X No			_
b If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b		_
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Man	agers, Highly				
1 List all officers, directors, trustees, foundation managers and their c	ompensation.					_
438 - 431	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense count, othe	9
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	au	allowances	51 3
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SEE STATEMENT 5		0.	0.	. [0	Ο.
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2 Compensation of five highest-paid employees (other than those incl	uded on line 1) If none	enter "NONE "		—		_
2 Compensation of the highest-paid employees (other than those mor	(b) Title, and average	Torre.	(d) Contributions to	T_{7}	(e) Expense	_
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	i aò	ccount, othe	ıer
	devoted to position	}	compensation		allowances	<u>;</u>
NONE		}		l		
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		<u> </u>	<u> </u>			
Total number of other employees paid over \$50,000						0

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Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
BEELINE COM INC - 12724 GRAN BAY PARKWAY		
WEST, SUITE 200, JACKSONVILLE, FL 332	ADMINISTRATIVE SUPPORT	141,444.
		• 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevanumber of organizations and other beneficiaries served, conferences convened, research papers.	ant statistical information such as the	Expenses
	pers produced, etc.	
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	85,142,500.
b	Average of monthly cash balances	1b	5,830,028.
	Fair market value of all other assets	10	15,499.
d	Total (add lines 1a, b, and c)	1d	90,988,027.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	90,988,027.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,364,820.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	89,623,207.
6	Minimum investment return. Enter 5% of line 5	6	4,481,160.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	id certair	1
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1-1-	4,481,160.
2a	Tax on investment income for 2016 from Part VI, line 5		
Ь	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,747.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,479,413.
4	Recoveries of amounts treated as qualifying distributions	4	657,201.
5	Add lines 3 and 4	5	5,136,614.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,136,614.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	31,483,757.
þ	Program-related investments - total from Part IX-B	16	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	31,483,757.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,747.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	31,482,010.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	nualifies :	for the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				5,136,614.
2 Undistributed income, if any, as of the end of 2016		·		3,130,011.
a Enter amount for 2015 only			0.	
b Total for prior years:				
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2016:		<u></u> .		
1		:		
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
c From 2013 26, 268, 237.				
d From 2014 23,684,216.				
e From 2015 25,058,629.				
f Total of lines 3a through e	121,087,948.		 	
4 Qualifying distributions for 2016 from				
Part XII, line 4 ⁻ ▶ \$ 31,483,757.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior			!	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				5,136,614.
e Remaining amount distributed out of corpus	26,347,143.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:	,			
	147,435,091.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	147,433,031.	 		
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a Taxable amount - see instr			0.	ļ
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				{
be distributed in 2017			{	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				}
	0.			
may be required - see instructions)	-			
8 Excess distributions carryover from 2011	21 576 090		1	{
not applied on line 5 or line 7	21,576,889.		 	
9 Excess distributions carryover to 2017.	125 050 202			
Subtract lines 7 and 8 from line 6a	125,858,202.			
10 Analysis of line 9:				
a Excess from 2012 24,499,977.				ľ
b Excess from 2013 26,268,237.			{	}
c Excess from 2014 23,684,216.			Į]
d Excess from 2015 25,058,629.			ļ)
e Excess from 2016 26,347,143.			L	<u> </u>

