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DLN: 93493135136218

2016

OMB No 1545-0047

Open to Public

Return of Organization Exempt From Income Tax

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

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

•		f the Treasur nue Service		Form 990 and its instructions is at <u>www</u>				Open to Public Inspection	
A F	or th	e 2016 c <u>a</u>	alendar year, or tax year beginr	ning 07-01-2016 , and ending 06-3	0-2017				
B Che	eck ıf a	pplicable	er identif	ication number					
		change	Stony Brook Foundation Inc	11-607	7945				
	ime ch itial ret	_	% JASON HSUEH Doing business as			-			
_ Fir	nal	nınated							
		return	Number and street (or P O box if ma 230 Administration	Il is not delivered to street address) Room/su	ite		E Telephone number		
□ Ар	plication	on pending	City or town, state or province, count	ry, and ZIP or foreign postal code	(631) 6	(631) 632-6536			
			Stony Brook, NY 11794			G Gross re	eceipts \$ 1	13,580,900	
			F Name and address of principal	officer	H(a) Is thi	s a group re	turn for		
			Dexter Bailey 230 Administration			rdinates?		□Yes ☑No	
			Stony Brook, NY 11794		н(ь) Are a Includ	ill subordina ded?	tes	☐ Yes ☐No	
I Ta	ıx-exer	npt status	☑ 501(c)(3) □ 501(c)() ◄ (ı	nsert no)			•	instructions)	
J W	ebsit	e: > www	w stonybrook edu/foundation/		H(c) Grou	p exemption	number	>	
K Form	m of o	rganization	✓ Corporation ☐ Trust ☐ Assoc	lation ☐ Other ▶	L Year of form	ation 1965	M State	of legal domicile NY	
Pa	rt I	Sumr	marv						
	$\overline{}$		cribe the organization's mission or	most significant activities					
				ony brook (also referred to as Stony Bro	ook University) by facilitat	ing, acce	pting and managing	
nce	<u> </u>	ohilanthrop	pic girts						
E E	-								
Activities & Governance	-								
3				ontinued its operations or disposed of magnetic body (Part VI, line 1a)			ssets 3] 23	
ಸ ್	1		4	20					
je E	1	4 Number of independent voting members of the governing body (Part VI, line 1b)							
Ĕ	1	6 Total number of volunteers (estimate if necessary)							
¥	1		· ·	VIII, column (C), line 12		•	6 7a	351,184	
	1	b Net unrelated business taxable income from Form 990-T, line 34						285,374	
				,		ior Year		Current Year	
۵.	8	Contributi	ions and grants (Part VIII, line 1h)			49,531,	605	62,350,041	
Ravenua	9	Program s	service revenue (Part VIII, line 2g)			2,529,	065	2,058,544	
λċ	10	Investme	506	4,501,476					
ш	11	Other rev	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,014,806						
	12	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 67,27 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)						71,701,98	
	13							28,855,029	
	14	Benefits p	0	(
æ	15	Salaries, d	other compensation, employee ber	nefits (Part IX, column (A), lines 5–10)		9,209,	283	9,633,789	
JS(16a	Profession	nal fundraısıng fees (Part IX, colum	nn (A), line 11e)		70,	000	70,000	
Expenses	Ь	Total fundra	aısıng expenses (Part IX, column (D), lın	e 25) ▶ <u>2,789,506</u>					
ш	17	Other exp	penses (Part IX, column (A), lines 1	.1a-11d, 11f-24e)		20,560,	636	25,018,759	
	18	Total expe	enses Add lines 13–17 (must equa	al Part IX, column (A), line 25)		51,123,	070	63,577,577	
	19	Revenue I	less expenses Subtract line 18 fro	m line 12		16,150,	912	8,124,411	
Net Assets or Fund Balances					Beginning	of Current Y	ear	End of Year	
aar	20	Total asse	ets (Part X, line 16)			440,523,	703	476,542,033	
AB B	1		lities (Part X, line 26)			39,951,		44,318,514	
ᅗ	1		s or fund balances Subtract line 2:			400,572,		432,223,519	
	rt III		ature Block			100/372/		,,	
Unde	r pena	alties of pe	erjury, I declare that I have examır	ned this return, including accompanying					
	ledge (nowle		f, it is true, correct, and complete	Declaration of preparer (other than office	er) is based o	on all inform	ation of v	which preparer has	
ally K	TIOWIE								
		* * * * * *	ura of officer			18-05-15			
Sign		Signature of officer Date							
Here	=		R BAILEY EXECUTIVE DIRECTOR r print name and title						
		17	rint/Type preparer's name	Preparer's signature D	ate		PTIN		
Do:	4		cott Thompsett	Scott Thompsett	Che	eck 📙 ıf 📗	P11N P00741490	0	
Paid		→	rm's name FGRANT THORNTON LLP	1		<u>f-employed </u>			
	pare	*! _ .	rm's address ► 757 THIRD AVENUE 3RD	FLOOR		one no (212)	599-0100		
บรัต	On	עי	NEW YORK, NY 100172	013		•			
May t	the IR	S discuss	this return with the preparer show				∀ √	res 🗆 No	

Form	990 (2016)					Page 2					
Par	Statement	of Program Service	e Accomplis	hments							
	Check if Sched	dule O contains a respo	onse or note to a	any line in this Part III		🗹					
1	Briefly describe the o	rganızatıon's mıssıon									
follov to pro perso profit Unive	is a To assist in deve ovide more extensive e mal property to or for t as trustee of educatio ersity c To finance the	loping and increasing ducational opportunition of Stony Bring Brin	the resources of es and services ook University s of benefit to ar d research of ar	the State university of by making and encoura- o To receive, hold, adm id in keeping with the e by and all fields of intelle		nd grants, and to act without ctives of Stony Brook d in keeping with the					
2	_	, -	ant program serv	vices during the year wh	nich were not listed on	□ Yes ☑ No					
	the prior Form 990 or 990-EZ?										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program										
•	services?										
	If "Yes," describe these changes on Schedule O										
4	Describe the organiza Section 501(c)(3) and	tion's program service	accomplishmer	to report the amount o	largest program services, as f grants and allocations to otl						
4a	(Code) (Expenses \$	23,574,404	including grants of \$	15,350,969) (Revenue \$	0)					
Tu	See Additional Data	, (Expenses ¢	23,371,101	mercaning grantes or \$	13,330,303) (Nevenue \$						
4b	(Code) (Expenses \$	14,032,641	including grants of \$	5,505,903) (Revenue \$	0)					
	See Additional Data										
4c	(Code) (Expenses \$	5,701,389	including grants of \$	5,611,101) (Revenue \$	0)					
	See Additional Data										
	See Additional Data T	Table									
4d	Other program services (Describe in Schedule O)										
	(Expenses \$	6,614,705 inc	uding grants of	\$ 2,387,0	56) (Revenue \$	2,387,056)					
4e	Total program serv	ice expenses >	49,923,1	39							

Section 501(c)(3) organizations.

Page 3

No

Nο

No

Nο

No

No

Nο

Nο

No

Nο

Nο

Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 2 Yes 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3

for public office? If "Yes," complete Schedule C, Part I 💆

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14h

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Yes Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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

or X as applicable

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Form	Form 990 (2016)					
Par	t IV Checklist of Required Schedules (continued)					
			Yes	No		
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b				
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic		Yes			

ט	If the to line 20a, did the organization attach a copy of its addited infancial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	

Νo

No

Nο

Νo

Νo

Νo

Νo

Nο

Nο

Nο

No

Nο

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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34

35a

35b

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2016)

1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2° If "Yes," complete Schedule I, Parts I and III	22	Yes
3	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? If "Yes," complete Schedule J	23	Yes

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

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?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 🛸

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . ** Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

orm	990 (2016)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•		
_		$\overline{}$	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 633			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 3			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
L	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
ט	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶BF , BD , CA , CJ , UC , EI , SW 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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
Ī	In rest, to line su or set, and the organization meronin occur.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	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	Yes	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "I" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	lo" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Se	ction	A. Governing Body and Management			
1 2	Enter	r the number of voting members of the governing body at the end of the tax year		Yes	No
Ia	LIILE	1a	23		
	body,	ere are material differences in voting rights among members of the governing , or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O			
b	Enter	r the number of voting members included in line 1a, above, who are independent			
2		iny officer, director, trustee, or key employee have a family relationship or a business relationship with any other er, director, trustee, or key employee?	20 2	Yes	
3		he organization delegate control over management duties customarily performed by or under the direct supervisi ficers, directors or trustees, or key employees to a management company or other person?	on 3		No
4		he organization make any significant changes to its governing documents since the prior Form 990 was filed?			
_			5		No
5 6		he organization become aware during the year of a significant diversion of the organization's assets? he organization have members or stockholders?	6		No No
		he organization have members of stockholders, or other persons who had the power to elect or appoint one or mor			NO
, u		bers of the governing body?	7a		No
b	Are a perso	any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or one other than the governing body?	7b		No
8		he organization contemporaneously document the meetings held or written actions undertaken during the year b ollowing	/		
а	The g	governing body?	8 a	Yes	
b	Each	committee with authority to act on behalf of the governing body?	8 b		No
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se		B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code	⊋.)	
				Yes	No
10a	Did th	he organization have local chapters, branches, or affiliates?	10a		No
b		es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, pranches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has t	the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a	Yes	
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form 990			
		he organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were confli	e officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to icts?	12b	Yes	
С		he organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done	12c	Yes	
13	Dıd th	he organization have a written whistleblower policy?	13	Yes	
14		he organization have a written document retention and destruction policy?	14	Yes	
15		he process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
		organization's CEO, Executive Director, or top management official	15a	Yes	
b		r officers or key employees of the organization	15b	Yes	
		es" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	taxab	he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ple entity during the year?	16a		No
b	ın joir	es," did the organization follow a written policy or procedure requiring the organization to evaluate its participatio nt venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt is with respect to such arrangements?			
Se	ction	C. Disclosure			
17	List th	he States with which a copy of this Form 990 is required to be filed CA , FL , GA , HI , KS , KY , MD , MA , M OR , SC , UT , WV , WI	I , MN , I	, נא , H	. NY ,
18	Section availa	on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only able for public inspection. Indicate how you made these available. Check all that apply)		
	☑ (Own website $\ \square$ Another's website $\ ot \!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!$			
19		ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20		y, and financial statements available to the public during the tax year the name, address, and telephone number of the person who possesses the organization's books and records			
	▶JAS	SON HSUEH 230 ADMINISTRATION Stony Brook, NY 11794 (631) 632-6536			

