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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Open to Public Inspection

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

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

Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

Department of the Treasury
Internal Revenue Service

A For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final

☐ Return/terminated

☐ Amended return

☐ Application pending

C Name of organization

Cornell University

% UNIVERSITY CONTROLLER

Doing business as

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

Room/suite

341 PINE TREE ROAD

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

ITHACA, NY 14850

F Name and address of principal officer

MARTHA E POLLACK PRESIDENT

341 PINE TREE ROAD

ITHACA, NY 14850

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

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

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CORNELL.EDU

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1865

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

EDUCATION, RESEARCH, MEDICAL SERVICES AND OTHER PUBLIC SERVICES

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

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

63

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

58

5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)

40,834

6 Total number of volunteers (estimate if necessary)

7,456

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

-3,062,990

7b Net unrelated business taxable income from Form 990-T, line 34

-22,685,188

Revenue

8 Contributions and grants (Part VIII, line 1h)

510,356,488

605,956,875

9 Program service revenue (Part VIII, line 2g)

3,529,227,273

3,665,712,968

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

301,976,723

404,029,746

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

27,682,064

24,657,030

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

4,369,242,548

4,700,356,619

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

482,908,698

472,496,764

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

2,473,442,317

2,611,727,439

16a Professional fundraising fees (Part IX, column (A), line 11e)

1,409,407

324,987

b Total fundraising expenses (Part IX, column (D), line 25) ▶64,190,417

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

1,244,419,777

1,273,700,375

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

4,202,180,199

4,358,249,565

19 Revenue less expenses Subtract line 18 from line 12

167,062,349

342,107,054

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

12,369,905,113

12,816,316,557

21 Total liabilities (Part X, line 26)

3,450,816,266

3,056,827,482

22 Net assets or fund balances Subtract line 21 from line 20

8,919,088,847

9,759,489,075

Part II Signature Block

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

Sign Here

Signature of officer

2018-05-09

Date

JOANNE M DESTEFANO TAX DIRECTOR

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

BARBARA E HUNT

Preparer's signature

BARBARA E HUNT

Date

Check ☐ if self-employed

PTIN

P00916443

Firm's name ▶ ERNST & YOUNG US LLP

Firm's EIN ▶

Firm's address ▶ 200 CLARENDON STREET

Phone no (617) 266-2000

BOSTON, MA 021165072

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2016)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 1,333,376,000 including grants of \$ 411,605,468) (Revenue \$ 1,041,688,506)
See Additional Data

























4b (Code) (Expenses \$ 1,133,964,000 including grants of \$ 0) (Revenue \$ 1,050,433,142)
See Additional Data

4c (Code) (Expenses \$ 598,089,000 including grants of \$ 49,498,177) (Revenue \$ 627,482,593)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ 720,341,820 including grants of \$ 0) (Revenue \$ 946,108,728)

4e Total program service expenses ► 3,785,770,820

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16 Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	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 government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	Yes
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	No
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	No
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	No
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	Yes
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

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

		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	37,271		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	40,834		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes		
b	If "Yes," enter the name of the foreign country AS , FR , HK , IT , LU , NP , QA , UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	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			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			

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

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: **AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA**

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **UNIVERSITY CONTROLLER 341 PINE TREE ROAD ITHACA, NY 148502820 (607) 255-3581**

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

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

Form **990** (2016)

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								37,731,203	0	767,918

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 4,356

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BNY MELLON, 101 BARCLAY STREET NEW YORK, NY 10007	INVESTMENTS	45,585,728
GEMINI CONSULTING SERVICES LLC, 3636 S GEYER ROAD SUITE 270 SUNSET HILLS, MO 63127	CONSULTING	8,111,071
GI ENDURANT LLC, 134 N LASALLE ST SUITE 510 CHICAGO, IL 60602	TECH CONSULTANT	6,259,104
GALLAGHER KOSTER, 500 VICTORY ROAD BROOKLYN, NY 11222	INSURANCE/RISK MGMT	4,470,389
ARTHRITIS OSTEOPOROSIS, 186 JORALEMON STREET BROOKLYN, NY 11201	MEDICAL CONSULTING	3,303,351

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 147

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a	0			
	b Membership dues . . .	1b	742,345			
	c Fundraising events . . .	1c	2,755,455			
	d Related organizations	1d	24,284,079			
	e Government grants (contributions)	1e	45,096,366			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	533,078,630			
	g Noncash contributions included in lines 1a-1f \$ _____		53,295,304			
	h Total. Add lines 1a-1f		605,956,875			
Program Service Revenue		Business Code				
	2a EDUCATION TUITION	900099	1,041,688,506	1,041,688,506		
	b GRANTS & CONTRACTS FOR RESEARCH	900099	627,482,593	627,482,593		
	c MEDICAL SERVICES	900099	1,050,433,142	1,050,433,142		
	d LAND GRANT MISSION GOVT APPROP	900099	150,912,298	150,912,298		
	e AUXILIARY ENTERPRISES - ROOM & BOARD	900099	162,433,072			162,433,072
	f All other program service revenue		632,763,357	546,947,651	2,083,864	83,731,842
	g Total. Add lines 2a-2f		3,665,712,968			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		77,296,506		-12,557,159	89,853,665
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		17,095,546			17,095,546
	6a Gross rents	(i) Real (ii) Personal				
		4,409,403				
	b Less rental expenses	3,785,260				
	c Rental income or (loss)	624,143 0				
	d Net rental income or (loss)		624,143		119,374	504,769
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		17,342,939,174				
	b Less cost or other basis and sales expenses	17,016,205,934				
	c Gain or (loss)	326,733,240				
	d Net gain or (loss)		326,733,240		6,652,659	320,080,581
	8a Gross income from fundraising events (not including \$ 2,755,455 of contributions reported on line 1c) See Part IV, line 18	a 657,227				
	b Less direct expenses	b 2,146,436				
	c Net income or (loss) from fundraising events		-1,489,209			-1,489,209
	9a Gross income from gaming activities See Part IV, line 19	a 0				
	b Less direct expenses	b 0				
	c Net income or (loss) from gaming activities		0			
	10a Gross sales of inventory, less returns and allowances	a 25,281,561				
b Less cost of goods sold	b 16,855,011					
c Net income or (loss) from sales of inventory		8,426,550		638,272	7,788,278	
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		0				
12 Total revenue. See Instructions		4,700,356,619	3,417,464,190	-3,062,990	679,998,544	

Part IX Statement of Functional Expenses

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

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

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	33,532,808	33,532,808		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	418,055,097	418,055,097		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	20,908,859	20,908,859		
4 Benefits paid to or for members.	0	0		
5 Compensation of current officers, directors, trustees, and key employees.	9,670,819	1,450,623	7,736,655	483,541
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	6,362,888	5,881,453	481,435	0
7 Other salaries and wages.	1,997,190,723	1,763,594,235	195,954,915	37,641,573
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	72,424,257	63,979,003	7,108,778	1,336,476
9 Other employee benefits.	434,756,959	384,060,781	42,673,420	8,022,758
10 Payroll taxes.	91,321,793	80,672,934	8,963,659	1,685,200
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	10,223,806		10,223,616	190
c Accounting.	1,583,424	0	1,583,424	0
d Lobbying.	119,500	0	119,500	0
e Professional fundraising services. See Part IV, line 17.	324,987			324,987
f Investment management fees.	45,585,728	0	45,585,728	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	245,691,848	219,480,169	24,386,685	1,824,994
12 Advertising and promotion.	0			
13 Office expenses.	53,129,190	44,224,844	4,913,872	3,990,474
14 Information technology.	70,586,399	63,527,759	7,058,640	0
15 Royalties.	4,213,434	0	4,213,434	0
16 Occupancy.	113,144,246	99,629,475	11,069,942	2,444,829
17 Travel.	44,090,038	37,848,012	4,205,335	2,036,691
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	14,207,822	9,089,201	1,009,911	4,108,710
20 Interest.	77,472,685	0	77,472,685	0
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	278,431,294	250,588,165	27,843,129	0
23 Insurance.	47,532,016	42,778,814	4,753,202	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a MAINTENANCE	62,956,830	56,658,365	6,295,374	3,091
b OTHER SUPPLIES	50,592,763	45,461,236	5,051,248	80,279
c STUDENT AND CAMPUS SERVICES	58,301,940	58,095,316	0	206,624
d OTHER	95,837,412	86,253,671	9,583,741	0
e All other expenses.				
25 Total functional expenses. Add lines 1 through 24e.	4,358,249,565	3,785,770,820	508,288,328	64,190,417
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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



				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		81,556,414	1	81,843,418
	2	Savings and temporary cash investments		84,713,827	2	69,963,275
	3	Pledges and grants receivable, net		978,679,314	3	896,517,109
	4	Accounts receivable, net		409,184,175	4	393,414,369
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		0	6	0
	7	Notes and loans receivable, net		80,956,168	7	79,211,206
	8	Inventories for sale or use		9,283,923	8	15,038,738
	9	Prepaid expenses and deferred charges		83,315,829	9	68,322,776
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a 7,443,289,294			
	b	Less: accumulated depreciation	10b 3,326,551,050	3,927,263,821	10c	4,116,738,244
	11	Investments—publicly traded securities		1,351,910,352	11	1,468,118,614
	12	Investments—other securities. See Part IV, line 11		5,183,350,902	12	5,470,299,401
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		179,690,388	15	156,849,407
16	Total assets. Add lines 1 through 15 (must equal line 34)		12,369,905,113	16	12,816,316,557	
Liabilities	17	Accounts payable and accrued expenses		712,645,061	17	627,358,536
	18	Grants payable		50,730,163	18	50,678,651
	19	Deferred revenue		259,567,940	19	182,869,347
	20	Tax-exempt bond liabilities		1,144,900,000	20	1,116,225,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		337,689,981	23	87,473,400
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		945,283,121	25	992,222,548
	26	Total liabilities. Add lines 17 through 25		3,450,816,266	26	3,056,827,482
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		2,745,219,057	27	3,149,478,732
	28	Temporarily restricted net assets		3,036,969,344	28	3,145,734,255
	29	Permanently restricted net assets		3,136,900,446	29	3,464,276,088
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		8,919,088,847	33	9,759,489,075
	34	Total liabilities and net assets/fund balances		12,369,905,113	34	12,816,316,557

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,700,356,619
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,358,249,565
3	Revenue less expenses Subtract line 2 from line 1	3	342,107,054
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,919,088,847
5	Net unrealized gains (losses) on investments	5	361,048,424
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	137,244,750
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,759,489,075

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

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

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

Form 990 (2016)

Form 990, Part III, Line 4a:

CORNELL UNIVERSITY IS RENOWNED FOR ITS ACADEMIC RIGOR, INTELLECTUAL VIBRANCY, ENTREPRENEURIAL CHARACTER, AND THE DIVERSITY AND QUALITY OF ITS CURRICULA AND AREAS OF MULTIDISCIPLINARY RESEARCH AND STUDY THE UNIVERSITYS UNDERGRADUATE, GRADUATE, PROFESSIONAL, POST-DOCTORAL, AND CONTINUING EDUCATION PROGRAMS HAVE A GLOBAL REPUTATION FOR EXCELLENCE AND INNOVATION CORNELLS MAIN CAMPUS IS IN ITHACA, NEW YORK, WITH THE CAMPUSES OF WEILL CORNELL MEDICAL COLLEGE SEE SCHEDULE O

Form 990, Part III, Line 4b:

MEDICAL SERVICES, INCLUDING THE TRAINING AND EDUCATION OF PHYSICIANS, IS A PRIMARY COMPONENT OF THE UNIVERSITY'S MISSION. CORNELL IS COMMITTED TO EXCELLENCE IN PATIENT CARE, SCIENTIFIC DISCOVERY, AND THE EDUCATION OF FUTURE PHYSICIANS IN NEW YORK CITY AND AROUND THE WORLD. THE DOCTORS AND SCIENTISTS OF WEILL CORNELL MEDICINE FACULTY FROM WEILL CORNELL MEDICAL COLLEGE, WEILL CORNELL GRADUATE SCHOOL OF MEDICAL SCIENCES, AND THE WEILL CORNELL PHYSICIAN ORGANIZATION PROVIDE CLINICAL CARE AND RESEARCH THAT CONNECT PATIENTS TO THE LATEST TREATMENT INNOVATIONS AND PREVENTION STRATEGIES.