	RS SQUIBB FOUND				3-3127947 Page 10
Part XIV Private Operating Fo	oundations (see ii	nstructions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	•	•	▶ └	,	
b Check box to indicate whether the found		ing foundation described if			4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41.0045	Prior 3 years	T (4) 2042	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for			ì	Ì	
each year listed		 	ļ	 	
b 85% of line 2a	 		 	 	
c Qualifying distributions from Part XII,			ĺ	{	1
line 4 for each year listed					
d Amounts included in line 2c not			}	1	
used directly for active conduct of			})	
exempt activities				 	
e Qualifying distributions made directly			Ì	1	
for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the				 	
alternative test relied upon:			ł		
 a "Assets" alternative test - enter (1) Value of all assets 		}	}	}	
• •		 		 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		}	l	}	}
b "Endowment" alternative test - enter	·	+		 	
2/3 of minimum investment return		}	1	1	
shown in Part X, line 6 for each year listed		į	1	1	
c "Support" alternative test - enter:		 	 	1	
(1) Total support other than gross		{			
investment income (interest,		1		-	
dividends, rents, payments on		Ì	1		
securities loans (section 512(a)(5)), or royalties)			1	İ	{
(2) Support from general public				1	
and 5 or more exempt		}	1		
organizations as provided in section 4942(j)(3)(B)(iii)	ļ	j	}		
(3) Largest amount of support from					
an exempt organization		1)		
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or	more in assets
at any time during t	ne year-see inst	ructions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh			ributions received by the	e foundation before ti	he close of any tax
year (but only if they have contributed n	tore than \$5,000). (See	section 507(d)(2))			
NONE					
b List any managers of the foundation wh			or an equally large port	ion of the ownership	of a partnership or
other entity) of which the foundation ha	s a 10% or greater inter	est.			
NONE					
2 Information Regarding Contributi			-		
Check here \(\sum_{\text{\colored}} \) if the foundation of the foundation makes gifts, grants, etc.	•	s to preselected charitable	-	•	•
					c, and d.
a The name, address, and telephone num JOHN DAMONTI, 212-546-4566	per or e-mail address of	t the person to whom appil	cations snould be addre	sseo:	
345 PARK AVENUE, 3RD FLOOR, NE	EW VODE NV 1015	5.A			
			ould include:		
b The form in which applications should to SEE STATEMENT 6		iation and materials they si			
c Any submission deadlines.					
d Any restrictions or limitations on award	c cuch as hu seesse-b	inal areas sharitehts fields	kinds of institutions as	other factors:	
NONE	s, such as by yeograph	ivai aivas, viidindule nelūs,	หแนง บา แเงแนนเบทร, QI	onici idelleis.	
623601 11-23-16					Form 990-PF (2016)

Tart AV Supplementary information				
3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<u> </u>	
a Paid during the year				
SEE STATEMENT 7		PC	GENERAL PURPOSE	31,340,634.
	}			}
Total	l	<u> </u>	<u> </u>	a 31,340,634.
b Approved for future payment	T	<u> </u>	1	
• Арргочей (от lature payment				
SEE STATEMENT 8		PC	GENERAL PURPOSE	2,190,247.
Total			▶ 3	2,190,247.

Part XVI-A	Anal	vsis of	Income-Producing	Activities
	/ (1141)	, 0.0 0.	moonic i roddonig	ACTIVITIES.

Enter gross amounts unless otherwise indicated.	Unrelati	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-	Code			 	
a			\vdash		
b			 		
c			┼		
d		<u> </u>	\vdash		
f					
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash	}	1	. .	}	
investments			14	174,715.	
4 Dividends and interest from securities	ļ		 -		
5 Net rental income or (loss) from real estate:	<u> </u>		 - -		
a Debt-financed property	<u> </u>		├		
b Not debt-financed property					
6 Net rental income or (loss) from personal	Ì				
property			├		
7 Other investment income		 	├	<u> </u>	
8 Gain or (loss) from sales of assets other					
than inventory			├		
9 Net income or (loss) from special events	_	 		ļ	
10 Gross profit or (loss) from sales of inventory	<u> </u>				
11 Other revenue	1		l	}	
a			 		
b			├─		
·			 -	 	
d	ļ		 	 	
e 12 Subtotal Add columns (b), (d), and (e)	<u> </u>	0.	┼	174 715	
13 Total. Add line 12, columns (b), (d), and (e)	L	L ` :	·	12	0. 174,715.
(See worksheet in line 13 instructions to verify calculations.)				10	
Part XVI-B Relationship of Activities to	the Acco	mnlishment of Ex	emnt	Purnoses	
Explain below how each activity for which incore the foundation's exempt purposes (other than be			CONTI	outed importantly to the accord	ipiisnment of
N/A	y providing is	ilas iai saaii pai pasaa).			
					