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Part VII and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
 - List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

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

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

(C) (A) (B) (D) (F) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation organization (Wanv hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest co Individual trustee or director Former Q#||5€| organizations related MISC) Institutional Trustee below dotted employee organizations line) compensated See Additional Data Table

STONY BROOK, NY 11794 Investment Manager CO SBF,

compensation from the organization ▶ 25

230 Administration STONY BROOK, NY 11794 SIMPSON SCARBOROUGH LLC,

1737 KING STREET ALEXANDRIA, VA 22314

Name and Title

Average

hours per

week (list

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

amount of other

compensation

Page 8

week (list any hours for related			•					a	organization (W-2/1099-MISC) 2/1099-MISC			(W- from the		
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2, 1099-11	130)	2/1099-MISC		relat organiza	ed
See /	Additional Data Table													
												+		
												+		
												+		
												+		
												4		
												4		
												4		
сT	Sub-Total		nΑ.				>		1,918,	537		0		440,392
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos					rece			00,000			
													Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .										employee on	3	Yes	
4	For any individual listed on line 1a, is organization and related organization individual										the			
_		· · · ·			•	•				•		4	Yes	
5	Did any person listed on line 1a recei services rendered to the organization											5	Yes	
Se	ction B. Independent Contract	tors										_	1	
1	Complete this table for your five high from the organization Report compe	est compensate nsation for the c	d ındep alendar	endei year	nt co	ntra ling	actors with o	that r wit	received moi thin the organ	re than nizatior	\$100,000 of cor 's tax year	npens	sation	
	Name :	(A) and business addre	ess							Desci	(B) ription of services		(C Comper	
121 W	A-TEL TS INC, VEST OAK STREET VVILLE, NY 11701								COM		TION SVCS			,004,624
SCGP SIMO	CAFE LLC, NS CENTER 100 Nicolls Road Y BROOK, NY 11794								Acad	demic Ad	tivities			930,196
Invest 230 A	tment Manager CO SBF, dministration								INVE	STMEN ⁻	Γ Manag			628,170

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

Position (do not check more

than one box, unless person

is both an officer and a

Reportable

compensation

from the

INVESTMENT Manag

BRANDING SERVICES

Reportable

compensation

from related

546,002

486,398

Form 9		` '									Page 9
Part '	VIII										
		Check if Schedul	e O contains a	respo	onse or note to any	(/	nis Part VIII A) evenue	(B) Related of exempt function revenue	or :	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
o s	1a	Federated campaig	ns	1a			•				
unt	ь	Membership dues		1 b	361,399						
Gr.	c	Fundraising events		1c	2,607,590						
fs, r A	d	d Related organizatio	ns	1d							
E E	e	Government grants (co	ontributions)	1e	14,000						
tions, Giffs, Grants er Similar Amounts	f	All other contributions, and similar amounts n above	, gıfts, grants, ot ıncluded	1f	59,367,052						
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution in lines 1a-1f \$		1,61	10,681						
Cont and	h	Total.Add lines 1a-1	.f		•	62.	,350,041				
ı,					Business		,,-				
Service Revenue	2 a	CONTRACTUAL AGENCY	FEES			711300	2,05	8,544	2,058,54	1	
3	b										
<u>د</u>	c										
<u>₹</u>	d			_							
٤	e			_							
Program	f	All other program se	rvice revenue								
Ĕ	g٦	Total.Add lines 2a-2f	f		▶)58,544					
	3 I	Investment Income (II	ncluding divide	ends, i	nterest, and other	1	4 402 720			251 404	1 051 555
					•	_	1,402,739			351,184	1,051,555
		Income from investme Royalties				-	19,075				19,075
	5 F	Toyaldes	(ı) Real		(II) Personal	<u> </u>	23,0.0				25/3.0
	6a	Gross rents	(1) 11041		(,	-					
			4	79,167		_					
	b	Less rental expenses									
	c	Rental income or	4	79,167	(0					
		(loss)	L			_	470 167				470.457
	d	Net rental income o			· · · •		479,167				479,167
	7 a	Gross amount	(ı) Securit	ies	(II) Other	-					
	, a	from sales of assets other	44,5	58,907							
		than inventory									
	b	Less cost or		60.470		1					
		other basis and sales expenses		60,170							
		Gain or (loss)	,	98,737		_					
		Net gain or (loss)			•		3,098,737				3,098,737
a l		Gross income from for (not including \$	undraising eve 2,607,590								
둤		contributions reporte									
ě		See Part IV, line 18			273,234 389,428	⊣					
r E		Less direct expense Net income or (loss)		b ina ev			-116,194				-116,194
Other Revenue		Gross income from g		-	ents •		,				,
0		See Part IV, line 19									
	L			a	26,089 3,762	⊣					
		Less direct expense Net income or (loss)		b			22,327				22,327
		Gross sales of invent		activit	ies >		22,327				22,327
		returns and allowand			J						
				а		_					
		Less cost of goods s		b			7,506				7,506
	С	Net income or (loss) Miscellaneous		invent	Business Code		7,300				7,300
	11:	aCONTRACTED SERV			900099	_ 9	1,259,928				1,259,928
		CONTRACTED SEKV	1013]		.,				
	Ь	TRANSFER OF SECT	ADCU EUROC		900099	9	988,069				988,069
	U	TRANSFER OF RESE	AKCH FUNDS		30009		555,009				, ,,,,,,,
	_	MICEUM ADVICES	N TO THE ST		900099		40,346		40,346		
	С	MUSEUM ADMISSIO HOUSE	N IO IHE PK		900099		40,345		70,340		
							0. 70-				0.17
		All other revenue . Total. Add lines 11a					91,703				91,703
							2,380,046				
	12	Total revenue. See	instructions	• •			71,701,988	2,	098,890	351,184	
											Form 990 (2016)

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anizations must comp	lete 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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	19,635,588	19,635,588	· '	
2 Grants and other assistance to domestic individuals See Part IV, line 22	6,217,071	6,217,071		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	3,002,370	3,002,370		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,105,795	689,506	364,666	51,623
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	6,098,053	3,569,313	1,396,727	1,132,013
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9 Other employee benefits	2,364,284	1,233,652	634,762	495,870
10 Payroll taxes	65,657	55,286		10,371
11 Fees for services (non-employees)				_
a Management	0			
b Legal	342,407		342,407	
c Accounting	239,045		239,045	
d Lobbying	120,000	120,000		
e Professional fundraising services See Part IV, line 17	70,000			70,000
f Investment management fees	7,341,450		7,341,450	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,928,770	3,288,780	337,944	302,046
12 Advertising and promotion	682,218	617,186		65,032
13 Office expenses	1,654,904	1,446,633	33,437	174,834
14 Information technology	346,800	162,183	59,416	125,201
15 Royalties	0			
16 Occupancy	659,487	658,987		500
17 Travel	1,423,394	1,359,499	4,661	59,234
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	2,464,815	2,311,666	6,312	146,837
20 Interest	47,896	47,896		
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	311,941	308,560	3,381	
23 Insurance	142,916	66,780	76,136	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25 column (4) amount list line 24e				

3,254,101

1,093,140

355,931

127,219

482,325

63,577,577

3,144,101

1,056,681

351,321

127,169

452,911

49,923,139

110,000

18,547

3,562

23,836

2,789,506

Form **990** (2016)

17,912

1,048

5,578

10,864,932

50

expenses on Schedule O)

a BUILDING ALTERATIONS

b EQUIPMENT AND RENTALS

d INCOME TAX EXPENSE

e All other expenses

c REPAIRS AND MAINTENANCE

25 Total functional expenses. Add lines 1 through 24e

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)

Page **11**

19,126

875.899

11,984,651

47.902.310

254,196,960

476.542.033

8,493,284

35,154

829,005

34.356.424

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604.647

44,318,514

32,641,422

227,124,293

172.457.804

432,223,519

476.542.033

Form **990** (2016)

Form 990 (2016)

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34

Liabilities 22

Fund Balances

Assets or 30

Net

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

		beginning or year		End of year
1	Cash-non-interest-bearing	13,800,330	1	15,665,930
2	Savings and temporary cash investments	96,614,029	2	57,798,382
3	Pledges and grants receivable, net	66,449,131	3	84,239,087
4	Accounts receivable, net	706,333	4	491,254

3	Pledges and grants receivable, net	66,449,131	3	3
4	Accounts receivable, net	706,333	4	
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	20,000	5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(c)(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 Assets 368,434 Notes and loans receivable, net 368.434

10a

10b

15,076,060

3,091,409

25.889

9

10c

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27

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29

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31 32

33

34

0 22

0

622.250

39,951,506

27.506.141

207.648.692

165.417.364

400,572,197

440.523.703

548.922

12,062,160

33.927.685

212,974,559

440.523.703

7,120,746

124,653

1,230,000

30.853.857

3.000.000

26,231

0 14

Consolidated basis Separate basis ☐ Both consolidated and separate basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c

Yes

3b

No

Form 990 (2016)

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

Additional Data

Software ID:

Software Version:

EIN: 11-6077945

Name: Stony Brook Foundation Inc.