Form 990, Part III, Line 4c:

CORNELL HAS A LONG TRADITION OF COMBINING SCHOLARLY WORK AND LEADERSHIP IN RESEARCH BOTH BASIC AND APPLIED WITH PUBLIC SERVICE AND ENGAGEMENT IN NEW YORK STATE AND AROUND THE WORLD REVENUES FROM SPONSORED AWARDS INCLUDE \$450,539,691 MILLION IN DIRECT SUPPORT AND \$145,774,928 MILLION IN INDIRECT COST RECOVERY REVENUES ALSO INCLUDE GRANT AND CONTRACT REVENUE TO SUPPORT PUBLIC OUTREACH AND INSTRUCTION, THE SINGLE LARGEST PORTION IS RELATED TO RESEARCH

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Richard A Baker Trustee	2 0 0 0	X						0	0	0
Yamini Bhandari Trustee	2 0 0 0	X						0	0	0
Matthew L Biben Trustee	2 0 0 0	X						0	0	0
Jessica M Bibliowicz Trustee	2 0 0 0	X						0	0	0
Douglas L Braunstein Trustee	2 0 0 0	X						0	0	0
David J Breazzano Trustee	2 0 0 0	X						0	0	0
Dara P Brown Trustee/Student Employee	2 0 0 0	X						585	0	0
Mario Cilento Trustee	2 0 0 0	X						0	0	0
Chad Coates Trustee/Assistant Dean	2 0 0 0	X						85,998	0	15,310
Ezra Cornell Trustee	2 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former					
David D Croll Vice Chairman	2 0 0 0	X						0	0	0		
Andrew Cuomo Trustee	2 0 0 0	X						0	0	0		
Gary S Davis Trustee	2 0 0 0	X						0	0	0		
Nicole B DelToro Trustee	2 0 0 0	X						0	0	0		
David M Einhorn Trustee	2 0 0 0	X						0	0	0		
Elizabeth C Everett Krisberg Trustee	2 0 0 0	X						0	0	0		
John J Flanagan Trustee	2 0 0 0	X						0	0	0		
Stephanie K Fox Trustee	2 0 0 0	X						0	0	0		
Thomas T Groos Trustee	2 0 0 0	X						0	0	0		
Alexander D Hanson Trustee	2 0 0 0	X						0	0	0		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Patricia E Harris Trustee	2 0 0 0	X						0	0	0
Robert S Harrison Chairman	2 0 0 0	X						0	0	0
Carl E Heastie Trustee	2 0 0 0	X						0	0	0
Katrina E James Trustee	2 0 0 0	X						0	0	0
Kraig H Kayser Trustee	2 0 0 0	X						0	0	0
Ruben J King-Shaw JR Trustee	2 0 0 0	X						0	0	0
Peggy Koenig Trustee	2 0 0 0	X						0	0	0
Robert S Langer JR Trustee	2 0 0 0	X						0	0	0
Bruce Lewenstein Trustee/Professor	2 0 0 0	X						136,405	0	41,968
Linda R MaCaulay Trustee	2 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)										
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former					
Pamela G Marrone Trustee	2 0 0 0	X							0	0	0	
Lowell C McAdam Trustee	2 0 0 0	X							0	0	0	
Ronald D McCray Trustee	2 0 0 0	X							0	0	0	
M Eileen McManus Walker Trustee	2 0 0 0	X							0	0	0	
John F McGrue Trustee	2 0 0 0	X							0	0	0	
Mary J Miller Trustee	2 0 0 0	X							0	0	0	
Howard P Milstein Trustee	2 0 0 0	X							0	0	0	
John A Noble Trustee	2 0 0 0	X							0	0	0	
Armando J Olivera Trustee	2 0 0 0	X							0	0	0	
Donald C Opatrny Trustee	2 0 0 0	X							0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
William D Perez Trustee	2 0 0 0	X						0	0	0
Leland C Pillsbury Trustee	2 0 0 0	X						0	0	0
Jonathan K Poe Trustee	2 0 0 0	X						0	0	0
Bruce S Raynor Trustee	2 0 0 0	X						0	0	0
Girish V Reddy Trustee	2 0 0 0	X						0	0	0
Gene D Resnick Trustee	2 0 0 0	X						0	0	0
Susan T Rodriguez Trustee/Critic Visiting	2 0 0 0	X						20,000	0	0
Paul A Salvatore Trustee	2 0 0 0	X						0	0	0
Martin F Scheinman Trustee	2 0 0 0	X						7,000	0	0
Dalia P Stiller Trustee	2 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Chiaki Tanuma Trustee	2 0 0 0	X						0	0	0
Ratan N Tata Trustee	2 0 0 0	X						0	0	0
Michael A Troy Trustee	2 0 0 0	X						0	0	0
Sheryl Hilliard Tucker Trustee	2 0 0 0	X						0	0	0
Padmasree Y Warrior Trustee	2 0 0 0	X						0	0	0
Laura A Wilkinson Trustee	2 0 0 0	X						0	0	0
Barton J Winokur Trustee	2 0 0 0	X						0	0	0
Mariana F Wolfner Trustee/Prof Molecular Bio	2 0 0 0	X						173,156	0	35,080
Craig Yunker Trustee	2 0 0 0	X						0	0	0
Jia Zhu Trustee	2 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Karen P Zimmer Trustee	2 0 0 0	X						0	0	0
Jan Rock Zubrow Chairman of the Exec Comm	2 0 0 0	X						0	0	0
Barbara G Novick TRUSTEE	2 0 0 0	X						0	0	0
Augustine MK Choi Provost Medl Affrs & Dean	55 0 0 0			X				1,659,124	0	7,230
Joanne M Destefano Executive Vice President & CFO	55 0 0 0			X				668,815	0	68,830
Michael I Kotlikoff PROVOST	55 0 0 0			X				763,680	0	116,396
James J Mingle Univ Counsel & Secretary	55 0 0 0			X				555,151	0	57,318
Martha E Pollack PRESIDENT (BEGAN 4/17)	2 0 0 0			X				0	0	0
Hunter R Rawlings III INTERIM PRESIDENT (THRU 3/17)	55 0 0 0			X				1,108,607	0	49,439
Madelyn F Wessel UNIV COUNSEL (BEGAN 5/2017)	55 0 0 0			X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Robert A Buhrman Prof of Engineering	55 0 0 0				X			405,932	0	63,458
Stephen Cohen Exec Vice Prov for Adm & Fin	55 0 0 0				X			1,136,621	0	41,486
Daniel M Knowles MD Chief Medical Officer	55 0 0 0				X			1,882,028	0	25,956
Kenneth M Miranda Chief Investment Officer	55 0 0 0				X			500,097	0	45,150
Pak Chung Assoc Prof-Clinical Obs & Gyn	55 0 0 0					X		3,738,905	0	10,506
Hey-Joo Kang MD Assoc Prof-Clinical Obs & Gyn	55 0 0 0					X		4,398,127	0	10,267
Zev Rosenwaks MD Executive Director	55 0 0 0					X		7,188,028	0	5,512
Theodore Schwartz MD Prof of Neurological Surgery	55 0 0 0					X		3,774,822	0	25,722
Steven Spandorfer MD Assoc Prof of Obs & Gyn	55 0 0 0					X		3,802,843	0	25,722
Laurie H Glimcher FORMER DEAN OF MED SCHOOL	2 0 0 0						X	1,046,562	0	3,702

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Elizabeth Garrett FORMER PRESIDENT	55 0 0 0						X	306,240	0	24,874
Antonio Gotto MD Former Provost & Dean of Weill	55 0 0 0						X	3,076,207	0	0
Harry Katz Former officer/Current Prof	55 0 0 0						X	403,785	0	60,758
David J Skorton Former officer/Professor	55 0 0 0						X	444,284	0	0
Albert J Edwards Former Chief Investment Off	55 0 0 0						X	448,201	0	33,234

SCHEDULE A (Form 990 or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2016 Open to Public Inspection
Department of the Treasury Internal Revenue Service Name of the organization Cornell University		Employer identification number 15-0532082

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☒ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university _____
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	478,613,388	842,647,482	584,510,026	510,356,488	605,956,875	3,022,084,259
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	41,188,766	40,454,003	40,937,796	43,677,665	62,628,802	228,887,032
4	Total. Add lines 1 through 3	519,802,154	883,101,485	625,447,822	554,034,153	668,585,677	3,250,971,291
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						270,277,789
6	Public support. Subtract line 5 from line 4						2,980,693,502

Section 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	519,802,154	883,101,485	625,447,822	554,034,153	668,585,677	3,250,971,291
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	77,167,185	127,377,264	122,546,988	102,047,770	98,801,455	527,940,662
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					253,953,192	253,953,192
11	Total support. Add lines 7 through 10						4,032,865,145

12 Gross receipts from related activities, etc. (see instructions) **12** 16,393,218,203**13** **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐**Section C. Computation of Public Support Percentage**

14	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	73 910 %
15	Public support percentage for 2015 Schedule A, Part II, line 14	15	82 410 %

16a **33 1/3% support test—2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒**b** **33 1/3% support test—2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐**17a** **10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐**b** **10%-facts-and-circumstances test—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 supported organization ► ☐**18** **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 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 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? <i>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.</i>	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	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)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 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 substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test Answer (a) and (b) below.		
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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
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? <i>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.</i>		
2b		
3 Parent of Supported Organizations Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013.			
d From 2014.			
e From 2015.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013.			
c Excess from 2014.			
d Excess from 2015.			
e Excess from 2016.			

Part VI **Supplemental Information.**

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

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2016

Open to Public Inspection

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 Cornell University	Employer identification number 15-0532082
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	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 file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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 filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		545,031
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		
j	Total. Add lines 1c through 1i			545,031
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a	Current year	2b	
b	Carryover from last year	2c	
c	Total	3	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5	Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
SCHEDULE C, PART I-A, LINE 1	THE UNIVERSITY DOES NOT PARTICIPATE DIRECTLY OR INDIRECTLY IN ANY POLITICAL CAMPAIGN AND REMINDS THE UNIVERSITY COMMUNITY, AT THE TIME OF ANY IMPORTANT LOCAL, STATE OR NATIONAL ELECTION, ABOUT THE PROHIBITION AGAINST UNIVERSITY PARTICIPATION. THE MESSAGE MAKES CLEAR THAT THIS PROHIBITION DOES NOT IN ANY WAY AFFECT AN INDIVIDUAL'S PERSONAL ACTIVITIES. THE UNIVERSITY DOES NOT DEEM IT NECESSARY TO ISSUE A FORMAL POLICY ON POLITICAL CAMPAIGN PROHIBITIONS THROUGH ITS POLICY OFFICE.
SCHEDULE C, PART II-B, LINE 1B	CORNELL'S LOBBYING EFFORTS WERE HANDLED THROUGH THE UNIVERSITY RELATIONS OFFICES LOCATED IN ALBANY AND WASHINGTON DC PRIMARILY BY FIVE REGISTERED LOBBYISTS. IN ADDITION, THROUGHOUT THE FISCAL YEAR ENDING JUNE 30, 2017, CORNELL EMPLOYEES AND STUDENTS LOBBIED IN ALBANY AND/OR WASHINGTON D C. LOBBYING EFFORTS CENTERED ON HIGHER EDUCATION MATTERS, STATE AND FEDERAL BUDGETS, UNIVERSITY-BASED RESEARCH PROPOSALS, AND LEGISLATIVE BILLS AFFECTING CORNELL STUDENTS AND STAFF. CORNELL IS A PAYING MEMBER OF SEVERAL STATE AND FEDERAL ASSOCIATIONS THAT DO DIRECT LOBBYING AND PUBLIC ADVOCACY ON BEHALF OF PUBLIC AND PRIVATE NOT-FOR-PROFIT HIGHER EDUCATION, RESEARCH, COLLEGE ATHLETICS, AND UNIVERSITY OPERATIONS INCLUDING STUDENT HEALTH INSURANCE, ENERGY, AND FINANCIAL PLANNING. THE UNIVERSITY CONTRACTED WITH A LOBBYING FIRM IN NEW YORK CITY TO REPRESENT OUR INTERESTS RELATING TO THE CORNELL TECH CAMPUS BEFORE THE NEW YORK CITY GOVERNMENT.
SCHEDULE C, PART II-B, LINE 1G	CORNELL UNIVERSITY STAFF LOBBIED LEGISLATORS, STAFF AND GOVERNMENT OFFICIALS IN WASHINGTON, ALBANY, NEW YORK CITY, AND ITHACA DURING THE FISCAL YEAR ENDING JUNE 30, 2017. TOPICS INCLUDED STUDENT HEALTH INSURANCE, CONTRACTING PROCESSES, AGRICULTURE TESTING AND RESEARCH PROGRAMS, LABOR LAW TRAINING, ENVIRONMENTAL PROTECTION PROGRAMS, FUNDING FOR OPERATIONS AND FACILITIES, INCLUDING AN AGRICULTURAL SCIENCE RESEARCH LAB, STUDENT FINANCIAL AID PROGRAMS, CORNELL TECH CAMPUS LAND USE, U S D A FARM BILL, STUDENT LOAN INTEREST RATES, ECONOMIC DEVELOPMENT PROGRAMS, IMMIGRATION, GRADUATE MEDICAL EDUCATION, PATENT REFORM, SCIENCE AND TECHNOLOGY INITIATIVES, AND AGENCY RE-AUTHORIZATIONS.
SCHEDULE C, PART II-B, LINE 1I	IN ADDITION TO MEETING WITH GOVERNMENT OFFICIALS TO ADVANCE THE INTERESTS OF HIGHER EDUCATION IN GENERAL AND UNIVERSITY-BASED RESEARCH ACTIVITIES IN PARTICULAR, THE UNIVERSITY IS A MEMBER OF KEY ORGANIZATIONS THAT ALSO LOBBY ON BEHALF OF ISSUES AFFECTING HIGHER EDUCATION.

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493129006458											
SCHEDULE D (Form 990)		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. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990 .			OMB No 1545-0047 2016 Open to Public Inspection										
Department of the Treasury Internal Revenue Service		Name of the organization Cornell University			Employer identification number 15-0532082										
Part I 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 year)														
3	Aggregate value of grants from (during year)														
4	Aggregate value at end of year														
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?				<input type="checkbox"/> Yes <input type="checkbox"/> No										
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?				<input type="checkbox"/> Yes <input type="checkbox"/> No										
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.															
1	Purpose(s) of conservation easements held by the organization (check all that apply) <input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> 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														
a	Total number of conservation easements	<table><tr><td colspan="2">Held at the End of the Year</td></tr><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></table>				Held at the End of the Year		2a		2b		2c		2d	
Held at the End of the Year															
2a															
2b															
2c															
2d															
b	Total acreage restricted by conservation easements														
c	Number of conservation easements on a certified historic structure included in (a)														
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register														
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____														
4	Number of states where property subject to conservation easement is located ▶ _____														
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?				<input type="checkbox"/> Yes <input type="checkbox"/> No										
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____														
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____														
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				<input type="checkbox"/> Yes <input type="checkbox"/> No										
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements														
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.															
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items														
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items														
(i) Revenue included on Form 990, Part VIII, line 1		▶ \$ 100,538													
(ii) Assets included in Form 990, Part X		▶ \$ 94,381,728													
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items														
a	Revenue included on Form 990, Part VIII, line 1	▶ \$ _____													
b	Assets included in Form 990, Part X	▶ \$ _____													
For Paperwork Reduction Act Notice, see the Instructions for Form 990.															
		Cat No 52283D		Schedule D (Form 990) 2016											

Part III

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

3

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

a

☒ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☒ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☒ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	5,584,197,786	5,883,517,457	5,744,869,444	5,140,214,516	4,799,313,766
b Contributions	387,247,101	184,454,650	241,117,041	162,578,975	142,698,495
c Net investment earnings, gains, and losses	683,220,281	-181,287,034	193,711,812	791,728,922	517,725,141
d Grants or scholarships	58,471,312	55,359,166	51,080,905	81,084,751	77,885,532
e Other expenditures for facilities and programs	216,531,449	204,449,446	203,466,849	230,432,044	201,765,031
f Administrative expenses	44,142,078	42,678,675	41,633,086	38,136,174	39,872,323
g End of year balance	6,335,520,329	5,584,197,786	5,883,517,457	5,744,869,444	5,140,214,516