					
					
					

Form 990-PF (2016) Part XVII | 1 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No

	/other then costing E01/e)					Clion 30 I(c) of	***	No. 12	
				7, relating to political organ	izations?		1.0		s
	s from the reporting founda	ation to a noncharitat	oie exempt org	janization of:				MIZŽ.	X
(1) Casi							1a(1)		X
(2) Other							1a(2)		
b Other tra								avei:	لننخ
	es of assets to a noncharital						<u>1b(1)</u>		<u> </u>
	chases of assets from a nor	· ·	rganization				1b(2)		X
	tal of facilities, equipment,						1b(3)		<u> </u>
	mbursement arrangements						1b(4)		_X
	ns or Ioan guarantees						1b(5)		<u> </u>
(6) Perf	formance of services or me	mbership or fundrais	sing solicitation	ns			1b(6)		X
c Sharing	of facilities, equipment, ma	iling lists, other asse	ts, or paid em	ployees			1c		Х
d If the ans	swer to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b) should al	ways show the fail	r market value of the go	ods, other ass	ets,	
or servic	es given by the reporting fo	oundation. If the four	idation receive	d less than fair market valu	e in any transactio	on or sharing arrangeme	ent, show in		
column ((d) the value of the goods,	other assets, or servi	ces received.						
a) Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Descripti	ion of transfers, transactions	, and sharing arra	ngemen	its
			N/A						
					T				
					1			_	
					1				
					 				
					+				
		 			+				
									
									
									
									
		ļ							
					 				
		<u> </u>							
		<u> </u>							
2a Is the for	undation directly or indirect	tly affiliated with, or i	elated to, one	or more tax-exempt organi	zations described				
ın sectio	n 501(c) of the Code (other	r than section 501(c)	(3)) or in secti	on 527?			Yes	X	No
	complete the following sch		. ,,						
	(a) Name of org			(b) Type of organization	1	(c) Description of rela	tionship		
	N/A			_ <u> </u>			<u> </u>		
					 				
					-				
					 				
					 				
Linde	er nenelties of obrium. I declare to	that I have examined this	return including	accompanying schedules and st	atements, and to the	hest of my knowledge			
				taxpayer) is based on all informa			May the IRS of return with the		
Here		A A		11/1/5/17	PARATAR	12.777	shown below	(see inst	7 . I
		TAN		11/13/11	PRESIDE	IN.T.	- X Yes	<u> </u>	J No I
51(gnature of officer or trustee		(<u> </u>	Date	Title	Colored Colored	TIN		
	Print/Type preparer's na	ıme	Preparer's si	-	Date		PTIN		
Deid			~,	. 1	11/14/17	self- employed			
Paid	JEANNE FAHRENBA		Mah	renfroh	l		P01365953		
Preparer	Truth o hamo -	ITTE TAX LLP	/			Firm's EIN ► 8	6-1065772		
Use Only	′								
	Firm's address ► TWO	JERICHO PLAZ	Α						
	JER	ICHO, NY 1175	3			Phone no. 516-	918-7000		
							Form 99 0)-PF	(2016)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

Name of	the organization	Employer identification number		
	BRI	STOL-MYERS SQUIBB FOUNDATION, INC.	13-3127947	
Organiza	ation type (check or	ne)		
Filers of	:	Section:		
Form 99	0 or 990-EZ	501(c)() (enter number) organization		
		4947(a)(1) nonexempt charitable trust not treated as a private foundation		
		527 political organization		
Form 99	0-PF	X 501(c)(3) exempt private foundation		
		4947(a)(1) nonexempt charitable trust treated as a private foundation		
		501(c)(3) taxable private foundation		
		covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions	
General	Rule			
X	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	•	
Special	Rules			
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1 Complete Parts I and II	or 16b, and that received from	
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III		
	year, contributions is checked, enter h purpose Don't cor	a described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled material the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc.	
but it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (File Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its File Filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	,	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

Contributors (See instructions) Use duplicate copies of Part I if a	additional space is needed.	
(b)		
Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
BRISTOL-MYERS SQUIBB COMPANY & SUBSIDIARIES 345 PARK AVENUE NEW YORK, NY 10154	\$ 50,000,000.	Person X Payroll
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Moncash Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Oncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
	NEW YORK, NY 10154 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	345 PARK AVENUE NEW YORK, NY 10154 (b) Name, address, and ZIP + 4 (c) Total contributions (b) Name, address, and ZIP + 4 (c) Total contributions S (c) Total contributions S (c) Total contributions S (c) Total contributions S (c) Total contributions S (c) Total contributions S (c) Total contributions S (c) Total contributions

Name of organization

Employer identification number

BRISTOL-MYERS SQUIBB FOUNDATION, INC.