Form 990 (2016)

Form 990, Part III, Line 4a: Stony Brook Foundation provided SUNY Stony Brook funds for various institutional support, including but not limited to Funding construction of cutting-edge facilities such as the Medical and Research Translation (MART) as well as substantial renovations of the current existing Stony Brook University Hospital, subsidized funding to support various SUNY Stony Brook strategic academic initiatives, and Stony Brook University departments such as Mathematics, Physics and the Turkana Basin Institute, an academic base for scientific research and training in paleontology and paleoanthropology

Form 990, Part III, Line 4b:

Stony Brook Foundation provided funding to support various SUNY Stony Brook academic programs, Centers and Institutes in order to nurture academic achievement among

curriculum enhancement as well as equip classrooms and laboratories with the latest technology

SUNY Stony Brook's students and faculty by providing funds to attract and retain exceptional faculty through the use of endowed chairs and endowed professorships, aid in

Form 990, Part III, Line 4c: Stony Brook Foundation provided various student financial support to SUNY Stony Brook as well as to SUNY Stony Brooks students to assist in their effort of delivering a world-class education at a remarkably affordable price and to keep recruiting the best young minds and future leaders from across the socio-economic spectrum

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 3,306,443 including grants of \$ 1,112,157) (Revenue \$

DRGANIZED RESEARCH			

(Code) (Expenses \$ 3,308,262 including grants of \$ 1,274,899) (Revenue \$ PUBLIC SERV , ADMIN SUPP & STUDENT SUPPORT

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 2,387,056)

FISCAL AGENT

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensatemplovee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Trust 4 0l

Mr Richard L Gelfond		l x		×		٥ .	ام	1
Trustee, Chair	0 1	,		^				
Mr David E Acker	1 0	V		<		0	0	
Trustee, Vice Chair	0 0	^		^		0		
Dr James H Simons	1 0	V		_		0	0	
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Mr David E Acker	1 0	l x	_v		_	
Trustee, Vice Chair	0 0	^	_			
Dr James H Simons	1 0					
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Trustee, Chair Emeritus	0 1					
Mr Cary F Staller	1 0					
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Trustee, Secretary	1 0					

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Dr Nancy Rauch Douzinas

Trustee, Treasurer

Dr Barry S Coller

Mr Guy-Max Delphin

Mr Barry M Fox Esq

Mr Stuart D Goldstein

Trustee

Trustee

Trustee

Trustee

Trustee

Dr Ashvin B Chhabra

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Trustee, Vice Chair	0 0	^			0	3	
Dr James H Sımons	1 0	x	x		0	0	
Trustee, Chair Emeritus	0 1	,,			,	,	
Mr Cary F Staller	1 0	X	x		0	0	
Trustee, Secretary	1 0		^			0	
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Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Key employee Institutional MISC) organizations MISC) related below dotted organizations line)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

MS KAREN KEOGH	0 5	\ _x				0	0
Trustee	0 0	^				Ŭ	
MR WILLIAM L KNAPP	0 5					0	
Trustee	0 0	_ ^				U	U
DR LAURIE LANDEAU	0 5	V			0	0	
Trustee	0 0	_ ^				· ·	U
DR HENRY B LAUFER	0 5	x			0	0	0

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Trustee	0 0					Ĭ		
DR HENRY B LAUFER	0 5	.,						
Trustee	0 0	×				0	0	
MS DOROTHY LICHTENSTEIN	0 5	v				0	0	
Trustee	0.0	_ ^						
DR ROBERT LOURIE	0 5							

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Trustee

Trustee

trustee

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Trustee

DR NIRMAL MATTOO

MR RICHARD T NASTI ESO

MS LOUISE PHANSTIEL CPA

MS CAROLINE RITTER

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation from the any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and Officer Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related director. below dotted organizations employee line) 0.5 Χ 0.0 05

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112,046

41,475

74,562

97,428

250,000

184,794

250,507

91,154

350,269

150,000

166,636

217,681

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

MR LEONARD A SPIVAK ESQ	
Trustee	
MS SUSAN STEINHARDT ESQ	
Trustee	
DR SAMUEL L STANLEY JR	I

......

EX-OFFICIO TRUSTEE (VOTING)

Mr Dexter A Bailey Jr

Executive Director

Mr Jason W Hsueh

Mr David Marcus

Dr Lewis Pasternak

CEO & VP for Health Systems

Founding Dir, Global health

Director, Finance & Operations

CFO & COO

Peter Small

Jo-Ann Daniels

Deborah Lowen-Klein

AVP. Charitable Giving

CIO

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (E) (F) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation from the week (list person is both an officer from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W- 2/1099organization and 약 하 하 organizations MISC) MISC) related below dotted organizations

	line)	Adual trustee rector	tutional Trustee	<u> </u>		est compensated lovee	ner			or gamzations
Danielle Holton	30 0					×		145 890	0	65.224
ED Development, SBCH	0 0					^		145,889	U	65,324
Ms Erin Abouzaid	0 0								_	
			l		l		X	111,607	0	49,557

0 0

Former CIO (Thru 4/2016)

efile	GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493135136218
SCH	IED	ULE A	Public	Charity Statu	s and Pul	olic Supp	ort	OMB No 1545-0047
(Fori	n 990			organization is a sect	ion 501(c)(3) d	organization o		2016
990E	Z)			4947(a)(1) nonexe ▶ Attach to Form				2010
•		the Treasury	► Information abo	out Schedule A (Form			uctions is at	Open to Public Inspection
Name	of th	ue Service ne organiza		<u>www.irs.g</u>	<u>00/10/111990</u> .		Employer identific	<u> </u>
itony I	3rook F	Foundation Inc					11-6077945	
Par			for Public Charity Sta				See instructions.	
	ganız.		a private foundation becaus	•	- '	•	(4)(1)	
1		•	onvention of churches, or a			. ,, ,)(A)(I).	
2	Ш		scribed in section 170(b)		· ·			
3		•	or a cooperative hospital se	-				
4		name, city,	esearch organization opera and state					·
5			ation operated for the bene (iv). (Complete Part II)	fit of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 1/0
6		A federal, s	tate, or local government o	or governmental unit de	scribed in sectio	on 170(b)(1)(4)(v).	
7	✓	section 17	ation that normally receives (O(b)(1)(A)(vi). (Complet	e Part II)			unit or from the gener	al public described in
8		A communi	ty trust described in sectio	on 170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization or rant college of agriculture					ege or university or a
LO		from activit	ation that normally receives ties related to its exempt fu income and unrelated busi see section 509(a)(2). (0	inctions—subject to cer ness taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
1	П	•	ation organized and operate	•	r public safety S	ee section 509)(a)(4).	
12		more public	ation organized and operate ly supported organizations through 12d that describe	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509 (a	
a		Type I. A so	supporting organization open(s) the power to regularly	erated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organı	zation(s), typically by	
b		Type II. A manageme	Part IV, Sections A and I supporting organization su nt of the supporting organi	pervised or controlled i zation vested in the sar				
С		Type III f	plete Part IV, Sections A unctionally integrated. A organization(s) (see instruc	supporting organizatio				ted with, its
d		Type III n	on-functionally integrate integrated The organizati i) You must complete Pa	ed. A supporting organi on generally must satis	ization operated fy a distribution i	ın connection w	th its supported organ	
e		Check this	box if the organization rece or Type III non-functionall	eived a written determir	nation from the II	RS that it is a Ty	ype I, Type II, Type II	I functionally
f	Enter		of supported organizations		organization			
g	Provid	de the follow	ing information about the s	supported organization(s)			
(i)Na	ime of	f supported o	organization (ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governir	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No	1	
			L					
Total			tion Act Notice, see the i		Cat No 11285	-	 Schedule A (Form 9	00 000 57\ 0015

	III. If the organization for						y unider Fait
S	ection A. Public Support	•		, ,	•	•	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
	forfts, grants, contributions, and membership fees received (Do not include any "unusual grant") Tax revenues levied for the organization's benefit and either	77,940,808	55,707,361	39,770,483	49,531,605	62,350,041	285,300,298
	paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						0
_	the organization without charge	77.040.000	55 707 264	20.770.402	40 524 605	62.250.044	205 200 200
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly	77,940,808	55,707,361	39,770,483	49,531,605	62,350,041	285,300,298
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						108,908,057
6	Public support. Subtract line 5 from line 4						176,392,241
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f) Total
7	Amounts from line 4	77,940,808	55,707,361	39,770,483	49,531,605	62,350,041	285,300,298
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	743,646	747,772	748,823	1,391,425	1,549,797	5,181,463
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1,437,650	1,014,445	1,215,610	1,465,060	351,184	5,483,949
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	312,244	382,357	1,069,691	1,861,894	2,672,081	6,298,267
11	Total support. Add lines 7 through						302,263,977
12	Gross receipts from related activities,	etc (see instructio	ons)	L	L	12	11,486,252
	First five years. If the Form 990 is fo			d. fourth, or fifth	tax vear as a secti	on 501(c)(3) orga	 -
	check this box and stop here	-			•	· · · · · · <u>-</u>	
S	ection C. Computation of Publi						
14	Public support percentage for 2016 (li			olumn (f))		14	58 357 %
	Public support percentage for 2015 Sc		•	(//		15	50 574 %
	33 1/3% support test—2016. If the			n line 13, and line	e 14 is 33 1/3% or		
	and stop here. The organization qual 33 1/3% support test—2015. If the	ifies as a publicly s	upported organizat	ion			▶ ☑
_	box and stop here. The organization	n qualifies as a pub	licly supported orga	anızatıon		,	▶ □
17a	10%-facts-and-circumstances tes is 10% or more, and if the organization Part VI how the organization meets	n meets the "facts	-and-circumstance:	s" test, check this	box and stop her	e. Explain	

ightharpoonsorganization b 10%-facts-and-circumstances test-2015. 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 ightharpoonssupported 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 Schedule A (Form 990 or 990-EZ) 2016

Section A. Public Support						
the organization fails to o	qualify under t	he tests listed b	pelow, please co	mplete Part II.)	
(Complete only if you ch	ecked the box	on line 10 of Pa	art I or it the or	ganization railed	a to qualify unde	er Part II. If

	the organization rans to	9		ээлэл, рассо ос		/	
Se	ection A. Public Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
_	(or fiscal year beginning in)	. ,		, ,		, ,	
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants")						
2							
_	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						
5	to or expended on its behalf The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
-	ection B. Total Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
	Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a) 2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f) Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f) Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 L0a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a)2012	(b) 2013	(c)2014	(d) 2015	(e)2016	(f)Total
9 l0a b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 LOa b	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l0a b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l.Oa b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 l.Oa b c 11	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
9 10a b c 111	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,						
9 10a b c 111	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo						ganization,
9 10a b c 11 12	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th				
9 10a b c 11 12 13 14	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9 10a b c 11 12 13 14 <u>Se</u>	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public Section C. Computation C. Computation C. Computation C. Computation C. Computation C. Computation C.	r the organization Support Perce e 8, column (f) d	's first, second, the intage invided by line 13,	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9 10a b c 11 12 13 14 S6 15	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public S Public support percentage from 2015 S	r the organization Support Perce e 8, column (f) d chedule A, Part I:	's first, second, the second of the second o	nird, fourth, or fift		ection 501(c)(3) or	ganization,
9.0a b c 11 12 13 14 S6	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investe	r the organization Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage ivided by line 13, II, line 15 Percentage	olumn (f))	h tax year as a se	ection 501(c)(3) or	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public S Public support percentage from 2015 S	r the organization Support Perce e 8, column (f) d chedule A, Part I: nent Income	's first, second, the intage ivided by line 13, II, line 15 Percentage	olumn (f))	h tax year as a se	ection 501(c)(3) or	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se 17	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investe	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income 6 (line 10c, colu	's first, second, the second of the second o	olumn (f))	h tax year as a se	15 16	ganization,
9 l0a b c 11 12 13 14 Se 15 16 Se 17	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section Public support percentage for 2016 (lin Public support percentage from 2015 Section D. Computation of Investi Investment income percentage from 2015	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income .6 (line 10c, colui 015 Schedule A,	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18	ganization, ▶□
9 l0a b c 11 12 13 14 Se 15 16 Se 17 18 19a	Calendar year (or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ection C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization Support Perce e 8, column (f) d chedule A, Part I: ment Income .6 (line 10c, colui 015 Schedule A, organization did r	's first, second, the second of the second o	column (f))	h tax year as a se	15 16 17 18 133 1/3%, and line	ganization, ▶□