2

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

a

Board designated or quasi-endowment

22 000 %

b

Permanent endowment

72 000 %

c

Temporarily restricted endowment

6 000 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		23,639,500		23,639,500
b Buildings		4,934,317,945	1,976,828,014	2,957,489,931
c Leasehold improvements		551,168,427	360,462,393	190,706,034
d Equipment		884,300,559	598,790,584	285,509,975
e Other		1,049,862,863	390,470,058	659,392,804
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				4,116,738,244

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests	24,076,332	F
(3)Other _____ (A) DOMESTIC EQUITIES	270,479,803	F
(B) FOREIGN EQUITIES	547,062,790	F
(C) HEDGED EQUITIES	435,754,360	F
(D) PRIVATE EQUITIES	1,194,398,716	F
(E) FIXED INCOME ASSET BACKED SEC	27,574,858	F
(F) FIXED INCOME CORPORATE BONDS	216,692,636	F
(G) FIXED INCOME EQUITY PSHIPS	459,181,008	F
(H) FIXED INCOME & MARKETABLE SEC	2,295,078,898	F
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	5,470,299,401	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book 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 answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
DUE TO CONSOLIDATED SUBS	155,915
OBLIGATIONS UNDER SPLIT INT AGRMNT	133,459,456
DEFERRED BENEFITS	610,276,693
FUNDS HELD IN TRUST FOR OTHERS	137,092,801
BOND PREMIUMS	43,395,761
OBLIGATIONS UNDER CAPITAL LEASES	67,841,922
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	992,222,548

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

☒

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

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

1	Total revenue, gains, and other support per audited financial statements	1	4,013,856,455
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	327,563,475
e	Add lines 2a through 2d	2e	327,563,475
3	Subtract line 2e from line 1	3	3,686,292,980
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	1,014,063,639
c	Add lines 4a and 4b	4c	1,014,063,639
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	4,700,356,619

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

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

1	Total expenses and losses per audited financial statements	1	4,021,332,495
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	55,505,020
e	Add lines 2a through 2d	2e	55,505,020
3	Subtract line 2e from line 1	3	3,965,827,475
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	392,422,090
c	Add lines 4a and 4b	4c	392,422,090
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	4,358,249,565

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

Form 990, Schedule D, Part VII - Investments Other Securities

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(3) Other (A) DOMESTIC EQUITIES	270,479,803	F
(3) Other (A) FOREIGN EQUITIES	547,062,790	F
(B) HEDGED EQUITIES	435,754,360	F
(C) PRIVATE EQUITIES	1,194,398,716	F
(D) FIXED INCOME ASSET BACKED SEC	27,574,858	F
(E) FIXED INCOME CORPORATE BONDS	216,692,636	F
(F) FIXED INCOME EQUITY PSHIPS	459,181,008	F
(G) FIXED INCOME & MARKETABLE SEC	2,295,078,898	F

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART III, LINE 4	ART COLLECTION THE HERBERT F JOHNSON MUSEUM OF ART IS PARTICULARLY NOTED FOR ITS COLLECTION IN THE AREA OF ASIAN ART, 19TH AND 20TH CENTURY AMERICAN ART AND THE GRAPHIC ARTS THE COLLECTION IS USED FOR TEACHING, RESEARCH, AND PUBLIC OUTREACH THE MUSEUM'S CALENDAR OF EVENTS IS AVAILABLE ON ITS WEB SITE AND PROVIDES INFORMATION TO ENCOURAGE USE OF THE COLLECTION BY THE PUBLIC

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	ENDOWMENT FUNDS THE UNIVERSITY'S ENDOWMENT CONSISTS PRIMARILY OF PERMANENT ENDOWMENT AND BOARD DESIGNATED ENDOWMENT (I E , FUNDS FUNCTIONING AS ENDOWMENT) THE INCOME FROM THE ENDOWMENT PROVIDES CRITICAL SUPPORT FOR ENDOWED FACULTY CHAIRS, STUDENT FINANCIAL AID, AND SUPPORT FOR VARIOUS INSTITUTIONAL PROGRAMS FOR TEACHING, RESEARCH, AND PUBLIC OUTREACH

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	FIN 48(ASC 740) FOOTNOTE THE UNIVERSITY IS A NOT-FOR-PROFIT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS GENERALLY EXEMPT FROM INCOME TAXES ON RELATED INCOME PURSUANT TO THE APPROPRIATE SECTIONS OF THE INTERNAL REVENUE CODE IN ACCORDANCE WITH THE ACCOUNTING STANDARDS, THE UNIVERSITY EVALUATES ITS INCOME TAX POSITION EACH FISCAL YEAR TO DETERMINE WHETHER IT IS MORE LIKELY THAN NOT TO BE SUSTAINED IF EXAMINED BY THE APPLICABLE TAXING AUTHORITY THIS REVIEW HAD NO MATERIAL IMPACT ON THE UNIVERSITY'S CONSOLIDATED FINANCIAL STATEMENTS

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART XI, LINE 2D	DECONSOLIDATION OF SUBSIDIARIES \$ 52,926,203 INVESTMENT RETURN, DISTRIBUTED \$ 274,637,271 ROUNDING \$ 1 ----- TOTAL \$ 327,563,475 SCHEDULE D, PART XI, LINE 4B RECLASS OF FIN ANCIAL AID \$ 366,531,054 NONOPERATING REVENUE \$ 31,167,974 STATE APPROPRIATIONS \$ 45,096,3 66 RESTRICTED GIFTS \$ 263,499,581 PROGRAM SERVICES \$ 307,768,665 ----- TOTAL \$ 1 ,014,063,639

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART XII, LINE 2D	DECONSOLIDATION OF SUBSIDIARIES \$ 55,505,020 ----- TOTAL \$ 55,505,020

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART XII, LINE 4B	RECLASS OF FINANCIAL AID \$ 366,531,054 INTEREST EXPENSE \$ 25,891,036 ----- TOTAL \$ 392,422,090

SCHEDULE E (Form 990 or 990-EZ)	<h1>Schools</h1> <p>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.</p> <p>▶ Attach to Form 990 or Form 990-EZ.</p> <p>▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.</p>	OMB No 1545-0047
		<h1>2016</h1>
	Department of the Treasury Name of the organization Cornell University	Employer identification number 15-0532082

Part I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	Yes	
4	Does the organization maintain the following?		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	Yes	
5	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		No
b	Admissions policies?		No
c	Employment of faculty or administrative staff?		No
d	Scholarships or other financial assistance?		No
e	Educational policies?		No
f	Use of facilities?		No
g	Athletic programs?		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		No
6a	Does the organization receive any financial aid or assistance from a governmental agency?	Yes	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II		No
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	Yes	

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

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

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2016

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

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

Name of the organization
Cornell University

Employer identification number

15-0532082

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	14	56			22,670,619
b Total from continuation sheets to Part I	2	450			1,146,727,683
c Totals (add lines 3a and 3b)	16	506			1,169,398,302

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								65
(6)	Enter total number of other organizations or entities								17
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

Schedule F (Form 990) 2016

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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)* ☒ 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

Part V **Supplemental Information**

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

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

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

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Grantmaking		125,220
Sub-Saharan Africa			Grantmaking		15,553
Central America and the Caribbean			Grantmaking		607,103

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmaking		2,191,703
East Asia and the Pacific			Grantmaking		606,072
Middle East and North Africa			Grantmaking		8,177

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Grantmaking		43,524
Russia and the Newly Independent States			Grantmaking		6,150
South America			Grantmaking		46,581

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean		3	Program Services	Education & Research	544,071
North America		7	Program Services	Education & Research	1,694,451
East Asia and the Pacific	1	4	Program Services	Education & Research	4,256,239

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	12	30	Program Services	Education & Research	8,509,899
Middle East and North Africa		4	Program Services	Education & Research	750,474
Russia and the Newly Independent States		1	Program Services	Education & Research	141,941

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America		6	Program Services	Education & Research	1,119,724
South Asia	1	1	Program Services	Education & Research	2,003,737
Sub-Saharan Africa	1	10	Program Services	Education & Research	1,417,006

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Program Services	Research sub-contracts	1,846,988
East Asia and the Pacific			Program Services	Research sub-contracts	695,668
Europe (Including Iceland and Greenland)			Program Services	Research sub-contracts	4,074,482

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	Research sub-contracts	527,556
North America			Program Services	Research sub-contracts	174,443
Russia and the Newly Independent States			Program Services	Research sub-contracts	58,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America			Program Services	Research sub-contracts	1,281,146
Sub-Saharan Africa			Program Services	Research sub-contracts	3,525,266
Central America and the Caribbean			Program Services	Medical Research & svc	879,145

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Medical Research & svc	90,770
Europe (Including Iceland and Greenland)			Program Services	Medical Research & svc	1,896,436
Middle East and North Africa	1	440	Program Services	Medical Research & svc	138,183,297

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Program Services	Medical Research & svc	301,895
South Asia			Program Services	Medical Research & svc	86,575
Europe (Including Iceland and Greenland)			Program Services	Fundraising	232,512

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		845,967,973
Europe (Including Iceland and Greenland)			Investments		128,241,232
North America			Investments		17,247,293

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Research Sub-contract	987,326	EFT			FMV
		Russia and the Newly Independent States	Research Sub-contract	58,000	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research Sub-contract	380,019	EFT			FMV
		East Asia and the Pacific	Research Sub-contract	161,581	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	Research Sub-contract	371,380	EFT			FMV
		South America	Research Sub-contract	902,839	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	244,841	EFT			FMV
		Sub-Saharan Africa	Research Sub-contract	358,184	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research Sub-contract	34,171	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	171,414	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Research Sub-contract	213,417	EFT			FMV
		Middle East and North Africa	Research Sub-contract	21,306	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Research Sub-contract	141,274	EFT			FMV
		Middle East and North Africa	Research Sub-contract	77,723	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research Sub-contract	2,298,589	EFT			FMV
		East Asia and the Pacific	Research Sub-contract	78,934	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research Sub-contract	50,384	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	88,707	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	72,161	EFT			FMV
		Sub-Saharan Africa	Research Sub-contract	49,267	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Research Sub-contract	99,751	EFT			FMV
		Sub-Saharan Africa	Research Sub-contract	74,692	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	Research Sub-contract	174,443	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	249,135	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Research Sub-contract	223,945	EFT			FMV
		Sub-Saharan Africa	Research Sub-contract	20,944	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	244,889	EFT			FMV
		South Asia	Research Sub-contract	52,770	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	67,387	EFT			FMV
		Sub-Saharan Africa	Research Sub-contract	374,028	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research Sub-contract	79,920	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	165,663	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	459,670	EFT			FMV
		Sub-Saharan Africa	Research Sub-contract	1,139,933	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	37,414	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	74,790	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	81,645	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	764,823	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research Sub-contract	39,557	EFT			FMV
		South Asia	Research Sub-contract	341,922	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	219,020	EFT			FMV
		South America	Research Sub-contract	6,927	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research Sub-contract	24,750	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	25,000	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Research Sub-contract	25,000	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	36,339	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research Sub-contract	81,191	EFT			FMV
		Europe (Including Iceland and Greenland)	Research Sub-contract	21,375	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Research Sub-contract	215,110	EFT			FMV
		Middle East and North Africa	Med Research and services	14,042	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Med Research and services	44,870	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	39,776	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Med Research and services	90,770	EFT			FMV
		Middle East and North Africa	Med Research and services	235,005	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	89,058	EFT			FMV
		Middle East and North Africa	Med Research and services	7,405	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	27,066	EFT			FMV
		Middle East and North Africa	Med Research and services	33,903	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Med Research and services	139,272	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	127,607	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Med Research and services	23,109	EFT			FMV
		South Asia	Med Research and services	8,888	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	49,771	EFT			FMV
		South Asia	Med Research and services	32,817	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	51,095	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	78,759	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	44,955	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	18,544	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	Med Research and services	187,458	EFT			FMV
		Central America and the Caribbean	Med Research and services	879,145	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	91,399	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	137,917	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Middle East and North Africa	Med Research and services	74,263	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	37,221	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	20,872	EFT			FMV
		North America	Med Research and services	109,437	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	137,917	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	787,246	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	70,018	EFT			FMV
		Europe (Including Iceland and Greenland)	Med Research and services	27,615	EFT			FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	Med Research and services	59,600	EFT			FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Travel Grant/Fellowshp	Central America and the Caribbean	1	700	CHECK/ACH		NONE	FMV
Student Travel Grant/Fellowshp	East Asia and the Pacific	37	96,953	CHECK/ACH		NONE	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Travel Grant/Fellowshp	Europe (Including Iceland and Greenland)	47	46,144	CHECK/ACH		NONE	FMV
Student Travel Grant/Fellowshp	Middle East and North Africa	26	8,177	CHECK/ACH		NONE	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Travel Grant/Fellowshp	North America	5	5,884	CHECK/ACH		NONE	FMV
Student Travel Grant/Fellowshp	Russia and the Newly Independent States	5	6,150	CHECK/ACH		NONE	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Travel Grant/Fellowshp	South America	16	46,581	CHECK/ACH		NONE	FMV
Student Travel Grant/Fellowshp	South Asia	18	17,077	CHECK/ACH		NONE	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Travel Grant/Fellowshp	Sub-Saharan Africa	13	15,553	CHECK/ACH		NONE	FMV
Student Financial Aid	Central America and the Caribbean	26	606,403	CHECK/ACH		NONE	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Financial Aid	East Asia and the Pacific	30	509,119	CHECK/ACH		NONE	FMV
Student Financial Aid	Europe (Including Iceland and Greenland)	111	2,145,560	CHECK/ACH		NONE	FMV

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Student Financial Aid	North America	1	37,641	CHECK/ACH		NONE	FMV
Student Financial Aid	South Asia	6	108,143	CHECK/ACH		NONE	FMV

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As Filed Data -

DLN: 93493129006458

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" 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
▶ 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.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
Cornell University

Employer identification number
15-0532082

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.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒ Mail solicitations

☒ Internet and email solicitations

☒ Phone solicitations

☒ In-person solicitations

e

☒ Solicitation of non-government grants

f

☒ Solicitation of government grants

g

☒ Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 GRENZENBACH GLIER AND ASSOCIATES 401 N MICHIGAN AVE CHICAGO, IL 60611	Consulting		No		50,482	-50,482
2 JFM Group LLC 629 FIFTH AVENUE SUITE 106 PELHAM, NY 10803	EVENT MGMT SERVICES		No	3,097,800	147,500	2,950,300
3 Community Counseling Service co LLC 461 FIFTH AVENUE NEW YORK, NY 10017	Consulting		No		100,000	-100,000
4 Prased Communications and Research 20 Sutton Place South New York, NY 10022	Consulting		No		6,000	-6,000
5 Brian Chapman 211 W 79TH ST4 NEW YORK, NY 10024	Consulting		No		59,082	-59,082
6 JOHN BROWN LIMITED INC 4916 CRESTWOOD DRIVE WACO, TX 76710	CONSULTING		No		51,435	-51,435
7 CAREER DIRECTIONS 117 NORTH FIRST STREET SUITE 106 ANN ARBOR, MI 48104	CONSULTING		No		18,638	-18,638
8 JAMIE RENWICK ADVISORS 30 Grace Court Brooklyn, NY 11201	CONSULTING		No		36,000	-36,000
9 CAROLYN SANZONE INC 60 HURLBURT ROAD GREAT BARRINGTON, MA 01230	CONSULTING		No		3,350	-3,350
10						
Total				3,097,800	472,487	2,625,313

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, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

Cat No 50083H

Schedule G (Form 990 or 990-EZ) 2016

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1 CABARET NIGHT (event type)	(b) Event #2 GREENBURG (event type)	(c) Other events 3 (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts	3,097,800	175,650	139,232	3,412,682
	2 Less Contributions	2,653,700	60,450	41,305	2,755,455
	3 Gross income (line 1 minus line 2)	444,100	115,200	97,927	657,227
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	348,108	162,048	69,624	579,780
	8 Entertainment	777,523		4,788	782,311
	9 Other direct expenses	508,070	67,085	209,190	784,345
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				2,146,436
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-1,489,209

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

b If "Yes," explain _____

11	Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13	Indicate the percentage of gaming activity conducted in	
a	The organization's facility	13a _____ %
b	An outside facility	13b _____ %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name ► _____	
	Address ► _____	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____	
c	If "Yes," enter name and address of the third party	
	Name ► _____	
	Address ► _____	
16	Gaming manager information	
	Name ► _____	
	Gaming manager compensation ► \$ _____	
	Description of services provided ► _____	
	<input type="checkbox"/> Director/officer	<input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor
17	Mandatory distributions	
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____	

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B	A WRITTEN CONTRACT WAS MADE WITH JFM GROUP LLC TO MANAGE THE CABARET, A SIGNATURE ANNUAL FUNDRAISING EVENT FOR WEILL CORNELL MEDICAL COLLEGE BENEFITS SUPPORT ONGOING COSTS, INPATIENT CARE, RESEARCH, AND EDUCATION

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As Filed Data -

DLN: 93493129006458

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Cornell University

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.
▶ Attach to Form 990.

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

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number
15-0532082

Part I

General Information on Grants and Assistance

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

☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 174

3 Enter total number of other organizations listed in the line 1 table 14

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) FINANCIAL AID - UNDERGRADUATE	7126	234,894,024		FMV	NONE
(2) FINANCIAL AID - GRADUATE	5120	121,824		FMV	NONE
(3) MEDICAL SCHOOL - UNDERGRADUATE	294	17,003,463		FMV	NONE
(4) MEDICAL SCHOOL - GRADUATE	486	34,520,580		FMV	NONE
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I, PART II	THE UNIVERSITY REPORTS ALL GRANT RECIPIENTS, INCLUDING SUB-GRANTEES, OF WHICH IT IS AWARE THIS INCLUDES SUB-RECIPIENT AWARDS, PRIMARILY FOR RESEARCH, TO GOVERNMENT AGENCIES, ORGANIZATIONS EXEMPT UNDER 501(C)(3) AND FOR-PROFIT ENTITIES FOR WHICH NO AUTHORITY FOR EXEMPTION IS PROVIDED

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

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

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Bowdoin College 85 Union St Brunswick, ME 04011	01-0215213	501(C)(3)	14,283		FMV		Research
State of Maine 290 State St - 91 State House Statu Augusta, ME 04333	01-6000001	ME	11,750		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Maine System 96 Falmouth St - PO Box 9300 Portland, ME 04104	01-6000769	501(C)(3)	170,740		FMV		Research
Trustees of Dartmouth College 11 Rope Ferry Rd 6210 Hanover, NH 037551404	02-0222111	501(C)(3)	200,540		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University System of New Hampshire Inc 11 Garrison Ave Rm 106 Durham, NH 03824	02-6000937	501(c)(3)	44,055		FMV		Research
University of Vermont 63 Carrigan Dr Burlington, VT 05405	03-0179440	501(c)(3)	159,348		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Northeast Organic Farming Assn of NY Inc 840 Upper Front St Binghamton, NY 13905	03-0259137	501(c)(3)	20,755		FMV		Research
Trustees of Boston College 140 Commonwealth AveConte Forum 310 Chestunt Hill, MA 02467	04-2103545	501(C)(3)	27,737		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
College of Holy Cross Office of BursarOne College Street Worcester, MA 01610	04-2103558	501(C)(3)	13,057		FMV		Research
President and Fellows of Harvard College 52 Oxford St NWL RM 24940 Cambridge, MA 02138	04-2103580	501(c)(3)	271,246		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Massachusetts Institute of Technology 32 Vassar St 76-181 Cambridge, MA 02139	04-2103594	501(c)(3)	156,103		FMV		Research
Trustees of Tufts College 136 Harrison Ave Boston, MA 02111	04-2103634	501(C)(3)	21,272		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Clark University 950 Main St Worcester, MA 01606	04-2111203	501(c)(3)	19,491		FMV		Research
Massachusetts General Hospital One Bowdoin Square 7th Fl Boston, MA 02115	04-2697983	501(C)(3)	473,471		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Massachusetts UMass Medical School55 Lake Ave N Worcester, MA 01655	04-3167352	MA	330,263		FMV		Research
State of Rhode Island 75 Lower College Rd Ste 110 Kingston, RI 02881	05-6000522	RI	21,626		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
United Technologies Corp PO Box 416678 Boston, MA 022416678	06-0570975	-	113,396		FMV		Research
Wesleyan University 237 High St Middletown, CT 06459	06-0646959	501(C)(3)	82,200		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Connecticut 348 Mansfield Rd Storrs, CT 062691058	06-0772160	501(C)(3)	20,055		FMV		Other
Hispanic Health Council Inc 175 Main St Hartford, CT 06106	06-1018979	501(c)(3)	21,599		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
PROTON ENERGY SYSTEMS 10 TECHNOLOGY DR WALLINGFORD, CT 06492	06-1461988	-	75,986		FMV		Research
Connecticut Agricultural Experiment Station Box 1106 New Haven, CT 06504	06-6032987	CT	74,825		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Cold Spring Harbor Laboratory 1 Bungtown RdPO Box 100 Cold Spring Harbor, NY 11724	11-2013303	501(c)(3)	1,037,785		FMV		Research
Resources for Children with Special Needs 116 E 16th St Fl 5 New York, NY 10003	11-2594790	501(C)(3)	392,902		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cornell Coop Ext Suffolk Cty 423 Griffing Ave Ste 100 Riverhead, NY 119013071	11-6081424	501(C)(3)	59,023		FMV		Other
New York Society Relief of the Ruptured 535 E 70th St New York, NY 10021	13-1624135	501(C)(3)	40,972		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Barnard College 3009 Broadway New York, NY 10027	13-1628149	501(C)(3)	9,214		FMV		Other
Boyce Thompson Inst for Plant Rsh Inc 533 Tower Rd Ithaca, NY 148531801	13-1739923	501(c)(3)	1,191,383		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Memorial Sloan-Kettering Cancer Ctr General Post OfficePO Box 5822 New York, NY 10017	13-1924236	501(c)(3)	26,906		FMV		Research
Research Foundation of City Univ of NY 230 W 41st St 7th Fl New York, NY 10036	13-1988190	501(C)(3)	521,429		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
GrowNYC 100 Gold St Ste 3300 New York, NY 10038	13-2765465	501(c)(3)	31,961		FMV		Research
New York University 60 Washington Sq S Ste 505 New York, NY 10012	13-5562308	501(C)(3)	37,774		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
The Mary Imogene Bassett Hospital 1 Atwell Rd Cooperstown, NY 133261301	13-5596796	501(c)(3)	127,451		FMV		Other
Trustees of Columbia Univ City of New York 2910 Broadway New York, NY 10025	13-5598093	501(C)(3)	388,638		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Icahn School of Medicine at Mount Sinai 1 Gustave L Levy Pl New York, NY 10029	13-6171197	501(c)(3)	40,557		FMV		Research
City of New York 111 Columbia St New York, NY 10002	13-6400434	NY	615,734		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Trustees of Union College McKean House807 Union St Schenectady, NY 12308	14-1338580	501(c)(3)	15,400		FMV		Research
Rensselaer Polytechnic Institute 110 8th St Troy, NY 121803590	14-1340095	501(c)(3)	290,354		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
The Research Foundation of SUNY 505 Irving Ave Syracuse, NY 13210	14-1368361	501(c)(3)	660,601		FMV		Research
Rensselaer County Chapter NYSARC Inc 79 102nd St Troy, NY 12180	14-1485873	501(C)(3)	181,219		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
City School District of Albany 1 Academy Park Albany, NY 12207	14-1537912	501(C)(3)	97,390		FMV		Other
BAAR Scientific LLC 6374 State Route 89 Romulus, NY 145419547	14-1878299	-	8,250		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Ulster County BOCES 175 Rte 32 N New Paltz, NY 125611029	14-6003939	501(C)(3)	39,000		FMV		Research
Schenectady City School District 108 Education Dr Schenectady, NY 12303	14-6004188	NY	28,695		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Cornell Coop Ext Assoc Albany County PO Box 497 24 Martin Rd Voorheesville, NY 12186	14-6036881	501(C)(3)	54,500		FMV		Research
Cornell Coop Ext Dutchess Cty 2715 Rt 44 Ste 1 FarmHome Ctr Millbrook, NY 125455510	14-6036882	501(C)(3)	11,000		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cornell Cooperative Ext Clinton Cty 6064 Route 22 N Ste 5 Plattsburgh, NY 12901	14-6036885	501(C)(3)	21,933		FMV		Other
Cornell Coop Ext of Orange Cty 18 Seward Ave Ste 300 Middletown, NY 10940	14-6036889	501(C)(3)	38,360		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Cty Ext Service Assoc in State NY Ulster Co 232 Plaza Rd Kingston, NY 12401	14-6036893	501(C)(3)	38,759		FMV		Research
Cornell Coop Extension Franklin Cty 355 West Main StSuite 150 Malone, NY 129531870	14-6037203	501(C)(3)	48,297		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Colgate University Colgate University Library13 Oak Dr Hamilton, NY 13346	15-0532078	501(c)(3)	8,047		FMV		Research
Syracuse University 9721 University Ave Ste 116 Syracuse, NY 13244	15-0532081	501(C)(3)	334,940		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Clarkson University 8 Clarkson Ave PO Box 5546 Potsdam, NY 136995546	15-0543659	501(C)(3)	41,443		FMV		Research
Paleontological Research Institution 1259 Trumansburg Rd Ithaca, NY 14850	15-0554849	501(c)(3)	79,607		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Hobart and William Smith Colleges 300 Pulteney St Geneva, NY 14456	16-0743040	501(c)(3)	23,201		FMV		Research
Rochester Institute of Technology 127 Lomb Memorial Dr Rochester, NY 14623	16-0743140	501(C)(3)	54,111		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Rochester 360 Meliora Hall Rochester, NY 146270268	16-0743209	501(C)(3)	272,400		FMV		Research
Niagara Falls City School District 630 66th St Niagara Falls, NY 14304	16-6001929	501(C)(3)	87,196		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
NYS Cooperative Ext Assoc of Broome Cty 840 Upper Front St Binghamton, NY 139051500	16-6072872	501(C)(3)	102,515		FMV		Research
Cornell Coop Extension Chemung Cty 425 Pennsylvania Ave Elmira, NY 149041766	16-6072875	501(C)(3)	5,718		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cornell Coop Ext of Erie Cty 21 South Grove StSte 320 East Aurora, NY 140522398	16-6072879	501(C)(3)	87,432		FMV		Research
Cornell Coop Ext of Jefferson Cty 203 N Hamilton St Watertown, NY 13601	16-6072882	501(C)(3)	39,524		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cornell Coop Ext of Madison Cty 100 Easton St Morrisville, NY 13408	16-6072885	501(C)(3)	29,163		FMV		Research
Cornell Coop Ext Tompkins Cty 615 Willow Avenue Ithaca, NY 148503555	16-6072897	501(C)(3)	37,050		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Healthy Housing Solutions Inc 10320 Little Patuxent Pkwy Ste 500 Columbia, MD 21044	20-0387562	-	10,632		FMV		Research
Regents Of the University of California 001 Fisher HallProspect Hall Princeton, NJ 08544	21-0634501	501(C)(3)	361,080		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Wildwood Programs Inc 2995 Curry Road Extension Schenectady, NY 12303	22-2132752	501(c)(3)	187,716		FMV		Research
Sciencenter Discovery Museum 601 First St Ithaca, NY 14850	22-2470652	501(c)(3)	5,050		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Starbridge Services Inc 1650 S Ave Ste 200 Rochester, NY 14620	22-2702285	501(c)(3)	98,136		FMV		Research
Parent Network of New York Inc 1000 Main St BUFFALO, NY 14202	22-2717094	501(c)(3)	342,759		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Rutgers The State University of NJ 94 Rockafeller Rd Ste 107 Piscataway, NJ 08854	22-6001086	NJ	49,959		FMV		Research
Academy of Natural Sciences 1900 Benjamin Franklin Parkway Philadelphia, PA 191031195	23-1352000	501(C)(3)	39,824		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Drexel University 3141 Chestnut Street Philadelphia, PA 19104	23-1352630	501(C)(3)	134,348		FMV		Research
University of Pennsylvania PO Box 785541 Philadelphia, PA 191785541	23-1876142	501(C)(3)	156,246		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
North American Assoc Environmental Ed 2000 P St NW Ste 540 Washington, DC 20036	23-7158061	501(C)(3)	1,282,016		FMV		Research
Centro Internacional de Agr Tropical Inc CIAT-MIAMI7343 NW 79th Ter Medlye, FL 33166	23-7187762	501(C)(3)	49,911		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
The Pennsylvania State University 301B Ag Administration Building University Park, PA 16802	24-6000376	PA	365,302		FMV		Research
University of Pittsburgh Office of Financial Information Pittsburgh, PA 15260	25-0965591	501(C)(3)	105,258		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Carnegie Mellon University 5000 Forbes AveSDS PH 208 Pittsburgh, PA 15213	25-0969449	501(C)(3)	437,485		FMV		Research
Garibay Group Inc 3759 N Ravenswood Ave Ste 229 Chicago, IL 606133881	26-1752357	-	42,488		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NOHMs Technologies 1200 Ridgeway Ave Ste 110 Rochester, NY 14615	27-3907362	-	64,302		FMV		Research
Wright State University 3640 Colonel Glenn Hwy Dayton, OH 454350001	31-0732831	-	9,253		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Battelle Memorial Institute 505 King Ave Columbus, OH 432012696	31-4379427	501(C)(3)	11,708		FMV		Research
The Ohio State University 1900 Coffey Road Columbus, OH 43210	31-6025986	OH	115,599		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Ohio State Univ Research Foundation 1960 Kenny Rd Columbus, OH 432101063	31-6401599	501(C)(3)	141,531		FMV		Research
Miami University 212 Pearson Hall - 700 E High St Oxford, OH 45056	31-6402089	501(C)(3)	15,409		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Planetary Science Institute 1700 E Fort Lowell Rd Ste 106 Tucson, AZ 85719	33-0175263	501(C)(3)	44,214		FMV		Research
The College of Wooster 1101 N Bever St Wooster, OH 44691	34-0714654	501(c)(3)	9,108		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Indiana University PO Box 66057 Indianapolis, IN 46266	35-6001673	IN	45,036		FMV		Research
Trustees of Purdue University 915 W State St West Lafayette, IN 479072054	35-6002041	501(C)(3)	13,463		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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University of Chicago 5811 South Kenwood Avenue Chicago, IL 60637	36-2177139	501(c)(3)	537,651		FMV		Research
Bradley University 1501 W Bradley Ave Peoria, IL 616250119	37-0861494	501(c)(3)	26,204		FMV		Research