13-3127947

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	i i I
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- ,		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - \$	

ame or organ			Employer Identification number				
Part III	YERS SQUIBB FOUNDATION, INC. Exclusively religious, charitable, etc., contribute year from any one contributor. Complete col completing Part III, enter the total of exclusively religious, of	umns (a) through (e) and the following	tion 501(c)(7), (8), or (10) that total more than \$1,000 for line entry. For organizations or the year (Enter this info once)				
	Use duplicate copies of Part III if additional	space is needed					
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
- -							
j	Tunnefauss's name address and	(e) Transfer of gift	Deletionship of transferous to transferous				
-	Transferee's name, address, and	ZIF+4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	(e) Transfer of gift						
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee				

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY	CASH	INVESTMENTS	ST	ATEMENT 1	
SOURCE	(A REVE PER B	NUE	NET	(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
INTEREST ON SHORT -TERM INVESTMENTS		174,715.		174,715.		0.	
TOTAL TO PART I, LINE 3		174,715.		174,715.	174,715.		
FORM 990-PF C	THER PROFES	SIONAL	FEES		ST	ATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	NET IN		- ADJUSTE		(D) CHARITABLE PURPOSES	
OUTSIDE PURCHASED SERVICES	141,444.			0.	0.	141,444.	
TO FORM 990-PF, PG 1, LN 16C	141,444.			0.	0.	141,444.	
FORM 990-PF	OTHER E	XPENSES	 S		ST	ATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	NET IN		(C) - ADJUSTE: E NET INCO	D	(D) CHARITABLE PURPOSES	
REGISTRATION & FILING FEES BANK FEES	1,561.			0.	0. 0.	1,561. 118.	
TO FORM 990-PF, PG 1, LN 23	1,679.			0.	0.	1,679.	

FORM 990-PF OTHER	R INVESTMENTS		STATEMENT 4
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GOLDMAN SACHS FIN SQUARE FEDERAL FUND	COST	110,080,000.	110,080,000.
TOTAL TO FORM 990-PF, PART II, LINE	13	110,080,000.	110,080,000.

	ST OF OFFICERS, D FOUNDATION MANA		STAT	ЕМЕНТ 5
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
CHARLES BANCROFT ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	DIRECTOR 1.00	0.	0.	0.
GIOVANNI CAFORIO ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	DIRECTOR 1.00	0.	0.	0.
FRANCIS CUSS ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	DIRECTOR 1.00	0.	0.	0.
JOHN L. DAMONTI 345 PARK AVENUE NEW YORK, NY 10154	DIRECTOR & PRE	SIDENT	0.	0.
SANDRA LEUNG 345 PARK AVENUE NEW YORK, NY 10154	DIRECTOR 1.00	0.	0.	0.
LOUIS SCHMUKLER 1 SQUIBB DRIVE NEW BRUNSWICK, NJ 08903	DIRECTOR 1.00	0.	0.	0.
MARY VANATTEN ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	SECRETARY	0.	0.	0.
JEFFREY GALIK ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	TREASURER	0.	0.	0.
ALEXANDRE ROMUALDO ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	ASSISTANT TREA	SURER 0.	0.	0.
TIMOTHY POWER ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543	ASSISTANT TREA	SURER 0.	0.	0.