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ightharpoons

ightharpoons

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

7

8

10a

Schedule A (Form 990 or 990-EZ) 2016

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	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	1 - '		l

	(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)	L
	W 20010 305 (4)(1) 01 (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	Ĺ
	below	ſ
•	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	

	III Section 309(a)(1) or (2)	2	i
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	Ī

	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a	
	Did the eventualities have obtained and discussion in deciding whather to make make to the fewers commented	\Box	

		30	l
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections	·	
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		

	to the foleigh supported organization was used exclusively for section 170(e)(2)(b) purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by		
	amendment to the organizing document)	5a	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its		

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
C-	ection B. Type I Supporting Organizations			
se	ection B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗆	1.03	"
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or			
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such			
	powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that			
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
			•	•
Se	ection C. Type II Supporting Organizations		Yes	N.
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [res	No
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	or		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
				•
Se	ection D. All Type III Supporting Organizations		Τ.,	
	Did the appropriate provide to each of the growth of account to the last the cold of the cold of the	,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of			
	Form 990 that was most recently filed as of the date of notification, and (III) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	<u> </u>	-	<u> </u>
2	Were any of the organization's officers directors or trustoes either (1) appointed or elected by the supported arrangement	n 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)	<u> </u>		
_	Divinion of the valeting described in (2) did the surround of	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	actions)		
a				
b				
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))
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 supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3		
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>		
	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.	_		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	\vdash	1	
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		
		,	1	

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	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	

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .



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Political Campaign and Lobbying Activities

OMB No 1545-0047

DLN: 93493135136218

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

3

5

SCHEDULE C (Form 990 or 990-

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Stony Brook Foundation Inc. 11-6077945 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-

Schedule C (Form 990 or 990-EZ) 2016

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Schedule C, Part II-A, Line 1(B)

University

		Inder section 501(h)).	(a)			(b)	
ctiv.		11 below, provide in Part IV a detailed description of the lobbying	Yes	No	A	moun	t
1		ation attempt to influence foreign, national, state or local legislation, olic opinion on a legislative matter or referendum, through the use of					
а	Volunteers?						
b	Paid staff or management (include con	npensation in expenses reported on lines 1c through 1i)?			1		
C	Media advertisements?				1		
d	Mailings to members, legislators, or th	e public?					
е	Publications, or published or broadcast	t statements?					
f	Grants to other organizations for lobby	/ing purposes?					
g	Direct contact with legislators, their sta	affs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, con	ventions, speeches, lectures, or any similar means?					
i	Other activities?						
j	Total Add lines 1c through 1i						
2a	Did the activities in line 1 cause the or	ganization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax i	ncurred under section 4912					
С	If "Yes," enter the amount of any tax i	ncurred by organization managers under section 4912					
d	If the filing organization incurred a sec	ction 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organi (6).	ization is exempt under section 501(c)(4), section 501(c)	(5), o	r secti	on 5	01 (c)
	•					Yes	No
1	Were substantially all (90% or more) of	dues received nondeductible by members?			1		
2	Did the organization make only in-hou	se lobbying expenditures of \$2,000 or less?			2		
3		er lobbying and political expenditures from the prior year?			3		
	and if either (a) BOTH answered "Yes."	ization is exempt under section 501(c)(4), section 501(c) Part III-A, lines 1 and 2, are answered "No" OR (b) Part	III-A,			01 (c)(6)
1	Dues, assessments and similar amoun		1				
2	Section 162(e) nondeductible lobbying expenses for which the section 52	and political expenditures (do not include amounts of political 7(f) tax was paid).					
a	Current year		2a				
b	Carryover from last year		2b				
C	Total		2c				
3		6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		n line 2c exceeds the amount on line 3, what portion of the excess does the reasonable estimate of nondeductible lobbying and political					
5	Taxable amount of lobbying and politic	cal expenditures (see instructions)	5				
	art IV Supplemental Informa						
Pro	vide the descriptions required for Part I	A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list),	Part II-	A, lines	1 and	2 (se	
ınst	tructions), and Part II-B, line 1 Also, con Return Reference	nplete this part for any additional information Explanation					
	Recuiri Nererence	Explanation					

The Foundation does not engage in any direct lobbying activity itself, the foundation hires AN outside lobbying consultant to advocate on behalf of educational and budget issues impacting Stony Brook

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As Filed Data -

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. OMB No 1545-0047

DLN: 93493135136218

(Form 990)

Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** Stony Brook Foundation Inc 11-6077945 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on 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 3 Aggregate value of grants from (during year) 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 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? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 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? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? □ No 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 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 on Form 990, Part VIII, line 1 90,500 7,002,117 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

- 21	4111	Organizations M	aintaining Coi	lections of	r Aft, His	torica	ııreas	sures, o	r Otner	Similar A	issets (c	ontinued)	
3		g the organization's acq s (check all that apply)	juisition, accessioi	n, and other	records, ch	eck any	of the	following	that are	a sıgnıfıcant	use of its	collection	
а	✓	Public exhibition				d [☐ Loa	n or exch	ange pro	grams			
b	✓	Scholarly research				e [☐ Oth	er					
c	✓	Preservation for future	e generations										
4	Provi Part :	de a description of the XIII	organization's col	lections and	explain ho	w they f	urther t	he organi	zation's e	exempt purp	ose in		
5		ng the year, did the org s to be sold to raise fur								mılar	☐ Yes	. V 1	No
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			on Form	990, P	art IV,	line 9, o	r report	ed an amo	unt on F	orm 990	, Part
1a		e organization an agent ded on Form 990, Part :		an or other II	ntermediar	y for co	ntributio	ons or oth	er assets	not	☐ Yes	. V 1	No
ь	If "Y€	es," explain the arrange	ement in Part XIII	and complet	te the follo	wing tal	ole				Amount		_
С		nning balance		,		_			1c				_
d	_	ions during the year							1d				_
е	Dıstrı	ibutions during the year	r						1e				_
f	Endır	ng balance							1f				_
2 a	Dıd tl	he organization include	an amount on Fo	orm 990, Part	: X, line 21	, for esc	row or o	custodial a	account	iability?	✓ Yes		— Vo
ь		es," explain the arrange										. 🗸	
Pa	rt V	Endowment Fun	ds. Complete if										
1-	Region	ning of year balance .		(a)Current	year 656,875	(b) Prior	year ,914,116		ears back 96,350,99		ears back 4,681,221	(e) Four ye	ars back 5,375,578
	=	butions		· ·	982,642		,280,843		9,873,99		0,858,611		,743,981
		vestment earnings, gair	ns and losses		444,388		,985,414		17,610,96		5,404,060		,566,320
		or scholarships		,	<u> </u>		. ,						
		expenditures for facility											
		ograms	C 3	10,	134,900	11	,064,534		9,727,04	1 9	9,094,839	8	,183,308
f	Admın	strative expenses .		7,9	982,151	5	,458,964		6,194,79	6 5	5,498,063	5	,821,350
g	End of	year balance		233,9	966,854	219	,656,875	2	07,914,11	6 196	5,350,990	154	,681,221
2	Provi	de the estimated perce	ntage of the curre	ent year end	balance (lı	ne 1g, d	olumn (a)) held a	as				
а	Board	d designated or quasi-e	endowment 🟲	2 360 %									
b	Perm	anent endowment 🕨	73 660 %										
С	Temp	oorarily restricted endo	wment ▶ 23 9	980 %									
	The p	percentages on lines 2a	, 2b, and 2c shou	ıld equal 100	%								
3a		here endowment funds	not in the posses	ssion of the o	rganızatıor	that a	e held a	ınd admın	ustered f	or the			
	-	nization by									7-	Yes	No
		nrelated organizations elated organizations				•					3a	(ii)	No No
b		es" on 3a(II), are the re		ns listed as re	equired on	 Schedu	e R? .	• •			. 3		+
4		ribe in Part XIII the inte	-		•						L	l l	
Pai	rt VI	Land, Buildings,	and Equipmen	nt.									
		Complete if the or									1		
	Descri	iption of property	(a) Cost or oth (Investme		(b)Cost or	other bas	is (other)	(c) Acc	umulated	depreciation	(1	d) Book valı	ıe
1a	Land						1,122,85	4					1,122,854
b	Buildin	ngs					6,776,16	8		2,592,298			4,183,870
С	Leaseh	nold improvements											
d	Equipn	ment					148,15	1		111,721			36,430
е	Other						7,028,88	7		387,390			6,641,497
Tota	I. Add	lines 1a through 1e (Co	olumn (d) must e	qual Form 99	00, Part X,	column	(B), line	10(c))		>		1	1,984,651

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c)Method of valuation	
(1)Financial derivatives		Cost or end-of-year market value	
(2)Closely-held equity interests			
A) INVESTMENTS IN US EQUITY FUNDS	117,920,518	F	
B) INVESTMENTS IN MULTI-STRATEGY	101,058,288	F	
C) INVESTMENTS IN PRIVATE EQUITY	21,538,837	F	
D) INVESTMENTS IN GLOBAL EQUITY	10,650,383	F	
E) INVESTMENTS IN CORE-PROPERTY	2,304,566	F	
F) INVESTMENTS IN DIVERSIFIED FIX	624,368	F	
G) OTHER LONG-TERM INVESTMENTS	100,000		
G)			
H)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Comple	254,196,960	d 'Voc' on Form 990 Part IV June 1	1.0
See Form 990, Part X, line 13.	te ii the organization answere		
(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 answ	wered 'Yes' on Form 990, Part IV,	line 11d See Form 990, Part X, line 15	
(a) Descr			
	ription	(b) Boo	k value
1)	ription	(b) Boo	k value
1) 2)	ription	(b) Boo	k value
1) 2) 3)	ription	(b) Boo	k value
1) 2) 3) 4)	ription	(b) Boo	k value
1) 2) 3) 4) 5)	ription	(b) Boo	k value
1) 2) 3) 4) 5)	ription	(b) Boo	k value
1) 2) 3) 4) 5)	ription	(b) Boo	k value
1) 2) 3) 4) 5) 6) 7)	ription	(b) Boo	k value
1) 2) 3) 4) 5) 6) 7)	ription	(b) Boo	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization	5)		k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organizat See Form 990, Part X, line 25.	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25 (a) Description of liability	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes NNUITIES PAYABLE 2)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes ANNUITIES PAYABLE 2) 3)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes ANNUITIES PAYABLE 2) 3) 4)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes ANNUITIES PAYABLE 2) 3) 4) 5)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes ANNUITIES PAYABLE 2) 3) 4) 5) 6)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organizat See Form 990, Part X, line 25 (a) Description of liability 1) Federal income taxes MNNUITIES PAYABLE 2) 3) 4) 5) 6) 7)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organizat See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes ANNUITIES PAYABLE 2) 3) 4) 5) 6) 7) 8)	5)	90, Part IV, line 11e or 11f.	k value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15 Part X Other Liabilities. Complete if the organizat See Form 990, Part X, line 25. L. (a) Description of liability 1) Federal income taxes ANNUITIES PAYABLE 2) 3) 4) 5) 6) 7)	5)	90, Part IV, line 11e or 11f.	k value