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The Brd of Trustees of the Univ of Il Grants Contracts28392 Network Pl Chicago, IL 606731283	37-6000511	501(C)(3)	472,434		FMV		Research
Board of Trustees of Michigan State Univ 446 W Circle Dr Rm 160 East Lansing, MI 488243754	38-6005984	501(C)(3)	521,732		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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University of Michigan 839 Greene St1210 Buhr Bldg Ann Arbor, MI 481093209	38-6006309	MI	302,903		FMV		Research
Detroit Zoological Society 8450 W 10 Mile Rd Royal Oak, MI 480673001	38-6027356	501(C)(3)	44,034		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Board of Regents Univ Wisconsin Sys Office for ReserachSponsored Progm Milwaukee, WI 532780538	39-6006492	501(C)(3)	771,773		FMV		Research
Science Museum of Minnesota 120 W Kellogg Blvd Saint Paul, MN 55102	41-0706172	501(c)(3)	34,303		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Regents of the University of Minnesota NW 5960PO Box 1450 Minneapolis, MN 554851450	41-6007513	MN	868,529		FMV		Research
Iowa State Univ of Science&Technology 2221 Wanda Daley Dr Ames, IA 500111004	42-6004224	IA	947,176		FMV		Research

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State University of Iowa 129 E Washington St814JB Iowa City, IA 52242	42-6004813	501(C)(3)	83,068		FMV		Other
Washington University St Louis Genetics660 S Euclid Ave CB 8232 Saint Louis, MO 63110	43-0653611	501(C)(3)	194,393		FMV		Research

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The Curators of the Univ of Missouri PO Box 807012 Kansas City, MO 641807012	43-6003859	MO	136,338		FMV		Research
Truman State University 105 McClain Hall100 East Normal Kirksville, MO 63501	43-6005833	501(C)(3)	57,947		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Northern Plains Sustainable Agr Soc 100 1st Ave SWPO Box 194 LaMoure, ND 58458	45-0423762	501(c)(3)	39,581		FMV		Research
Oakland Museum of California 1000 Oak St Oakland, CA 94607	45-3138892	501(c)(3)	26,724		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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North Dakota State University DSU Dept 3130 PO Box 6050 Fargo, ND 581086050	45-6002439	ND	251,005		FMV		Research
VitaMe Technologies Inc 526 Campus Rd409 Weill Hall Ithaca, NY 14853	46-1345315	-	11,000		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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Graphika Inc 116 W 23rd St FL 15 New York, NY 10011	46-4386048	-	104,446		FMV		Research
State of South Dakota Box 2201 SAD 133 SDSU Brookings, SD 57007	46-6000364	SD	158,937		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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The Board of Regents Univ of Nebraska 401 Canfield Admin Bldg PO Box 8804 Lincoln, NE 685880439	47-0049123	501(C)(3)	9,136		FMV		Research
Doane College 1014 Boswell Ave Crete, NE 683332426	47-0377991	501(c)(3)	48,848		FMV		Research

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Kansas State University Anderson Hall Room 10 Manhattan, KS 665060108	48-0771751	KS	66,173		FMV		Research
Organic Seed Alliance PO Box 772 Port Townsend, WA 983680772	51-0175667	501(c)(3)	17,466		FMV		Research

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Neighborhood Legal Services Inc 237 Main St Suite 400 BUFFALO, NY 142032794	51-0198935	501(c)(3)	33,990		FMV		Research
University of Delaware 700 Pilottown Rd Lewes, DE 19958	51-6000297	501(C)(3)	26,681		FMV		Other

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Johns Hopkins University 3910 Keswick RdN4327B Baltimore, MD 21211	52-0595110	501(C)(3)	640,920		FMV		Research
The Johns Hopkins Univ Applied Phys Lab LLC 11100 Johns Hopkins Rd Laurel, MD 20723	52-0595111	-	245,183		FMV		Research

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Intl Food Policy Research Institute 2033 K Street Nw Washington, DC 20006	52-1041632	501(c)(3)	248,492		FMV		Research
J Craig Venter Institute 4120 Capricorn Ln La Jolla, CA 92037	52-1842938	501(c)(3)	94,082		FMV		Research

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State of Maryland 6 N Liberty St Baltimore, MD 21201	52-6002033	MD	519,152		FMV		Research
American University 4400 Massachusetts Ave NW Washington, DC 20016	53-0196546	501(C)(3)	100,768		FMV		Research

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United States Geological Survey 12100 Beach Forest Rd Laurel, MD 20708	53-0196958	FEDERAL	197,664		FMV		Research
Howard University 525 Bryant St NW Ste 137 Washington, DC 20059	53-0204707	501(c)(3)	26,880		FMV		Research

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Smithsonian Institution MRC 1203PO Box 37012 Washington, DC 200137012	53-0206027	501(C)(3)	43,487		FMV		Research
American Fisheries Society 5410 Grosvenor Ln 110 Bethesda, MD 20902	54-0683803	501(c)(3)	200,403		FMV		Other

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Rector&Visitors University of Virginia PO Box 6550 Charlottesville, VA 229086550	54-6001796	501(C)(3)	78,557		FMV		Research
West Virginia Univ Research Corp One Waterfront Pl 4th Fl PO Box 600 Morgantown, WV 26506	55-0665758	501(C)(3)	8,605		FMV		Research

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State of West Virginia 1900 Kanawha Blvd E 157KS Bldg 1 Charleston, WV 253050771	55-6000842	WV	14,378		FMV		Research
National Institute of Statistical Sciences PO Box 14006 Research Triangle Park, NC 27709	56-1746337	501(c)(3)	54,475		FMV		Research

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North Carolina State University PO Box 7613 Raleigh, NC 27695	56-6000756	NC	445,426		FMV		Research
University of North Carolina Chapel Hill PO Box 402420 Atlanta, GA 303842420	56-6001393	501(C)(3)	154,524		FMV		Research

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Clemson University 108 Silas N Pearman Blvd Clemson, SC 29634	57-6000254	501(C)(3)	131,186		FMV		Research
Emory University 1599 Clifton Rd FL 4 Atlanta, GA 30322	58-0566256	501(c)(3)	107,830		FMV		Research

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Georgia Tech Research Corporation 10Th StreetPO Box 100117 Atlanta, GA 30384	58-0603146	501(c)(3)	1,112,700		FMV		Other
Clark Atlanta University 223 James P Brawley Dr SW Atlanta, GA 303144391	58-1825259	501(c)(3)	81,934		FMV		Research

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University of Georgia 108 E Green St Athens, GA 306022152	58-6001998	GA	256,267		FMV		Other
University of Central Florida 4000 Central Florida Blvd Orlando, FL 328160113	59-2924021	501(c)(3)	41,367		FMV		Research

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University of Florida PO Box 117634 Gainesville, FL 326117634	59-6002052	501(C)(3)	229,935		FMV		Research
Oregon State University Plant Clinic1089 Cordley Hall Corvallis, OR 97331	61-1730890	OR	229,972		FMV		Research

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University of Kentucky Research Foundation PO Box 931113 Cleveland, OH 44193	61-6033693	501(C)(3)	58,727		FMV		Research
University of Arkansas 1125 W Maple St Fayetteville, AR 72701	62-1712458	501(C)(3)	15,490		FMV		Research

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University of Tennessee 206 Henson Hall Knoxville, TN 379963332	62-6001636	501(C)(3)	13,185		FMV		Other
Auburn University 208 M White Smith Hall 381 Mell St Auburn University, AL 368495110	63-6000724	501(C)(3)	202,287		FMV		Research

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University of Alabama at Birmingham P210 West Pavilion 619 S 19th St Birmingham, AL 352337331	63-6005396	501(C)(3)	56,077		FMV		Research
Mississippi State University Account ServicesPO Box 5328 Mississippi State, MS 39762	64-6000819	501(C)(3)	5,514		FMV		Research

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University of the Virgin Islands angela belfon 2 john brewers bay saint thomas 00802 VQ	66-0432514	501(C)(3)	11,241		FMV		Other
US Dept of Agriculture PO Box 979099 Saint Louis, MO 631799000	72-0564834	FEDERAL	574,668		FMV		Research

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Sci-Port Discovery Center 820 Clyde Fant Pkwy Shreveport, LA 71101	72-1136273	501(C)(3)	16,302		FMV		Research
The University of Arizona 4101 N Campbell Ave Tucson, AZ 85719	74-2652689	AZ	124,135		FMV		Research

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The University of Texas at Austin PO Box 7159 Austin, TX 787137159	74-6000203	TX	113,213		FMV		Research
Texas A & M University 400 Harvey Mitchell Pkwy S Ste 300 College Station, TX 778454375	74-6000531	TX	72,865		FMV		Research

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Texas AgriLife Extension TAMU PPM Dept 2132 TAMU College Station, TX 77843	74-6000537	TX	47,998		FMV		Other
The University of Texas at El Paso 500 W University Ave Admin Bldg Rm El Paso, TX 79968	74-6000813	TX	5,357		FMV		Research

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University of Texas Medical Branch PO Box 4786-730 Houston, TX 772104786	74-6000949	501(C)(3)	81,704		FMV		Other
University of Texas at Dallas 800 W Campbell Rd Richardson, TX 75080	75-1305566	TX	19,473		FMV		Research

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Texas Tech University Box 41105 Lubbock, TX 794091105	75-6002622	501(C)(3)	67,396		FMV		Research
Sathguru Inc 88 Broad St Fl 5 Boston, MA 02110	80-0664005	-	1,622,398		FMV		Research

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Montana State University 119 Plant BioSciences Bldg Bozeman, MT 59717	81-6010045	501(C)(3)	120,605		FMV		Research
Regents of the University of Idaho 29603 U of I Ln Parma, ID 83660	82-6000945	501(C)(3)	398,274		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Colorado State University E215 Plant Sciences Bldg Dept 1177 Fort Collins, CO 80523	84-6000545	CO	202,517		FMV		Research
Regents of University of Colorado 1420 Austin Bluffs Pkwy Colorado Springs, CO 80918	84-6000555	501(C)(3)	279,051		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Southwest Sciences Inc 1570 Pacheco St Ste E-11 Santa Fe, NM 87505	85-0340320	-	15,604		FMV		Other
Arizona State University PO Box 871504acct AW51093 TEMPE, AZ 852871504	86-0196696	AZ	98,448		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Southwestern Enviro Edu Exchange 738 N 5th Ave Ste 100 Tucson, AZ 857058485	86-0682018	501(c)(3)	44,246		FMV		Research
Brigham Young University DNA Sequencing Center401 WIDB Provo, UT 84602	87-0217280	501(C)(3)	27,910		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Utah State University 2315 Old Main Hill Logan, UT 84322	87-6000528	UT	31,140		FMV		Research
Honeybee Robotics Ltd PO Box 27420 Brooklyn, NY 11202	88-0193033	-	694,124		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
The Evergreen State College 2700 Evergreen Pkwy Olympia, WA 98505	91-0981488	501(C)(3)	11,150		FMV		Research
Washington State 1111 Washington St SE Olympia, WA 98501	91-6001069	WA	16,648		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Washington State University 24106 N Bunn Rd Prosser, WA 993508694	91-6001108	WA	222,367		FMV		Research
University of Washington University of WA Libraries Box 3529 Seattle, WA 981952900	91-6001537	501(C)(3)	306,727		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Alaska PO Box 755040 Fairbanks, AK 997755040	92-6000147	501(C)(3)	22,538		FMV		Research
The Reed Institute 3203 SE Woodstock Blvd Portland, OR 97202	93-0386908	501(c)(3)	100,435		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Oregon Museum of Science and Industry Unit 85PO Box 4145 Portland, OR 972084145	93-0402877	501(C)(3)	23,971		FMV		Research
Board of Trustees Leland Stanford Univ 459 Lagunita Dr Ste 6 Stanford, CA 943053072	94-1156365	501(c)(3)	689,843		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
SETI Institute 189 N Bernardo Ave Ste 100 Mountain View, CA 940435203	94-2951356	501(C)(3)	36,431		FMV		Research
Regents Of the University of California 1 Cyclotron Rd Berkeley, CA 94720	94-2951741	CA	60,654		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Regents Of the University of California CalSWEC2850 Telegraph Ave Ste 215 Berkeley, CA 947051169	94-6002123	501(C)(3)	356,742		FMV		Research
The Regents Univ California San Francisco 1855 Folsom StBox 0812 San Francisco, CA 941430812	94-6036493	501(c)(3)	11,677		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Regents Of the University of California PO Box 989062 West Sacramento, CA 957989062	94-6036494	501(C)(3)	604,453		FMV		Research
The University of Southern California Sponsored Projects Acc File 52095 Los Angeles, CA 900742095	95-1642394	501(c)(3)	57,570		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
California Institute of Technology 1200 E California Blvd M/C 114-96 Pasadena, CA 91125	95-1643307	501(C)(3)	115,392		FMV		Research
Qorvo US Inc 2300 NE Brookwood Pkwy Hillsboro, OR 97124	95-3654013	-	523,042		FMV		Other

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
Regents Of the University of California 1084 Columbia Ave Riverside, CA 92507	95-6006142	CA	44,238		FMV		Other
Regents Univ of California Los Angeles Box 951432 Los Angeles, CA 900951432	95-6006143	501(C)(3)	161,366		FMV		Research

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC 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
The Regents of the University of California Marine Science Institute Bldg 520 R Santa Barbara, CA 931066150	95-6006145	501(C)(3)	322,659		FMV		Research
University of Hawaii 2500 Campus Rd Honolulu, HI 96822	99-6000354	501(C)(3)	23,832		FMV		Research

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization Cornell University	Employer identification number 15-0532082
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Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax indemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</div></div>		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Approval by the board or compensation committee</div></div>		
4 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: a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?		No
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.		
5 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: a The organization?		No
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III		No
6 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: a The organization?		No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III		No
7 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	Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
9 If "Yes" 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.