Substantiation of Exercise of Expenditure Responsibility

Organization Bristol-Myers Squibb Foundation, Inc EIN 13-3127947 Tax Year Ended December 31, 2016

Form 990-PF, Part VII-B, Line 5c

The following information is provided in accordance with IRC Sec. 4945(h)(3) and Reg. 53 4945 5(d) to demonstrate that the foundation exercised expenditure responsibility in regard to its grants

Name and a second	Amount of	Date of Co		Amounts Expended by	To the Grantor's Knowledge, Grantee Has Diverted a Portion of Funds from the Purpose of the	Dates of Reports Received from	Dates and Results of Any Verification of the Grandes's
Name and Location of Grantee Forum for African Women Educationalist - Swaziland Chapter House No 112, Corner Tikhuba and Syringa Road	Grant	Date of Grant	Purpose of Grant Reducing Exposure to Infection Among Young Women and Girls to HIV/AIDS, TB, STI and	Grantee	Grant (Yes/No)	the Grantee	Reports
Manzini, Swaziland	53,223	12/31/2016	Cancer	53,223	No_	5/31/2017	See footnote
Grandmothers Against Poverty and AIDS J 415 Qabaka, Crescent Khayelitsha South Africa 7784	40,759	10/31/2016	Support of HIV and Co- Morbid Diseases such as Cervical and Breast Cancers Tuberculosis and Mental Health Disorders in Sub- Saharan Africa	15,730	No_	4/30/2017	See footnote
The Gastroenterology Foundation of South Africa E23 GIT Clinit Groote Schuur Hospital Observatory 7925 P O Box 13241 Mowbray, South Africa 7705	75 976	11/30/2016	Support of Guidelines for Screening, Detection and treatment of HCV of Chronic Viral Hepatitis C for sub- Saharan Africa	75 976	No	2/28/2017	See footnote
Institute of Aging in Africa The University of Cape Town Bremmer Building, Lower Campus Rondebosch Cape Town, South Africa 7700	99,497	11/30/2016	Support of HIV and AIDS Prevention Knowledge Among Older Persons	99,497	No	6/30/2017	See footnote
Isibani Development Partners Menlyn Central, P O Box 1122 Pretoria, South Africa 0077	91,609	12/31/2016	Secure The Future - Technical Assistance Program	36 733	No	5/31/2017	See footnote
Lesotho Red Cross Society 23 Mabile Road, Old Europa Maseru, Lesotho	131,674	11/30/2016	Initiating a Collaborative Outreach Model of Community Based Services for Cervical Cancer Screening	52,080	No No	3/31/2017_	See footnote
National Institute of Communicable Diseases 1 Modderfrontein Road Sandringham, South Africa 2131	95,787	11/30/2016	Viral Hepatitis Burden in High Risk Groups in the Public and Private Health Care Sector in South Africa	95,787	No	8/31/2017	See footnote
Right to Care Helen Joseph Hospital, Themba Lethu Wing Johannesburg, South Africa	99,808	10/31/2018	Preventing Cervical and Breast Cancer through South- south Health Service Capacity Building Initiatives	1,460	No	4/30/2017	See footnote
Sex Workers Education & Advocacy Taskforce 19 Anson Street Cape Town, South Africa 7915	64,248	12/31/2016	Strengthening HIV and Cancer Awareness in commercial Sex Workers	60,665	No	6/30/2017	See footnote
Sinomlando Centre 50 Langalibalele Street Pietermzaitzburg, South Africa 3209	89,221	11/30/2016	Support of HIV Positive Adolescent Peer Leader Project	89,221	No.	6/30/2017	See footnote
Siso Foundation 38 Shamrock Street Flonda, South Africa 1709	74,558	11/30/2016	Financial and Governance Capacity Building for the Foundation's Technical Assistance Program Funded Grantees	46,133	No	3/31/2017	See footnote
TB/HIV Care 25 St. Georges Mall, 8th Floor ABSA House Cape Town, South Africa 8001	338,449	11/30/2018	Viral Hepatitis C Initiative for Most at Risk Population Groups in south Africa	338,449	No No	8/31/2017	See footnote
Japanese Red Cross Society 1-1-3, Shiba Daimon, Minato-ku, Tokyo 105-8521	25,000	5/18/2018	General Operations	25,000	No	Report Pending	See footnote

Footnote Bristol-Myers Squibb Foundation, Inc. has no reason to doubt the accuracy or reliability of the information provided by the grantee, therefore, no independent ventication of the information was made