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

4b

Explanation

4c

5

63,577,577

Schedule D (Form 990) 2015

Page 4

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Supplemental Information

Schedule D (Form 990) 2016

b

c

Part XIII

See Additional Data Table

Return Reference

5

Page 5	Schedule D (Form 990) 2015				
inued)	Part XIII Supplemental Information (co				
Explanation	Return Reference				

Schedule D (Form 990) 2016

Additional Data

Software Version:

EIN: 11-6077945

Name: Stony Brook Foundation Inc

Supplemental Information

Return Reference

Explanation

ORGANIZATIONS COLLECTIONS
OF ART, HISTORICAL TREASURES
OR OTHER ASSETS

SCHEDULE D, Part III, Line 4 The foundation owns the Pollock-krasner house and study cente
or The center operates as a museum and library. The extensive research collections develop
ed at the center attract scholars, students and researchers from around the world. The United States department of the interior has designated it as a national historic landmark. The foundation also owns various books, photographs, journal collections, and fine arts use distribution of suny stony brook by nurturing academic instruction, research, library and public service

Supplemental Information	
Return Reference	Explanation
ESCROW AND CUSTODIAL ARRANGEMENTS	SCHEDULE D, Part IV, Line 2b The foundation holds funds as a trustee/disbursing agent for auxiliary agencies of stony brook university, which amounted to \$34,356,424 as of June 30, 2017 Such amounts are included in cash and cash equivalents and other investments in the accompanying combined statements of financial position. The foundation charges fees to the ese agencies for administrative costs, which amounted to \$2,058,544 for fiscal year 2017,

Commission and all Toda commissions

which is included in contracts and other support in the combined statement of activities

Supplemental Information	
Return Reference	Explanation
ENDOWMENT FUNDS	SCHEDULE D, Part V, Line 4 The Foundation's endowment is intended to subsidize its charita ble mission of supporting Stony Brook University's educational programs. Although the Foun dations adopted policies allow for the appropriation for expenditure of the principal of e ndowment funds in certain cases where doing so is deemed prudent, the Foundation generally leaves the endowment assets untouched, while using investment income therefrom to fund various charitable programs and initiatives.

Supplemental Information	
Return Reference	Explanation
ASC 740 FOOTNOTE	SCHEDULE D, Part X, Line 2 The Foundation follows guidance that clarifies the accounting f or uncertainty in tax positions taken or expected to be taken in a tax return, including i ssues relating to financial statement recognition and measurement. This guidance provides that the tax effects from an uncertain tax position can only be recognized in the financia. I statements if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based sole. If you have technical merits of the position, without regard to the likelihood that the tax position may be challenged. The Foundation is exempt from federal income tax under IRC section 501(c)(3), though it is subject to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the Code. The Foundation has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, to determine its filing and tax obligations in jurisdictions for which it has nexus, and to identify and evaluate other matters that may be considered tax positions. The Foundation has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements.

Supplemental Information Return Reference Explanation SCHEDULE D, Part XI, Line 4b Special Events Expenses Reclassed to Revenue (\$389,428) Gamin RECONCILIATION OF REVENUE

RECONCILIATION OF REVENUE

WITH AFS

SCHEDULE D, Part XI, Line 4b Special Events Expenses Reclassed to Revenue (\$389,428) Gamin

g expenses RELATED TO FUNDRAISING ACTIVITIES reclassed to Revenue (3,762) COGS Expenses Re

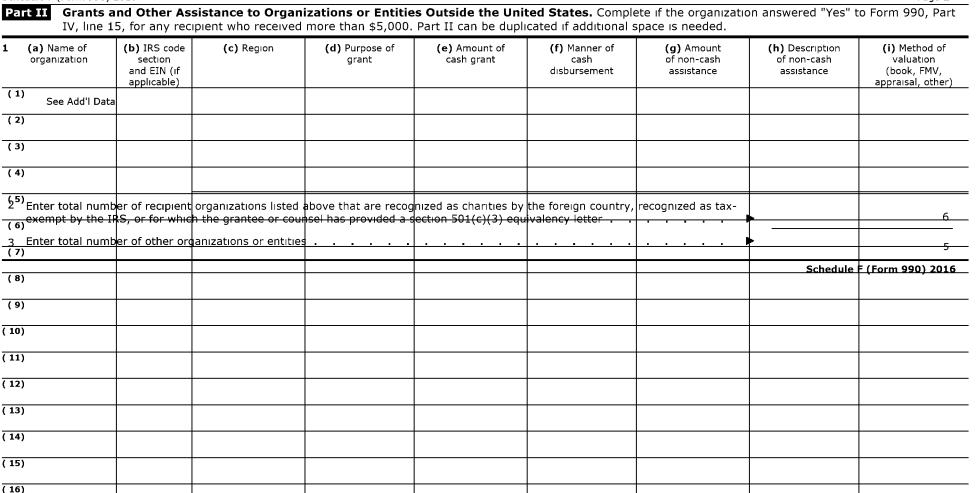
classed to Revenue (13,452) ------ Total (\$406.642) ==========

Supplemental Information	
Return Reference	Explanation
RECONCILIATION OF EXPENSES	SCHEDULE D, Part XII, Line 4b Special Events Expenses Reclassed to Revenue \$389,428 Gaming

WITH AFS

SCHEDULE D, Part XII, Line 4b Special Events Expenses Reclassed to Revenue \$389,428 Gaming expenses RELATED TO FUNDRAISING ACTIVITIES reclassed to Revenue 3,762 COGS Expenses Reclassed to Revenue 13,452 common and the same to recommend to to

efile GRAPHIC prin	t - DO NOT F	PROCESS	As Filed Data	a - DLN: 9349313513621				
SCHEDULE F (Form 990)	State	Statement of Activities Outside the United States OMB No. 1545-00			utside the United States			
(1 01111 000)		► Comple	te if the organizatio	on answered "Yes" to Form	990,	2016		
				14b, 15, or 16.				
Department of the Treasury Internal Revenue Service	▶ Informa			See separate instructions. and its instructions is at wi	vw.irs.gov/form990.	Open to Public Inspection		
Name of the organization Stony Brook Foundation					Employer ide	ntification number		
Stony Brook Foundation	Inc				11-6077945			
	Information , Part IV, line		s Outside the l	Jnited States. Comple	te if the organization a	answered "Yes" to		
other assistance, to award the grai	the grantees' nts or assistances. Describe in	eligibility for t ce?	he grants or assi	substantiate the amount stance, and the selection dures for monitoring the	criteria used	✓ Yes □ No ther assistance		
3 Activites per Region	n (The followin	ng Part I, line 3	table can be dupl	cated if additional space is	needed)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continua Part I c Totals (add lines 3	a and 3b)		ns for Form 990.		No 50082W Schedu	150,291,869 150,291,869		



(4) (5) (6)

(7) (8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or assistance (b) Region (a) Description

(a) Type of grant of assistance	(D) Region	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)							
(2)	•						

			assistance	assistance	(book, FMV, appraisal, other)
(1)					
(2)					

(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 5520 and 5520 Pry	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
		☑ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	☑ No

Schedule F (Form 990) 2016	Page 5
Provide the ii amounts of ii method); and	tal Information Information Information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting di Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide al information (see instructions).
Return Reference	Explanation
ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS OUTSIDE US	SCHEDULE F, Part I, Line 2 The foundation makes grants outside of the U S only to organizations affiliated with stony brook university. In the case of a grant from funds of the foundation designated for a particular purpose, the designated account manager submits a requisition for the grant, together with supporting documentation, to the foundation's procurement department. A detailed justification for the grant is required, including the purpose of the grant. The grant request is reviewed, including for compliance with the terms of instrument designating the funds for a particular purpose, and approved. In the case of a request for more than \$5,000, review, approval and manual check signature by the foundation's business office is required. In the case of grants from the foundation's unrestricted funds, a grantee submits a request, together with supporting documentation. A detailed justification for the grant is required, including the purpose of the grant. The budget committee, together with the foundation's executive director, reviews and approves grant request from the foundation's unrestricted funds. In all cases, at the end of the grant term, a final report regarding the use of the grant funds is submitted by the grantee to the foundation.