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III **Supplemental Information**

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

Return Reference	Explanation
See Additional Data	

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

Part III, Supplemental Information

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A AND 2	THE POSITIONS OF PRESIDENT OF THE CORNELL UNIVERSITY AND THE DEAN OF MEDICINE AT WEILL MEDICAL COLLEGE RECEIVE THE BENEFITS STATED IN SCHEDULE J, PART I, LINE 1A AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE UNIVERSITY, BOTH THE PRESIDENT OF THE UNIVERSITY AND THE INDIVIDUAL SERVING AS DEAN AND PROVOST OF MEDICINE ARE REQUIRED TO LIVE IN UNIVERSITY-PROVIDED HOUSING DURING HIS SERVICE AS INTERIM PRESIDENT, HUNTER R RAWLINGS WAS PROVIDED WITH HOUSING THROUGH THE DATE OF HIS RETIREMENT IN APRIL 2017 HIS SUCCESSOR, CURRENT PRESIDENT MARTHA POLLACK, HAS BEEN PROVIDED WITH HOUSING SINCE APRIL 2017 FORMER DEAN AND PROVOST OF MEDICINE, LAURIE GLIMCHER, WAS PROVIDED WITH HOUSING UNTIL HER DEPARTURE IN MAY 2016 HER SUCCESSOR, CURRENT DEAN AND PROVOST OF MEDICINE AUGUSTINE MK CHOI, HAS BEEN PROVIDED WITH HOUSING SINCE JANUARY 2016 TAXABLE HOUSING BENEFITS ARE SHOWN IN SCHEDULE J FOR AUGUSTINE MK CHOI FOR AMOUNTS RECEIVED IN HIS FORMER ROLE OF CHAIR OF MEDICINE AND FOR ZEV ROSENWAKS TAXABLE HOUSING WAS PROVIDED TO AUGUSTINE MK CHOI FROM JANUARY THRU MAY 2016 AND NONTAXABLE HOUSING WAS PROVIDED STARTING IN JUNE 2016 WHERE BENEFITS ARE TAXABLE, SUCH AMOUNTS ARE INCLUDED AS TAXABLE WAGES ON THE EMPLOYEES RESPECTIVE FORMS W-2 NO COMPENSATION WAS DISCLOSED FOR MARTHA POLLACK IN PART VII OR IN SCHEDULE J, BECAUSE THIS FORM 990 DISCLOSES CALENDAR 2016 COMPENSATION AND MARTHA POLLACK BEGAN SERVING IN HER ROLE AS PRESIDENT AFTER THE END OF 2016 IN THE SPRING OF 2017 PAYMENT OR REIMBURSEMENT OF THE EXPENSES DESCRIBED IN LINE 1A ARE COVERED BY THE UNIVERSITY'S TRAVEL POLICIES OR SPECIFIC EMPLOYMENT CONTRACTS AND INCLUDES THE UNIVERSITY'S IMPLEMENTATION OF AN ACCOUNTABLE PLAN THERE IS OCCASIONALLY UNIT DISCRETION

Part III, Supplemental Information

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4B	HUNTER R RAWLINGS HAS SERVED THE UNIVERSITY DURING TWO SEPARATE TERMS DURING HIS FIRST TERM OF EMPLOYMENT, HE PARTICIPATED IN A BOARD-AUTHORIZED IRC SECTION 457(F) DEFERRED COMPENSATION PLAN DURING 2016, FOLLOWING HIS FIRST RETIREMENT FROM THE UNIVERSITY, HUNTER R RAWLINGS RECEIVED A TOTAL OF \$377,410 96 IN IRC SECTION 457(F) PAYMENTS AND THAT AMOUNT IS REPORTED IN SCHEDULE J WHEN HUNTER R RAWLINGS WAS CALLED BACK INTO UNIVERSITY SERVICE, AS INTERIM PRESIDENT FOLLOWING THE DEATH OF FORMER PRESIDENT ELIZABETH GARRETT, ALL 457(F) PAYMENTS TO HUNTER R RAWLINGS WERE SUSPENDED AND HE RECEIVED REGULAR SALARY FOLLOWING HIS SECOND RETIREMENT FROM THE UNIVERSITY, PAYMENTS UNDER THE IRC SECTION 457(F) PLAN RESUMED IN JULY, 2017 THE CURRENT PRESIDENT DOES NOT CURRENTLY PARTICIPATE IN A 457(F) PLAN

Part III, Supplemental Information

Return Reference	Explanation
SCHEDULE J, PART I, LINE 7	BONUS PAYMENTS ARE PROVIDED TO INDIVIDUALS IN RECOGNITION OF ACCOMPLISHMENTS OF SPECIFIC GOALS OR OVERALL PERFORMANCE. ADDITIONAL INFORMATION ON BOARD OF TRUSTEES: THE CORNELL BOARD INCLUDES FACULTY, STAFF AND STUDENTS. FACULTY MEMBERS ELECT TWO (2) MEMBERS, THE STUDENT BODY ELECTS TWO (2) MEMBERS, THE 'EMPLOYEE ASSEMBLIES' ELECT ONE (1) MEMBER.

Part III, Supplemental Information

Return Reference	Explanation
SCHEDULE J, PART II, COLUMN B(II)	BONUS AND INCENTIVE PAY IS ANY PAYMENT RECEIVED RELATED TO THE SCHEDULE J, PART I, LINE 7 DISCLOSURE THE FOLLOWING INDIVIDUALS RECEIVED BONUS AND INCENTIVE PAY AUGUSTINE MK CHOI, DANIEL KNOWLES, STEPHEN COHEN, DAVID J SKORTON, FORMER CHIEF INVESTMENT OFFICER ALBERT J EDWARDS, AND MICHAEL I KOTLIKOFF

Part III, Supplemental Information

Return Reference	Explanation
SCHEDULE J, PART II, COLUMN B(III)	OTHER REPORTABLE COMPENSATION REPORTED ON SCHEDULE J IS MADE UP OF ONE, OR A VARIETY OF THE FOLLOWING ITEMS SUPPLEMENTAL WAGES, WHICH INCLUDES WAGES EARNED FOR CLINICAL SERVICES AT THE HOSPITAL, AND OTHER TAXABLE BENEFITS OR REIMBURSEMENTS RECEIVED, SUCH AS HOUSING ALLOWANCE THE FOLLOWING INDIVIDUALS RECEIVED SUPPLEMENTAL WAGES FOR CLINICAL SERVICES AUGUSTINE MK CHOI, DANIEL KNOWLES, MD, MICHAEL STEWART, MD, ZEV ROSENWAKS, MD, HEY-JOO KANG, MD, STEVEN SPANDORFER, MD, THEODORE SCHWARTZ, MD, AND PAK CHUNG, MD AUGUSTINE MK CHOI, MD & ZEV ROSENWAKS, MD, BOTH RECEIVED TAXABLE HOUSING ALLOWANCES

Part III, Supplemental Information

Return Reference	Explanation
SCHEDULE J, PART II, COLUMNS C AND D	CORNELL UNIVERSITY PROVIDES A WIDE VARIETY OF BENEFITS TO ITS EMPLOYEES BENEFITS ARE TREATED AS A NON-TAXABLE BENEFIT, A PRE-TAX EMPLOYEE DEDUCTION, A POST-TAX EMPLOYEE DEDUCTION, OR OTHERWISE RECORDED AS TAXABLE INCOME CORNELL CONTRIBUTES ON BEHALF OF THE EMPLOYEE TAX-FREE FOR A PORTION OF THEIR HEALTH, DENTAL, AND LIFE INSURANCE EMPLOYEES CONTRIBUTE TO THOSE BENEFITS ON A PRE-TAX BASIS, ALONG WITH OTHER BENEFITS SUCH AS VISION, A FLEXIBLE SPENDING ACCOUNT, DEPENDENT GROUP LIFE INSURANCE, AND RETIREMENT ACCOUNTS

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Robert A Buhman Prof of Engineering	(i)	405,932	0	0	44,500	18,958	469,390	0
	(ii)	0	0	0	0	- 0	- 0	0
1Augustine MK Choi Provost Medl Affrs & Dean	(i)	563,426	154,500	941,198	0	7,230	1,666,354	0
	(ii)	0	0	0	0	- 0	- 0	0
2Pak Chung Assoc Prof-Clinical Obs & Gyn	(i)	74,456	0	3,664,449	0	10,506	3,749,411	0
	(ii)	0	0	0	0	- 0	- 0	0
3Stephen Cohen Exec Vice Prov for Adm & Fin	(i)	1,045,111	90,604	906	36,000	5,486	1,178,107	0
	(ii)	0	0	0	0	- 0	- 0	0
4Joanne M Destefano Executive Vice President & CFO	(i)	626,590	0	42,225	57,255	11,575	737,645	0
	(ii)	0	0	0	0	- 0	- 0	0
5Albert J Edwards Former Chief Investment Off	(i)	148,081	300,120	0	26,500	6,734	481,435	0
	(ii)	0	0	0	0	- 0	- 0	0
6Elizabeth Garrett FORMER PRESIDENT	(i)	152,373	0	153,867	22,963	1,911	331,114	0
	(ii)	0	0	0	0	- 0	- 0	0
7Laune H Glimcher FORMER DEAN OF MED SCHOOL	(i)	521,672	0	524,890	0	3,702	1,050,264	0
	(ii)	0	0	0	0	- 0	- 0	0
8Antonio Gotto MD Former Provost & Dean of Weill	(i)	0	0	3,076,207	0	0	3,076,207	0
	(ii)	0	0	0	0	- 0	- 0	0
9Hey-Joo Kang MD Assoc Prof-Clinical Obs & Gyn	(i)	63,849	0	4,334,278	0	10,267	4,408,394	0
	(ii)	0	0	0	0	- 0	- 0	0
10Harry Katz Former officer/Current Prof	(i)	350,003	0	53,782	39,255	21,503	464,543	0
	(ii)	0	0	0	0	- 0	- 0	0
11Daniel M Knowles MD Chief Medical Officer	(i)	418,485	467,217	996,326	18,000	7,956	1,907,984	0
	(ii)	0	0	0	0	- 0	- 0	0
12Michael I Kotlikoff PROVOST	(i)	640,627	100,000	23,053	99,144	17,252	880,076	0
	(ii)	0	0	0	0	- 0	- 0	0
13Bruce Lewenstein Trustee/Professor	(i)	122,579	0	13,826	18,945	23,023	178,373	0
	(ii)	0	0	0	0	- 0	- 0	0
14James J Mingle Univ Counsel & Secretary	(i)	507,839	0	47,312	44,500	12,818	612,469	0
	(ii)	0	0	0	0	- 0	- 0	0
15Kenneth M Miranda Chief Investment Officer	(i)	374,350	75,000	50,747	44,500	650	545,247	0
	(ii)	0	0	0	0	- 0	- 0	0
16Hunter R Rawlings III INTERIM PRESIDENT (THRU 3/17)	(i)	704,776	0	403,831	38,500	10,939	1,158,046	0
	(ii)	0	0	0	0	- 0	- 0	0
17Zev Rosenwaks MD Executive Director	(i)	303,873	0	6,884,155	0	5,512	7,193,540	0
	(ii)	0	0	0	0	- 0	- 0	0
18Theodore Schwartz MD Prof of Neurological Surgery	(i)	215,576	0	3,559,246	18,000	7,722	3,800,544	0
	(ii)	0	0	0	0	- 0	- 0	0
19David J Skorton Former officer/Professor	(i)	0	444,284	0	0	0	444,284	0
	(ii)	0	0	0	0	- 0	- 0	0

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21Steven Spandorfer MD Assoc Prof of Obs & Gyn	(i)	72,737	0	3,730,106	18,000	7,722	3,828,565	0
	(ii)	0	0	0	0	- 0	- 0	0
1Manana F Wolfner Trustee/Prof Molecular Bio	(i)	173,156	0	0	17,828	17,252	208,236	0
	(ii)	0	0	0	0	- 0	- 0	0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization
Cornell University

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
► Attach to Form 990.
► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number
15-0532082

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A TCIDA (SERIES 2008A 70 MILLION PAR)	16-1214039	890099EQ3	06-23-2010	75,307,598	REFUND 2008 BONDS (1/30/2008)		X		X		X
B DASNY (SERIES 1990B - 5045 MILLION PAR)	14-6000293	649905zh2	05-03-2010	55,997,134	REFUND 1990 BONDS (12/19/1990)		X		X		X
C DASNY (SERIES 2004A&B - 921 MILLION PAR)	14-6000293	64983trf2	05-27-2004	92,100,000	SEE SUPPLEMENTAL INFORMATION		X		X		X
D DASNY (SERIES 2016A - 12585 MILLION PAR)	14-6000293	64990bg49	05-17-2016	153,651,986	SEE SUPPLEMENTAL INFORMATION		X		X		X