Return Reference	Explanation
FOREIGN FORMS	Schedule F, Part IV Stony Brook Foundation, Inc. INVESTS DIRECTLY IN VARIOUS ALTERNATIVE INVESTMENTS THAT MAY BE ORGANIZED AS EITHER FOREIGN CORPORATIONS OR FOREIGN PARTNERSHIPS, IT, LIKEWISE, INVESTS IN DOMESTIC LIMITED PARTNERSHIPS THAT MAY, IN TURN, INVEST IN FOREIGN CORPORATIONS OR PARTNERSHIPS NEVERTHELESS, THE FOUNDATIONS INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR THE FILING OF FORMS 926, 5471, 8621, OR 8865 TO THE EXTENT THAT THE FOUNDATION IS REQUIRED TO COMPLETE ONE (OR MORE) OF THESE FOREIGN FORMS, IT IS FILED WITH THE Foundation'S FORM 990-T FILING

Additional Data

East Asia and the Pacific

Software ID: Software Version:

EIN: 11-6077945

Name: Stony Brook Foundation Inc

19,500

Form 990 Schedule F Par	t I - Activities	Outside The U	Jnited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Grantmakıng		2,896,635
Europe (Including Iceland and Greenland)			Grantmaking		49,024

Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures ın region (by type) (ı e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in reaion service(s) in region services, grants to region recipients located in the region) East Asia and the Pacific 3,500 lGrantmakınd East Asia and the Pacific 16,270 Grantmaking Central America and the Grantmakıng 15,040 Carıbbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures ın region (by type) (ı e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in reaion service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and 1.941 lGrantmakınd Greenland) North America 460 Grantmakınd Sub-Saharan Africa lInvestments Program related loan 3,000,000

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments	Multiple Managers	144,289,499

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of (d) Purpose of section (c) Region (book, FMV, cash non-cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan General 181,280 Wire Africa support Sub-Saharan OPS & Constr 2.475.833 Wire Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) support news 20,000 Wire Europe l(Includina lliteracy Iceland and Greenland) Sub-Saharan 95.808 Wire General

Africa

Support

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 12,500 Wire Europe laeneral l(Includina support Iceland and Greenland) Support News 19.500 Wire East Asia and

the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) General Support 15,000 Wire Europe l(Includina Iceland and Greenland)

Sub-Saharan ICONSTRUCTION 116.518 Wire

lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(If cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Central America GENERAL 15,040 WIRE land the ISUPPORT Caribbean **IGENERAL** 16.270 WIRE East Asia and lthe Pacific ISUPPORT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS codel (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization arant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 20.731 WIRE General Africa Support

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding

Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a

OMB No 1545-0047

DLN: 93493135136218

Open to Public Inspection

Department of the Treasury

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

Internal Revenue Service Name of the organization **Employer identification number** Stony Brook Foundation Inc 11-6077945 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations Solicitation of non-government grants ✓ Internet and email solicitations Solicitation of government grants ✓ Phone solicitations ✓ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ✓ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have ındıvıdual from activity (or retained by) (or retained by) custody or or entity (fundraiser) fundraiser listed in organization control of col (i) contributions? No Yes Event Associates Inc 162 W Fundraising Event Nο 2,238,435 70,000 2,168,435 56th 2 9 10 70,000 Total 2,238,435 2,168,435 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

	rt II Fundraising Events. Completion \$15,000 of fundraising egross receipts greater than \$15,000 of fundraising egross greater greater than \$15,000 of fundraising egross greater grea	vent contributions and			
Revenue		(a)Event #1 SB GALA 2017 (event type)	(b) Event #2 LISVH GOLF (event type)	(c)Other events 19 (total number)	(d) Total events (add col (a) through col (c))
×					
	1 Gross receipts	2,238,435	166,775	475,614	2,880,824
	2 Less Contributions	2,133,650	127,852	346,088	2,607,590
	Inne 2)	104,785	38,923	129,526	273,234
ω.	5 Noncash prizes				
Ulrect Expenses	6 Rent/facility costs	9,763		1,065	10,828
å X	7 Food and beverages	198,083	25,861	62,229	286,173
ŭ	8 Entertainment	5,100	16,220	6,811	28,131
DIE.	9 Other direct expenses	3,461	14,496	46,339	64,296
	10 Direct expense summary Add lines 4 to	through 9 in column (d)		•	389,428
	11 Net income summary Subtract line 10			•	-116,194
Par	Gaming. Complete if the organization on Form 990-EZ, line 6a.	anization answered "Ye	s" on Form 990, Part I	V, line 19, or reported	more than \$15,000
Revenue	·	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Ke	1 Gross revenue			26,089	26,089
Expenses	2 Cash prizes			1,130	1,130
e d X	3 Noncash prizes			2,306	2,306
ਜ ਜ਼ਿਲ੍ਹ	4 Rent/facility costs				
	5 Other direct expenses			326	326
		☐ Yes%_	☐ Yes %	☐ Yes %	
	6 Volunteer labor	☐ No	☐ No	☑ No	
	7 Direct expense summary Add lines 2 t	hrough 5 in column (d)		•	3,762
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	n (d)	•	22,327
9 a b	Enter the state(s) in which the organization licensed to conduct gard "No," explain	= =			✓ Yes □ No
_	,				
0a b	Were any of the organization's gaming lid				☐ Yes ☑ No

Sche	dule G (Form 9	990 or 990-EZ) 2016						Pag	је З
11	Does the org	anızatıon conduct gamı	ng activities with nonmer	mbers?			☐Yes	✓ No	
12		zation a grantor, benef minister charitable gan		t or a membe	r of a partnership or other entity		□Yes		
13	Indicate the	percentage of gaming a	activity conducted in						
а	The organiza	tion's facility				13a		100 000	%
b	An outside fa	cility				13b			%
14	Enter the nar	me and address of the I	person who prepares the	organization'	s gamıng/specıal events books and r	ecords			
	Name ►	Jo-Ann Daniels							
	Address ►	230 Administration E Stony Brook, NY 117	794						
15a	Does the organizers	anızatıon have a contra	ect with a third party from	n whom the o	rganization receives gaming		□Yes	☑ No	
b	If "Yes," ente	er the amount of gamın	g revenue received by the	e organizatioi	n ▶ \$ and ti	ne			
	amount of ga	iming revenue retained	by the third party ► \$ _						
С	If "Yes," ente	er name and address of	the third party						
	Name ►								
	Address ▶								
16	Gaming man	ager information							
	Name 🟲	Jonathan Spier							
	Gaming man	ager compensation 🕨 🕏)	0					
	Description o	f services provided 🕨	Member in Charge						
	☐ Director/	officer/	☑ Employee		☐ Independent contractor				
17	Mandatory dı	stributions							
а	_	zation required under s ate gaming license?	tate law to make charital	ole distributio	ns from the gaming proceeds to		□Yes	√ No	
b	Enter the am	ount of distributions re	quired under state law di	stributed to c	ther exempt organizations or spent				
			tivities during the tax yea						
Pai	III, li		, 15c, 16, and 17b, as		quired by Part I, line 2b, column Also complete this part to provi				
	Retur	n Reference			Explanation				
GAM:	ING MANAGER	INFORMATION		ot compensat	ndividual in charge of overseeing the ed for that job responsibility, he und)
			•		School	lule G (Fo	orm 990 or	990-F7) 20	16

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -				DL	N: 93493135136218		
Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Department of the Treasury Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .							OMB No 1545-0047 2016 Open to Public Inspection		
Name of the organization						Employer identific	cation number		
Stony Brook Foundation Inc						11-6077945			
Part I General Inform	nation on Grants	and Assistance				-			
Does the organization ma the selection criteria used					for the grants or assistance	e, and	☑ Yes ☐ No		
2 Describe in Part IV the org	ganızatıon's procedur	es for monitoring the us	se of grant funds in the Ur	ited States					
			ind Domestic Governme ditional space is needed	nts. Complete if the or	rganization answered "Yes"	on Form 990, Part IV, line	e 21, for any recipient		
(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		
2 Enter total number of sect	tion 501(c)(3) and go	overnment organizations	s listed in the line 1 table .			•	5		
3 Enter total number of other	er organizations liste	d in the line 1 table .				•	2		
For Paperwork Reduction Act Noti	ce, see the Instructio	ns for Form 990.		Cat No 50055	iP	Sch	edule I (Form 990) 2016		

Schedule I (Form 990) 2016

(6)

(7)

Part IV

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

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

Return Reference ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS IN U.S.

SCHEDULE I, PART I, LINE 2 When the Foundation issues grants from funds with a purpose restriction, the designated account manager submits a requisition for the grant, together with supporting documentation, to the foundation's procurement department. A detailed justification for the grant is required, including the purpose of the grant. The grant request is reviewed, including for compliance with the terms of instrument designating the funds for a particular purpose, and approved. When the Foundation issues a grant for more than \$5,000. Review, approval and manual check signature by the foundation's business office is required. When the Foundation issues a grant from unrestricted funds, A grantee submits a request, Together with supporting documentation. A detailed justification for the grant or direct payment, As applicable, is required including the purpose of the grant or direct payment, As applicable. The budget committee, together with the foundation's executive director, reviews and approves requests from the foundation's unrestricted funds. Depending on the type of grant and the grant recipient, at the end of the grant term, a final report regarding the use of the grant funds is submitted by the grantee to the foundation. In lieu of making grant payments, the foundation may pay expenses directly on behalf of a grantee For the academic prizes and awards, the funds are distributed incrementally, and the increments shall be based on business plan milestones and/or other benchmarks identified by the Committee

Page 2

Additional Data

RESEARCH FOUNDATION -

STONY BROOK UNIV S5422 FRANK MELVILLE Stony Brook, NY 11794 STONY BROOK UNIVERSITY

261 ADMIN BLDG Stony Brook, NY 11794

OFFICE

Software ID: Software Version:

14-1368361

14-6013200

EIN: 11-6077945

Name: Stony Brook Foundation Inc

1,130,089

13,311,216

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisa
or government				assistance	other)

501(C)(3)

GOVERNMENT

(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	(book, FM
or government				assistance	0

4,830,598 book

(q) Description of

non-cash assistance

Equipment

(h) Purpose of grant

or assistance

Research Awards

Educational Support

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

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 51-0160098 501(C)(3) 24.624 Operation Support ALUMNI ASSOC OF THE StUNIV OF NY at stony brook 1315 FM JRMEMLIBR Stony Brook, NY 11794

Educational Support

67.785

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

501(C)(3)

FACULTY STUDENT

ASSOCIATION W SIDE DINING FL 2 Stony Brook, NY 11794 11-1986378

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 81-1886367 25.000 CHROMA FISH CORP Academic Prizes 18 MILLBURN LANE ROSLYN HEIGHTS, NY 11577

UNIVERSITY ASSOCIATES IN 11-2569522 501(C)(3) 230,857 OBGYN UFPC

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

STONY BROOK, NY 11790

RESEARCH AWARDS PO BOX 1554

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Academic Prizes

12.500 SMARTVISION LLC 81-5033920

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

319 EASTWOOD BLVD CENTEREACH, NY 11720 efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493135136218

Employer identification number

OMB No 1545-0047

2015

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule J (Form 990)

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

Stony Brook Foundation Inc 11-6077945 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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 idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Νo Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Νo 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 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4с Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5а Νo 5h Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on 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 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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

For each individual whose compensation must be reported on 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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (I) compensation	(iı) Bonus & ıncentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 Mr Dexter A Bailey Jr Executive Director	(i)	6,000	41,258	137,536	0	0	184,794	0
	(ii)	0	0	0	0	0	0	0
2 Mr Jason W Hsueh CFO & COO	(i)	250,507	0	0	0	112,046	362,553	0
	(ii)	0	0	0	0	0	0	0
3 Ms Erin Abouzaid Former CIO (Thru 4/2016)	(i)	81,607	30,000	0	0	49,557	161,164	0
	(ii)	0	0	0	0	0	0	0
4 Dr Lewis Pasternak CEO & VP for Health Systems	(i)	200,000	150,269	0	0	0	350,269	0
	(ii)	0	0	0	0	0	0	0
5 Jo-Ann Daniels Director, Finance &	(i)	166,636	0	0	0	74,562	241,198	0
Operations	(ii)	0	0	0	0	0	0	0
6 Deborah Lowen-Klein AVP, Charitable Giving	(i)	217,681	0	0	0	97,428	315,109	0
,	(ii)	0	0	0	0	0	0	0
7 Danielle Holton ED Development, SBCH	(i)	145,889	0	0	0	65,324	211,213	0
25 5 5 7 5 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7	(ii)	0	0	0	0	0	0	0
8 DR SAMUEL L STANLEY JR EX-OFFICIO TRUSTEE	(i)	250,000	0	0	0	0	250,000	0
(VOTING)	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015	Page 3								
Part III Supplemental Information									
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information									
Return Reference Explanation									
TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	SCHEDULE J, Part I, Line 1a The Foundations Executive Director received \$77,536 for a tax gross-up payment for his loan forgiveness, which was included in taxable income on his Form W-2 and is reported in Form 990, Schedule J, Part II, column (B)(III)								
METHOD OF ESTABLISHING COMPENSATION OF THE CEO/EXECUTIVE DIRECTOR	SCHEDULE J, PART I, LINE 3 THE FOUNDATION'S EXECUTIVE DIRECTOR IS A STATE UNIVERSITY EMPLOYEE, AND AS SUCH, THE STATE (AN UNRELATED GOVERNMENT ENTITY) DETERMINES APPROPRIATE COMPENSATION FOR THE EXECUTIVE DIRECTOR AND REQUESTS THAT THE FOUNDATION AGREE TO BEAR A PORTION OF THE COMPENSATION THE FOUNDATION'S BOARD RELIES ON THE STATE'S DETERMINATION OF APPROPRIATE OVERALL COMPENSATION FOR THE EXECUTIVE DIRECTOR AND DETERMINES WHETHER TO APPROVE PAYMENT OF A PORTION OF THE COMPENSATION BY THE FOUNDATION ACCORDINGLY, SINCE THE FOUNDATION DOES NOT ESTABLISH THE EXECUTIVE DIRECTOR'S COMPENSATION, FORM 990, SCHEDULE J, QUESTION 3 IS LEFT BLANK								
NONFIXED BONUS PAYMENTS	SCHEDULE J, PART I, LINE 7 In accordance with Employment contracts, bonuses are determined by the guidelines outlined for each individual based on performance and merit. The bonuses are approved by each respective department, followed by approval from SBF CFO before the bonus is issued.								

Schedule J (Form 990) 2015

efile GRAPHI	C print - DO I	NOT PROCES	S As F	iled Data -					DL	N: 93	4931	.3513	36218
Schedule L (Form 990 or 990	-EZ)		► Comp	ns with Ir	anization ans	swered				0	MB No		
		"Yes" on Fo	orm 990, P or Form	art IV, lines 2! n 990-EZ, Part	5a, 25b, 26, : V, line 38a d	27, 28a, 28b, or 40b.	or 28	c,			2(11	6
Department of the Tre nternal Revenue Serv	asurv	nformation ab		ch to Form 990 ule L (Form 99 <u>www.irs.gov</u>	90 or 990-EZ		ruction	ns is	at		Open		ıblic
Name of the org	anızatıon						En	nplo	yer ide	entifica			
Stony Brook Found	ation Inc						11	-607	7945				
	ss Benefit Tr						rganıza	tions	only)				
	lete if the organ											D. C	
1 (a) Name of disqu	alified person	(6)	Relationship be	etween aisqua organization	lified person ai		` '	escripi ansacti	tion of ion		es Corr	rected? No
												C3	110
							_						
											+		
Cor	orted an amoun (b) Relationsh	anization answe t on Form 990, ip (c) Purpose	ered "Yes" o Part X, line (d) Loan	on Form 990-EZ, 5, 6, or 22	(e)Original principal amount	(f)Balance	90, Par (g) defa	In	n (h)		• -		ten:
			То	From			Yes	No	Yes	No	Yes		No
Total					\$	0							
	nts or Assist					line 27							
(a) Name of inte		(b) Relationship		(c) Amount		(d) Type	of assis	stanc	e	(e) Pu	rpose	of assi	stance
	· ·	nterested perso											
		organizat				1							
		organizat											
		organizai											
		or garrizat											
		oi ganizai											

transaction

Explanation

members, Dr James Simons and Henry B Laufer have an ownership interest and where they both sit on the

Board of Directors The value of the Foundations holdings with the firm is \$43,977,236, for the year ending June 30, 2017, the Foundation paid the investment firm \$836,987 in investment management fees

between interested

person and the

organization

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

Page 2

of

organization's

revenues2

Schedule L (Form 990 or 990-EZ) 2016

	Organización			level	iues
				Yes	No
(1) Dr James SimonsHenry Laufer	Board members/Substantial Contributors	43,977,236	Investments Held		No
(2) Dr James SimonsHenry Laufer	Board members/Substantial Contributors	836,987	Investment Fees		No

BUSINESS TRANSACTIONS INVOLVING Schedule L. Part IV The Foundation holds investments with an investment firm where Board of Trustees

Return Reference

Supplemental Information

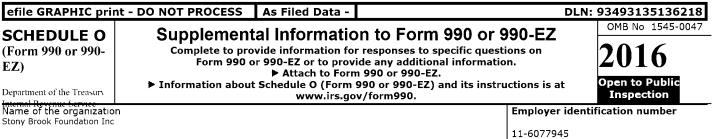
Part V

INTERESTED PERSONS

Schedule L (Form 990 or 990-EZ) 2016

efil	e GRAPHIC pr	rint - DO NOT PF	ROCESS	As Filed Data -		DL	N: 9349313	5136	218
	IEDULE M		- N	loncash Contri	hutions		OMB No :	L545-0	047
(For	m 990)	▶Complete if the		ons answered "Yes" on Fo		9 or 30.	20	16)
		▶ Attach to Form	990.						
	tment of the Treasury	▶Information abo	out Schedu	le M (Form 990) and its i	nstructions is at <u>www.irs</u>	s.gov/form9	90 Open t Insp		
	e of the organizat					Employer id	entification n	umbe	-
Stony	Brook Foundation Ii	nc				11-6077945			
Pa	rt I Types	of Property							
		, ,	(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) hod of determi n contribution a		:s
1	Art—Works of art	t	X	28	90,500	FMV			
2	Art—Historical tr	easures .			,				
3	Art—Fractional in	nterests							
4	Books and public								
5	Clothing and hou								
6	goods Cars and other v					+			
7	Boats and planes		X	2	6,200) fmv			
8	Intellectual prope				,				
9	Securities—Public	cly traded .	Х	26	1,412,782	FMV			
	Securities—Close Securities—Partr	•							
	or trust interest								
	Securities—Misce		X	1	100,000	FMV			
13	Qualified conserve contribution—Hi structures	ıstorıc							
14	Qualified conserv								
15	contribution—Of Real estate—Res								
16	Real estate—Cor								
17	Real estate—Oth								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic	cal supplies .							
21	Taxidermy .								
	Historical artifact								
23 24	Scientific specim Archeological art								
	Other ► (macts	X	7	1,199	a FMV			
	lies)			,	1,133	71114			
26	Other ▶ (
27	Other ▶ (
	Other ► (
29				ition during the tax year for B, Part IV, Donee Acknowled		29		V	1
30~	During the year	did the organization	n receive h	y contribution any property r	reported in Part I lines 1 +h	rough 28 tha	.+	Yes	No
Jua		-	· ·		•	- '			
		·		ate of the initial contribution	•	to be used			1
				od?			· 30a		No
b	If "Yes," describ	e the arrangement	ın Part II						
31	Does the organi	zation have a gift a	ceptance p	olicy that requires the review	v of any non-standard contr	ibutions?	31	Yes	
32a	Does the organi contributions?		urd parties	or related organizations to so	olicit, process, or sell nonca	sh	32a	Yes	
b	If "Yes," describ	e in Part II							
33	If the organizati	ion did not report ar	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part	II							
For D	anerwork Peduction	on Act Notice, see the	Instruction	s for Form 990	Cat No. 512271	Sc	hedule M (Forn	9901	2016)

Schedule M (Form 990) (2016)	Page 2
	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part imber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
Contributions	Sch M, Part I, Line 32b To the extent the Foundation receives donations of securities, IT employs its OWN INVESTMENT BROKER TO liquidate those securities into cash for use in carrying out its charitable mission Occasionally, the Foundation receives unique non-cash donations (e g of boats, etc), in those instances, the Foundation uses a third party vendor to dispose of the assets
	Schedule M (Form 990) (2016)



Return Reference	Explanation
AMOUNTS REPORTED ON LINE 15	FORM 990, PART I, LINE 15 Salaries, other compensation, AND employee benefits are comprised of support for campus programs, administrative offices and fundraising offices. For fisc all year 2017, the total support of \$9,633,789 includes \$5,547,757 related to campus programs, \$2,396,155 related to administrative offices and \$1,689,877 related to fundraising off ices. Other Program Services Form 990, Part III, line 4d ORGANIZED Research Stony Brook Fo undation provided support to SUNY Stony Brook in its efforts to maintain their reputation as a public research university that thrives on the forefront of discovery. As such, Stony Brook Foundation provides funding to support various areas of research including cancer research (Stony Brook Cancer Center), Parkinson disease research (The Thomas Hartman Center for Parkinson's Research, environmental and sustainability research (Shinnecock Bay Res toration Program), chemical biology research, mercury exposure through the consumption of marine fish, research in New Conjugated Materials and many other various research efforts. Public Serv., Admin Supp. & Student Support Stony Brook Foundation also aids in SUNY Sto ny Brooks firm commitment to providing a dedicated educational and social support system that enables all their students to thrive, by providing funding to improve student, administrative and public services across SUNY Stony Brook. Delegation of AUTHORITY Form 990, part VI, section A, line 1 The following committees of the Foundation's Board of Trustees have been delegated authority by the Board of Trustees. The Foundation's executive committee has all the power and authority of the Foundation's Board ("Board") when the Board is not in session, except for the authority to fill vacancies on the board or any board committee, fix, if any, compensation for board trustees (none is presently paid) including any boar d committees or to amend, repeal or adopt new foundation bylaws. The Executive committee is responsibilities and duties delegated to it FROM the Board f

Return Reference	Explanation
AMOUNTS REPORTED ON LINE 15	the board from time to time. The foundation's investment committee is responsible for the supervision of the foundation's investments and any individuals or entities to which investment management responsibility is delegated, the review of compensation of foundation in vestment managers who are also trustees or officers of the foundation and will also carry out any other responsibilities and duties delegated to it by the board from time to time. The Foundation's nominating committee assists the Board by identifying individuals qualified to become trustees and selection, or recommending that the board select, the candidates for all trusteeships to be filled by the board and will also carry out any other responsibilities and duties delegated to it by the board from time to time. Family or Business Rel ationships Form 990, Part VI, Section A, line 2 Dr. chhabra and Dr. Simons have a Business relationship. Dr. laufer and Dr. Simons have a Business relationship.