Part II

Proceeds

					A		B		C		D	
1	Amount of bonds retired				10,845,000		19,300,000		26,250,000		3,930,000	
2	Amount of bonds legally defeased				0		0		0		0	
3	Total proceeds of issue				75,307,598		55,997,134		92,663,883		153,651,986	
4	Gross proceeds in reserve funds				0		0		0		0	
5	Capitalized interest from proceeds				0		0		0		0	
6	Proceeds in refunding escrows				0		0		0		0	
7	Issuance costs from proceeds				520,432		0		842,345		660,938	
8	Credit enhancement from proceeds				0		0		0		0	
9	Working capital expenditures from proceeds				0		0		0		0	
10	Capital expenditures from proceeds				0		0		50,376,296		0	
11	Other spent proceeds				74,787,166		55,997,134		41,445,242		152,991,048	
12	Other unspent proceeds				0		0		0		0	
13	Year of substantial completion				2010		2010		2006		2016	
					Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?				X		X		X		X	
15	Were the bonds issued as part of an advance refunding issue?					X		X		X		X
16	Has the final allocation of proceeds been made?				X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?				X		X		X		X	

Part III

Private Business Use

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

Part III Private Business Use (Continued)

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

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
SERIES 2008a	PART IV, QUESTION 2 ARBITRAGE REBATE COMPUTATION COMPLETED 9/12/2012

Return Reference	Explanation
SERIES 1990B	PART III THE PRE-2003 ISSUANCE RULES APPLY, THEREFORE, PART III IS NOT REQUIRED PART IV, QUESTION 2 SERIES 1990B BONDS REFINANCED EXISTING DEBT WITH NO NEW MONEY COMPONENT EXEMPT FROM REBATE CALCULATION

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

Return Reference	Explanation
SERIES 2016A	PART I (F) REFUNDED 2006 DASNY BONDS (ISSUES 5/11/2006) PART IV, QUESTION 2 SERIES 2016A BONDS REFINANCED EXISTING DEBT WITH NO NEW MONEY COMPONENT EXEMPT FROM REBATE CALCULATION

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization
Cornell University

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
► Attach to Form 990.
► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number
15-0532082

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A DASNY (2009A - 305 MILLION PAR)	14-6000293	649905dc7	04-22-2009	312,100,133	SEE SUPPLEMENTAL INFORMATION		X		X		X
B DASNY (SERIES 2010A - 285000000)	14-6000293	649905r99	06-09-2010	301,560,097	SEE SUPPLEMENTAL INFORMATION		X		X		X
C DASNY CP PROGRAM (MAY 122011 TAX CERTIFICATE)	14-6000293	649831000	05-12-2011	59,000,000	SEE SUPPLEMENTAL INFORMATION		X		X		X
D DASNY (SERIES 2008B&C - 127785 MILLION PAR)	14-6000293	649905a97	05-03-2010	139,688,300	REFUNDED 2008 DASNY BONDS		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	36,845,000		0		6,110,000		18,575,000	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	312,520,924		301,900,097		59,000,038		139,688,300	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	16,444,611		29,036,727		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	2,307,605		2,113,328		0		770,300	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	141,571,634		218,375,984		17,845,038		0	
11	Other spent proceeds	152,197,074		52,374,058		41,155,000		138,918,000	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2011		2014		2013		2010	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X		X		X	
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X		X	
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X		X	
c Are there any research agreements that may result in private business use of bond-financed property?	X		X		X		X	
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X		X		X		X	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 %		0 %		0 %	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %		0 %		0 %	
6 Total of lines 4 and 5	0 %		0 %		0 %		0 %	
7 Does the bond issue meet the private security or payment test? . . .		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . .								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		X		X		X		X
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X		X		X	

Part IV

Arbitrage

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
SERIES 2009A	PART I (F) REFUND \$150 MILLION OF TAX-EXEMPT CP AND FINANCE CAPITAL PROJECTS PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 4/30/2012

Return Reference	Explanation
SERIES 2010A	PART I (F) REFUNDED \$50 MILLION OF TAXABLE DEBT AND FINANCED CONSTRUCTION OF A MEDICAL BUILDING PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 7/31/2012

Return Reference	Explanation
1998 TAX-EXEMPT COMMERCIAL PAPER	PART I (F) REFUNDED TAX EXEMPT COMMERCIAL PAPER (\$6,155,000) AND REFUNDED TAXABLE COMMERCIAL PAPER (\$35,000,000) PART IV, QUESTION 2 ARBITRAGE REBATE CALCULATION COMPLETED 5/12/2013

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

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization
Cornell University

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number
15-0532082

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A Dasny (Series 2000A&B - 10113 million par)	14-6000293		12-16-2015	101,130,000	See Supplemental information		X		X		X
B TCIDA (series 2002A - 35765 million par)	16-1214039		01-20-2016	35,765,000	See supplemental information		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	10,450,000		3,520,000					
2	Amount of bonds legally defeased	0		0					
3	Total proceeds of issue	101,130,000		35,765,000					
4	Gross proceeds in reserve funds	0		0					
5	Capitalized interest from proceeds	0		0					
6	Proceeds in refunding escrows	0		0					
7	Issuance costs from proceeds	0		0					
8	Credit enhancement from proceeds	0		0					
9	Working capital expenditures from proceeds	0		0					
10	Capital expenditures from proceeds	0		0					
11	Other spent proceeds	101,130,000		35,765,000					
12	Other unspent proceeds	0		0					
13	Year of substantial completion	2016		2016					
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X					
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III

Private Business Use

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

Part III Private Business Use (Continued)

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

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
SERIES 2000A&B	PART I (F) REFUNDED 2000A&B DASNY BONDS (ISSUED 3/28/2000) PART III THE PRE-2003 ISSUANCE RULES APPLY, THEREFORE, PART III IS NOT REQUIRED PART IV, QUESTION 2 SERIES 2000A&B BONDS REFINANCED EXISTING DEBT WITH NO NEW MONEY COMPONENT EXEMPT FROM REBATE CALCULATION

Return Reference	Explanation
SERIES 2002A	PART I (F) REFUNDED 2002A TCIDA BONDS (ISSUED 2/14/2002) PART III THE PRE-2003 ISSUANCE RULES APPLY, THEREFORE, PART III IS NOT REQUIRED PART IV, QUESTION 2 SERIES 2002A BONDS REFINANCED EXISTING DEBT WITH NO NEW MONEY COMPONENT EXEMPT FROM REBATE CALCULATION PART VI NOTE ON TAX EXEMPT BONDS WITH THE IMPLEMENTATION OF THE MIXED USE RULES, THE UNIVERSITY HAS SEEN A REDUCTION IN REPORTABLE PRIVATE USE DUE TO UNIVERSITY EQUITY AND GIFTS

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
Cornell University

Employer identification number
15-0532082

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total							► \$					

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) First Reserve Funds	Trustee-Macaulay	923,362	Distribution to Univ		No
(2) Peter Destefano	Officer-Spouse	92,146	compensation		No
(3) Andrei Marmor	Former Officer-Spouse	369,645	Compensation		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
Cornell University

Employer identification number
15-0532082

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	64	1,609,036	Appraisal
2 Art—Historical treasures . .				
3 Art—Fractional interests . .				
4 Books and publications . .	X		89,100	Appraisal
5 Clothing and household goods				
6 Cars and other vehicles . .	X	1	16,475	Appraisal
7 Boats and planes	X	1	5,000	Appraisal
8 Intellectual property . . .				
9 Securities—Publicly traded .	X	1,334	40,438,971	Appraisal
10 Securities—Closely held stock .	X	2,655	450,001	Appraisal
11 Securities—Partnership, LLC, or trust interests	X	3	3	Appraisal
12 Securities—Miscellaneous . .	X	7,300	7,300	Appraisal
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential . .	X	3	58,000	Appraisal
16 Real estate—Commercial . .				
17 Real estate—Other				
18 Collectibles	X	2	330	Appraisal
19 Food inventory	X	1	1,035	Appraisal
20 Drugs and medical supplies .	X	1	2,000	Appraisal
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens . . .				
24 Archeological artifacts . . .				
25 Other ► See Additional Data				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

28

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II**Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

Part I, Lines 25-28

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
Other ▶ (Computers)	X	1	14,179	Appraisal
Other ▶ (Equipment)	X	5	607,970	Appraisal
Other ▶ (Capital)	X	6	152,136	Appraisal
Other ▶ (Horses)	X	36	254,526	Appraisal
Other ▶ (Non-Capital)	X	59	2,210,119	Appraisal
Other ▶ (Software)	X	2	7,377,506	Appraisal
Other ▶ (Gift Certificates)	X	7	1,617	Appraisal

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
~~Internal Revenue Service~~Name of the organization
Cornell University**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2016**Open to Public
Inspection****Employer identification number**

15-0532082

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1	ORGANIZATIONS MISSION THE MISSION OF CORNELL UNIVERSITY IS TO PROVIDE UNDERGRADUATE, GRADUATE, AND PROFESSIONAL DEGREE PROGRAMS, TO DISCOVER, PRESERVE, AND DISSEMINATE KNOWLEDGE, PRODUCE CREATIVE WORK, AND PROMOTE A CULTURE OF BROAD INQUIRY THROUGHOUT AND BEYOND THE UNIVERSITY COMMUNITY CORNELL ALSO AIMS, THROUGH PUBLIC SERVICE, TO ENHANCE THE LIVES AND LIVELIHOODS OF STUDENTS, THE CITIZENS OF NEW YORK STATE, AND OTHERS AROUND THE WORLD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>CORNELL UNIVERSITY IS RENOWNED FOR ITS ACADEMIC RIGOR, INTELLECTUAL VIBRANCY, ENTREPRENEURIAL CHARACTER, AND THE DIVERSITY AND QUALITY OF ITS CURRICULA AND AREAS OF MULTIDISCIPLINARY RESEARCH AND STUDY. THE UNIVERSITY'S UNDERGRADUATE, GRADUATE, PROFESSIONAL, POST-DOCTORAL, AND CONTINUING EDUCATION PROGRAMS HAVE A GLOBAL REPUTATION FOR EXCELLENCE AND INNOVATION. CORNELL'S MAIN CAMPUS IS IN ITHACA, NEW YORK, WITH THE CAMPUSES OF WEILL CORNELL MEDICAL COLLEGE AND CORNELL TECH IN NEW YORK CITY. THE UNIVERSITY HAS A SIGNIFICANT INTERNATIONAL EDUCATIONAL PRESENCE, INCLUDING WEILL CORNELL MEDICAL COLLEGES CAMPUS IN DOHA, QATAR. DURING THE FISCAL YEAR 2017, THE UNIVERSITY GRANTED THE FOLLOWING DEGREES: UNDERGRADUATE (3,646), MASTERS (2,792), PHD (555), AND J.D., M.D. & D.V.M. DEGREES (403). FORM 990, PART III, LINE 4B MEDICAL SERVICES, INCLUDING THE TRAINING AND EDUCATION OF PHYSICIANS, IS A PRIMARY COMPONENT OF THE UNIVERSITY'S MISSION. CORNELL IS COMMITTED TO EXCELLENCE IN PATIENT CARE, SCIENTIFIC DISCOVERY, AND THE EDUCATION OF FUTURE PHYSICIANS IN NEW YORK CITY AND AROUND THE WORLD. THE DOCTORS AND SCIENTISTS OF WEILL CORNELL MEDICINE FACULTY FROM WEILL CORNELL MEDICAL COLLEGE, WEILL CORNELL GRADUATE SCHOOL OF MEDICAL SCIENCES, AND THE WEILL CORNELL PHYSICIAN ORGANIZATION PROVIDE CLINICAL CARE AND RESEARCH THAT CONNECT PATIENTS TO THE LATEST TREATMENT INNOVATIONS AND PREVENTION STRATEGIES. FORM 990, PART III, LINE 4C CORNELL HAS A LONG TRADITION OF COMBINING SCHOLARLY WORK AND LEADERSHIP IN RESEARCH BOTH BASIC AND APPLIED WITH PUBLIC SERVICE AND ENGAGEMENT IN NEW YORK STATE AND AROUND THE WORLD. REVENUES FROM SPONSORED AWARDS INCLUDE \$450,539,691 MILLION IN DIRECT SUPPORT AND \$145,774,928 MILLION IN INDIRECT COST RECOVERY. REVENUES ALSO INCLUDE GRANT AND CONTRACT REVENUE TO SUPPORT PUBLIC OUTREACH AND INSTRUCTION, THE SINGLE LARGEST PORTION IS RELATED TO RESEARCH. FORM 990, PART III, LINE 4D OTHER PROGRAM SERVICE ACCOMPLISHMENTS INCLUDE, BUT ARE NOT LIMITED TO, CORNELL'S LAND-GRANT MISSION, ACADEMIC CONFERENCES, PUBLICATIONS, AND ROOM AND BOARD FOR STUDENTS. FORM 990, PART VI, LINE 1A EXECUTIVE COMMITTEE ARTICLE II OF THE BY-LAWS PROVIDES THAT THE EXECUTIVE COMMITTEE IS COMPRISED OF THE CHAIRPERSON AND VICE CHAIRPERSONS OF THE BOARD, THE PRESIDENT OF THE UNIVERSITY, AND THE CHAIRPERSONS OF THE TWO BOARDS OF OVERSEERS, EACH EX OFFICIO, TOGETHER WITH TRUSTEES AND EMERITUS TRUSTEES TO BE ELECTED BY THE BOARD. DURING THIS REPORTING YEAR, ALL MEMBERS OF THE EXECUTIVE COMMITTEE WERE TRUSTEES. THE EXECUTIVE COMMITTEE IS AUTHORIZED TO: (I) REVIEW THE BUDGET AND FINANCIAL PLAN FOR CORNELL UNIVERSITY, EXCEPT FOR WEILL MEDICAL COLLEGE, AND TO SUBMIT THE PLAN, WITH RECOMMENDATIONS, FOR FULL BOARD REVIEW, (II) REVIEW THE PRESIDENT'S PLAN FOR THE UNIVERSITY'S PROPERTIES AND INVESTMENTS, (III) REVIEW AND APPROVE THE PRESIDENT'S COMPENSATION, (IV) REVIEW AND APPROVE COMPENSATION AND BENEFIT POLICIES FOR ALL UNIVERSITY PERSONNEL, (V) ELECT THE DEANS, DIRECTORS AND OTHER HEADS.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	DS OF THE COLLEGES, SCHOOLS OR OTHER ACADEMIC UNITS, ALL UPON RECOMMENDATION OF THE PROVOST OR PROVOST FOR MEDICAL AFFAIRS, AS APPROPRIATE, AND WITH THE CONCURRENCE OF THE PRESIDENT, (VI) PRESCRIBE THE DUTIES OF SUCH OFFICERS AND ADJUST THEIR COMPENSATION, EXCEPT FOR WELL MEDICAL COLLEGE, AND (VII) EXERCISE THE POWERS OF THE BOARD IN ALL MATTERS, EXCEPT THOSE WHICH REQUIRE ACTION BY THE FULL BOARD, BETWEEN MEETINGS OF THE BOARD OF TRUSTEES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINE 4	SIGNIFICANT CHANGES TO GOVERNING DOCUMENTS CHANGES MADE TO THE UNIVERSITY BY-LAWS WERE APPROVED BY THE BOARD ON THE FOLLOWING DATES MAY 27, 2017 AMMENDMENT TO ARTICLE III, SECTION 2 A AND SECTION C AND TO ARTICLE VI, SECTION 1 AND SECTION 3 TEHSE AMENMENTS WERE REQUIRED DUE TO CHANGES TO THE NOT-FOR-PROFIT CORPORATION LAW, EFFECTIVE MAY 27, 2017 THE EXECUTIVE COMMITTEE WILL NOT LONGER BE ABLE TO ELECT OFFICERS AND THESE POSITIONS MUST NOW BE ACTED UPON BY FULL BOARD OF TRUSTEES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINE 7A	POWER TO ELECT OR APPOINT MEMBERS PURSUANT TO THE UNIVERSITYS CHARTER, THE BOARD OF TRUSTEES CONSISTS OF 63 MEMBERS OF THIS NUMBER, THE GOVERNOR, THE TEMPORARY PRESIDENT OF THE SENATE, THE SPEAKER OF THE ASSEMBLY, AND THE PRESIDENT OF THE UNIVERSITY ARE EX OFFICIO TRUSTEES DURING THEIR TERMS OF OFFICE FURTHER, THE ELDEST LINEAL DESCENDANT OF EZRA CORNELL IS APPOINTED AS A TRUSTEE FOR HIS OR HER LIFE THE GOVERNOR ALSO APPOINTS THREE TRUSTEES ADDITIONALLY, ACADEMIC FACULTY APPOINT TWO MEMBERS, THE STUDENT BODY APPOINTS TWO MEMBERS, AND THE NON-ACADEMIC STAFF APPOINT ONE MEMBER AND THE ALUMNI ELECT EIGHT MEMBERS ALL REMAINING TRUSTEES ARE ELECTED BY THE BOARD OF TRUSTEES

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINE 12C	<p>MONITORING AND ENFORCEMENT OF COMPLIANCE WITH CONFLICT OF INTEREST POLICY UNDER THE UNIVERSITYS CONFLICT OF INTEREST POLICY, OFFICERS, DIRECTORS, AND OTHER KEY EMPLOYEES AND FACULTY MEMBERS MUST FILE AN ANNUAL CONFLICT OF INTEREST STATEMENT ANY CONFLICT IDENTIFIED IS REPORTED TO THE APPROPRIATE OFFICE RESPONSIBLE FOR MANAGING THE CONFLICT, SUCH AS THE REAL ESTATE OFFICE FOR REAL ESTATE MATTERS THIS PROCEDURE IS DESIGNED TO HELP ENSURE THAT SUCH TRANSACTIONS ARE SUBJECT TO ADDITIONAL REVIEW AND AUTHORIZATION ANY MEMBER OF THE BOARD OF TRUSTEES, BOARD OF OVERSEERS, AN OFFICER OF THE CORPORATION, OR OTHER SENIOR ADMINISTRATOR MUST REPORT ANNUALLY, IN WRITING, ANY EXTERNAL INTERESTS, OR THOSE OF A FAMILY MEMBER OR ASSOCIATE, TO THE UNIVERSITY COUNSEL AND SECRETARY OF THE CORPORATION THE UNIVERSITY COUNSEL AND SECRETARY OF THE CORPORATION WILL ADVISE THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES REGARDING SUCH MATTERS AS NECESSARY INCLUDING DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS AND HOW CORNELL UNIVERSITY SHOULD BEST MANAGE A CONFLICT OF INTEREST AN INDIVIDUAL IS CONSIDERED TO HAVE A CONFLICT OF INTEREST WHEN HE OR SHE, A MEMBER OF HIS OR HER FAMILY, OR AN ASSOCIATE (TO HIS OR HER PRESENT KNOWLEDGE) EITHER (1) HAS AN EXISTING OR POTENTIAL SIGNIFICANT FINANCIAL INTEREST OR OTHER MATERIAL INTEREST OR RELATIONSHIP THAT IMPAIRS OR MIGHT APPEAR TO IMPAIR THE INDIVIDUALS INDEPENDENCE AND OBJECTIVITY IN THE DISCHARGE OF HIS OR HER RESPONSIBILITIES TO THE UNIVERSITY, OR (2) MAY RECEIVE A FINANCIAL OR OTHER MATERIAL BENEFIT FROM INFORMATION CONFIDENTIAL TO THE UNIVERSITY TYPICALLY, A CONFLICT OF INTEREST MAY ARISE WHEN AN INDIVIDUAL HAS THE OPPORTUNITY TO INFLUENCE THE UNIVERSITYS BUSINESS, ADMINISTRATIVE, ACADEMIC, OR OTHER DECISIONS IN WAYS THAT COULD LEAD TO PERSONAL GAIN OR ADVANTAGE OF ANY KIND UPON FULL REPORTING, THE UNIVERSITY MAY APPROVE A TRANSACTION OR AFFILIATION, PROVIDED THAT THE CONFLICT CAN BE MANAGED IN MANY CASES, THE CONFLICT CAN BE MANAGED THROUGH DISCLOSURE IN SOME CASES, THE INDIVIDUAL MAY BE REQUIRED TO REPORT ON THE CONFLICT ANNUALLY THE UNIVERSITY WILL DISAPPROVE THE TRANSACTION OR AFFILIATION IF A CONFLICT OF INTEREST IS INVOLVED THAT CANNOT BE MANAGED</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINES 12-14	CORNELL UNIVERSITY HAS ADOPTED POLICIES COVERING THE SUBJECTS OF CONFLICTS OF INTEREST, WHISTLEBLOWERS, AND DOCUMENT RETENTION AND DESTRUCTION, AS WELL AS OTHER SIGNIFICANT POLICIES, EACH OF WHICH IS POSTED ON ITS WEBSITE AT POLICY CORNELL EDU THE CORNELL UNIVERSITY POLICY PROMULGATION PROCESS WAS ESTABLISHED IN 1991 THE CURRENT POLICY PROMULGATION PROCESS DOES NOT REQUIRE THAT EACH SPECIFIC POLICY BE APPROVED BY THE BOARD OF TRUSTEES OR THAT THE LITERAL AUTHORITY TO PROMULGATE POLICY WAS DELEGATED, HOWEVER, CORNELL TAKES A SUBSTANTIATED POSITION THAT THE AUTHORITY TO PROMULGATE POLICIES WAS DELEGATED TO EACH EXECUTIVE BY THE AUDIT COMMITTEE IN 1991

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINE 19	PROCESS FOR MAKING DOCUMENTS AVAILABLE TO THE PUBLIC THE UNIVERSITYS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC VIA THE UNIVERSITYS WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VIII, PART IX AND PART X	CURRENT YEAR REVENUE AND EXPENSE PRESENTS DATA OF CORNELL UNIVERSITY DECONSOLIDATED ON EACH LINE FROM ITS RELATED ORGANIZATIONS THAT ARE INCLUDED IN CORNELLS CONSOLIDATED FINANCIAL STATEMENTS BOTH THE BEGINNING OF YEAR AND END OF YEAR BALANCE SHEETS FOR CORNELL UNIVERSITY HAVE BEEN PRESENTED DECONSOLIDATED FROM THE RELATED ORGANIZATIONS INCLUDED IN CORNELLS CONSOLIDATED FINANCIAL STATEMENTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VIII, LINE 1H	THE CORNELL UNIVERSITY FOUNDATION IS A DONOR ADVISED FUND PROVIDING A SERVICE FOR CORNELL ALUMNI AND FRIENDS WHO WISH TO MAKE CHARITABLE GIFTS THROUGH THE STRUCTURE OF A DONOR-ADVISED FUND AMOUNTS GRANTED FROM THIS FOUNDATION TO CORNELL UNIVERSITY HAVE BEEN INCLUDED IN THE CONTRIBUTION TOTAL FOR CORNELL UNIVERSITY BEGINNING WITH THE 2014 FORM 990

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES TO NET ASSETS PENSION AND POST RETIREMENT \$ 63,799,698 CHANGES LOSS ON INTEREST RATE SWAPS \$ 81,450,554 CHANGES IN FMV OF SPLIT-INTEREST \$ 10,570,557 AGREEMENTS PRIOR PERIOD ADJUSTMENT (\$ 18,576,059) ----- TOTAL \$ 137,244,750

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
Cornell University

Employer identification number
15-0532082

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CORNELL UNIVERSITY FOUNDATION UK LTD 19 NORCOTT ROAD LONDON N16 78J UK	UK DONATIONS	UK	1,313,549	1,092,926	CORNELL UNIV
(2) LLENROC GLOBAL LLC 300 CCC BLDG235 GARDEN AV ITHACA, NY 14853 47-5629659	SUPPORTING	NY	1	1	CORNELL UNIV

Part II Identification of Related Tax-Exempt Organizations

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

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b) (13) controlled entity?	
						Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ITHACA LP 35 THORNWOOD ITHACA, NY 14850	INVESTMENTS	JE	CORNELL UNIV	related	-2,753,277	4,968,623		No	0		No	99 690 %
(2) Hudson Cornell Residential JV 826 Broadway NY, NY 10003	Real Estate	NY	Cornell Univ	related	-1,121,218	37,406,890		No	0		No	85 590 %
(3) Cayuga 1993 LP 555 Main St Racine, WI 53403	Investments	WI	Cornell Univ	related	1,089,511	13,137,881		No	0		No	62 970 %

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) TOWER INNOVATIVE LEARNING SOLUTIONS INC 950 DANBY ROAD ITHACA, NY 14850 16-1593492	DIST LEARNING	NY	CORNELL UNIV	C Corp	14,728,000	11,488,000	100 000 %	Yes	
(2) LENROC CORPORATION 15 THORNWOOD DR ITHACA, NY 14850 16-1450466	REAL ESTATE	NY	CORNELL UNIV	C Corp	18,745	1	100 000 %	Yes	
(3) UNIVERSITY VETERINARY SPECIALISTS INC 800 CANAL ST STAMFORD, CT 06902 27-2461725	VET SERVICES	CT	CORNELL UNIV	C Corp	11,613,944	10,745,603	100 000 %	Yes	
(4) CHARITABLE REMAINDER TRUSTS (42)	INVESTMENT	NY	CORNELL UNIV		0	0	0 %	Yes	
(5) CHARITABLE LEAD TRUST (6)	INVESTMENT	NY	CORNELL UNIV		0	0	0 %	Yes	

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

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

Yes

No

1a

Yes

1b

No

1c

Yes

1d

No

1e

No

1f

Yes

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

Yes

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

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2016

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

[illegible]

Part VII **Supplemental Information**

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

Additional Data

Software ID:
Software Version:
EIN: 15-0532082
Name: Cornell University

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) 6 EAST 44TH ST NEW YORK, NY 10017 16-1301416	SOCIAL CLUB	NY	501(c)(7)	9	CORNELL UNIV	Yes	
(1) 575 LEXINGTON AVE NEW YORK, NY 10022 13-3366821	MEDICAL SERV	NY	501(c)(3)	12d TYPEIII	CORNELL UNIV	Yes	
(2) 15 THORNWOOD DR ITHACA, NY 14850 16-1450535	PROPERTY SERV	NY	501(c)(3)	12d TYPEIII	CORNELL UNIV	Yes	
(3) CORNELL UNIV DAY HALL ITHACA, NY 14850 16-6050703	HOLDS IP PROP	NY	501(c)(2)	9	CORNELL UNIV	Yes	
(4) 130 SENECA PLACE ITHACA, NY 14850 22-2572815	SUPPORT ORG	NY	501(c)(3)	12c TYPEIII	CORNELL UNIV	Yes	
(5) 130 SENECA PLACE ITHACA, NY 14850 22-2848738	SUPPORT ORG	NY	501(c)(3)	12a TYPE I	CORNELL UNIV	Yes	
(6) 575 LEXINGTON AVE NEW YORK, NY 10022 13-3366820	MEDICAL SERV	NY	501(c)(3)	9	CORNELL UNIV	Yes	
(7) 1209 ORANGE ST WILMINGTON, DE 19801 46-1979945	SUPPORT ORG	DE	501(c)(3)	12a TYPE I	CORNELL UNIV	Yes	
(8) 575 LEXINGTON AVENUE SUITE 9TH FL NEW YORK, NY 10022 13-6094042	SUPPORT ORG	NY	501(C)(3)	12A TYPE I	CORNELL UNIV	Yes	
(9) 10 S DEARBORN IL1-0117 CHICAGO, IL 60603 16-1457001	SUPPORT ORG	IL	501(C)(3)	12A TYPE I	CORNELL UNIV	Yes	

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

(a) Name of related organization		(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	UNIVERSITY VETERINARY SPECIALISTS INC	a	307,101	FMV
(1)	UNIVERSITY VETERINARY SPECIALISTS INC	f	700,000	FMV
(2)	CORNELL UNIVERSITY FOUNDATION UK LTD	c	1,343,037	FMV
(3)	UNIVERSITY VETERINARY SPECIALISTS INC	s	5,930,441	FMV
(4)	SAMUEL CURTIS JOHNSON FOUNDATION	c	2,863,286	FMV
(5)	CORNELL REAL PROPERTY SERVICES INC	l	50,000	FMV
(6)	CORNELL UNIVERSITY FOUNDATION	c	10,028,701	FMV
(7)	ECORNELL (TOWERS INNOVATION LEARNING SOL)	A	3,128,746	FMV