990 Schedule O, Supplemental Information

Return Reference Explanation

	·
CONTEMPORANEOUS	Form 990, part VI, section A, line 8b The foundation adopted policies pursuant to which the board and all committees of
DOCUMENTATION	the board will contemporaneously document in minutes the meetings held (other than in executive session) And written
	actions undertaken

Return Reference Explanation

990 Schedule O, Supplemental Information

ORGANIZATION'S Form 990, Part VI, section B, Line 11 THE FORM 990 WAS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM IN PROCESS USED CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT THE FORM 990 IS THEN FORWARDED TO TO REVIEW THE EXECUTIVE COMMITTEE FOR REVIEW, COMMENT AND FINAL APPROVAL THE FINAL VERSION IS FORM 990 CIRCULATED TO THE BOARD OF TRUSTEES

990 Schedule O, Supplemental Information

Return Reference	Explanation
ENFORCEMENT OF CONFLICT OF INTEREST POLICY	Form 990, Part VI, Section B, Line 12c Pursuant to the Foundation's bylaws (article IV, Section 11), all Board of Trustees Members, officers and key employees are required to complete an annual conflict of interest certification. The Internal Revenue Service requires that the Foundation disclose relationships among current and certain former members of the Board of Trustees, officers, certain employees, family members, certain independent contractors and entities in which these individuals have an ownership interest. The Annual Certification requires each Trustee, officer and key employee of the Foundation to disclose in writing the existence of any potential conflicts of interest, to certify compliance with the conflict of interest policy and to agree to abide by it. The signed Certifications shall be maintained by the Executive Director of the Foundation. If an individual becomes aware that he or she may be involved in a potentially conflicted transaction, he or she will immediately disclose the existence and material facts of his or her interest in the conflicted transaction to the Audit Committee or the Board of Trustees, as applicable. Board discussions pertaining to the conflict (and its resolution) are documented in the Board Minutes.

Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	Form 990, Part VI, Section B, Lines 15A The compensation paid to the Foundations top management official (the Executive Director) is determined by an unrelated third party the State of New York. The State has established compensation guidelines whereby compensation is capped at a specific level. The Foundation has no discretion to modify the compensation thresholds established by the State, however, the Foundation may APPROVE A REQUEST FROM THE UNIVERSITY TO PROVIDE additional compensation in an effort to attract talent and pay these individuals at a market rate rendering services to the Foundation SUCH ADDITIONAL COMPENSATION IS THEN APPROVED BY THE FOUNDATION BOARD. The compensation is memorialized in an employment contract noting that a portion of salary will come from Stony Brook Foundation and another portion from the University, causing certain employees to receive two W-2s. PROCESS FOR DETERMINING COMPENSATION Form 990, Part VI, Section B, Line 15B. The compensation paid to the Foundations other officers (COO, CFO and CIO) is recommended by the Foundations Executive Director, and is reviewed by an unrelated third party tax-exempt organization to determine if compensation is appropriate and within the guidelines of industry standards. The approved compensation is then memorialized in an employment contract.

Return

Reference	Explaination
AVAILABILITY	Form 990, Part VI, Line 19 STONY BROOK FOUNDATION, INC. MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC ON THE
OF	ORGANIZATION'S WEBSITE The Form 990 is likewise published on the internet at www guidestar org THE ORGANIZATION'S
DOCUMENTS	FINANCIAL STATEMENTS ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE THE ORGANIZATION'S
TO THE	GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY AVAILABLE TO THE PUBLIC,
PUBLIC	BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION

Explanation

Return Reference	Explanation
COMPENSATION	Form 990, Part VII In the interest of clarity, the Foundation is providing context on the compensation reported in both Part VII and Schedule J of the Form 990. The Foundation's Executive Director, Dexter Bailey, is a State University employee who undertakes two different job responsibilities. SENIOR VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT at the State University of Stony Brook and as Executive Director of the foundation. Mr. Bailey's compensation reported on Part VII of the Form 990 represents compensation paid by the Foundation for services rendered by Mr. Bailey in his capacity as Executive Director and not for any services he renders to the State University of Stony Brook BENEFITS NOT DISCLOSED ON SCHEDULE J ARE PROVIDED BY THE STATE UNIVERSITY OF STONY BROOK. The funding to support State employee compensation is approved by the Foundations Board of Directors. Dr. Samuel Stanley, ex-efficio trustee, is a NY state university employee. In 2009, The Stony Brook Foundation was asked by the SUNY Chancellor and SUNY Board of Trustees to supplement the President's compensation. Consistent with its mission to help advance the mission of the University, the Stony Brook Foundation Board approved this expense and continues to provide annual salary support. This compensation arrangement is reported in his annual conflict of interest disclosure that is shared with the Foundations Board of Directors to ensure absolute transparency. Dr. Stanley's compensated by SUNY, it is not disclosed on this Form 990 as SUNY is not a related party and the services for which he was compensated were not rendered to the Foundation Finally, it should be noted that Dr. Stanley is directly involved in fundraising of the Foundations behalf, however, the compensation reported on the Form 990 is not specifically tied to those fundraising efforts. CFO & COO., Jason Hsueh, and CiO., Daivd Marcus spend 100% of their time engaged in activities that support the Foundation. Compensation paid by an unrelated organization for services rendered to the

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Stony Brook Foundation Inc

Internal Revenue Service Name of the organization

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.

DLN: 93493135136218 OMB No 1545-0047

> Open to Public Inspection

Employer identification number

							11-6	077945				
Part I Identification of Disregarded Entities Complete	te if the organi	ızatıon answe	ered "Yes	' on Form	990, Part	IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary ac	tivity	(c Legal domi or foreign	cıle (state	(d) Total ind	come	(e) End-of-year as	nd-of-year assets Direct		i) ntrolling city	
Part II Identification of Related Tax-Exempt Organizations during the tax years.							Part I\	· 	cause			
(a) Name, address, and EIN of related organization	Prima	(b) ary activity	Legal dor	(c) nicile (state in country)	(d Exempt Co) de section		(e) charity status on 501(c)(3))	Dı	(f) irect controlling entity		ity?
(1)Stony Brook Foundation Realty 230 Administration	Real Estate	:		NY	501(c)(3)		12-I		SBF		Yes	No
Stony Brook, NY 11794 11-2622814												
(2)Stony Brook Foundation Delaware inc 230 Administration	DISSOLVED)		NY	501(c)(3)		12-I		SBF		Yes	
Stony Brook, NY 11794 13-3550753												
(3)Long Island High Tech Incubator Inc 25 east loop road	Develop Te	ch		NY	501(c)(3)		10		NA			No
Stony Brook, NY 11790 11-3059018											+	
											+-	
											+-	_
											+	
For Paperwork Reduction Act Notice, see the Instructions for Fo	rm 990.		Ca	t No 5013!					Sche	edule R (Form	990) 20	016

(a) Name, address, and EIN related organization	of	(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)		(g) Share of end-of-year assets	Disprop	h) rtionate tions?	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	(k) Percenta ownersh
					,			Yes	No		Yes	No	
		+					1						
Identification of Related Orga because it had one or more relate						zation ansv	wered "Yes	" on F	orm 9!	90, Part IV,	line	34	
Identification of Related Orga because it had one or more relate (a) Name, address, and EIN of related organization		s a corporation		t during th	(d) controlling Typentity (C of	(e)	wered "Yes (f) Share of total income	Share	(g) e of end- year assets	(h) ntage	 Se (1	L3) cont entity
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	(i) ection 5 13) contr entity Yes
because it had one or more relate (a) Name, address, and EIN of	ed organizations treated a	s a corporation	on or trus (c) egal micile or foreign	t during th	(d) controlling Typentity (C of	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Percer) ntage	 Se (1	ection 5: 13) conti entity
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Schedule R (Form 990) 2016							
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		Yes	No				
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	1a		No				
b Gift, grant, or capital contribution to related organization(s)	1 b		No				
c Gift, grant, or capital contribution from related organization(s)	1c		No				
d Loans or loan guarantees to or for related organization(s)	1d	Yes					
e Loans or loan guarantees by related organization(s)	1e		No				
f Dividends from related organization(s)	1f		No				
g Sale of assets to related organization(s)	1g		No				
h Purchase of assets from related organization(s)	1h		No				
i Exchange of assets with related organization(s)	1 i		No				
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No				
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No				
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes					
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes					
o Sharing of paid employees with related organization(s)	10	Yes					
p Reimbursement paid to related organization(s) for expenses	1 p		No				
q Reimbursement paid by related organization(s) for expenses	1q		No				
The Other transfer of each or property to related organization(s)	10		No				

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)							
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s) .				1m No			
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes		
o Sharing of paid employees with related organization(s)							
p Reimbursement paid to related organization(s) for expenses				1p		No	
q Reimbursement paid by related organization(s) for expenses							
r Other transfer of cash or property to related organization(s)				1r		No	
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 comp	lete this line, including covered	relationships and tra	ansaction thresholds				
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved				
(1)STONY BROOK FOUNDATION REALTY INC	D	368,434	COST				

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g ?	(k) Percentage ownership
			514)	Yes	No	! ,		Yes	No		Yes	No	
										Schedul	e R (Form	1 990	0) 2016

Schedule R (Form 990) 2016		e 5				
Part VII Supplemental Information						
Provide additional information for responses to questions on Schedule R (see instructions)						
Return Reference	Explanation					
SCHEDULE R, PART II	Stony Brook Foundation Delaware, Inc. dissolved on May 26, 2017	_				

Schedule R (Form 990) 2016