Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ 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*

OMB No 1545-0047

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
UNIVERSITY CITY SCIENCE CENTER

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
3711 MARKET STREET 8TH FLOOR

City or town, state or province, country, and ZIP or foreign postal code
PHILADELPHIA, PA 19104

D Employer identification number
23-1645908

E Telephone number
(215) 966-6045

G Gross receipts $ 35,519,176

F Name and address of principal officer
CURTIS M HESS
3711 MARKET STREET SUITE 800
PHILADELPHIA, PA 19104

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 SCIENCECENTER ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1963

M State of legal domicile PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO ACCELERATE TECHNOLOGY COMMERCIALIZATION IN THE GREATER PHILADELPHIA REGION

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	27
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	26
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	80
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	1,720,575	1,342,285
9	Program service revenue (Part VIII, line 2g)	21,569,431	22,565,755
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	64,965	156,386
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	462,830	477,831
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,817,801	24,542,257
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	842,410	415,653
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)	5,444,137	5,802,368
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶729,375		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	18,088,062	17,509,954
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	24,374,609	23,727,975
19	Revenue less expenses Subtract line 18 from line 12	-556,808	814,282
Net Assets or Fund Balances		**Beginning of Current Year**	**End of Year**
20	Total assets (Part X, line 16)	88,627,776	85,155,120
21	Total liabilities (Part X, line 26)	67,396,604	65,428,467
22	Net assets or fund balances Subtract line 21 from line 20	21,231,172	19,726,653

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

****** 2018-08-02
Signature of officer | Date

CURTIS M HESS INTERIM PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
EDWARD S LEONARD	EDWARD S LEONARD			P01261018

Firm's name ▶ EISNERAMPER LLP | Firm's EIN ▶ 13-1639826

Firm's address ▶ 130 NORTH 18TH STREET SUITE 3000 PHILADELPHIA, PA 191032757 | Phone no (215) 881-8800

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

TO ACCELERATE COMMERCIALIZATION OF THE REGION'S MOST PROMISING SCIENCE AND TECHNOLOGY INNOVATIONS, THEREBY PROMOTING TECHNOLOGY-BASED ECONOMIC DEVELOPMENT, COLLABORATION, EDUCATION AND THE CONTINUING REDEVELOPMENT OF THE SCIENCE CENTER CAMPUS IN UNIVERSITY CITY

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 $ 2,832,504 including grants of $ 415,653) (Revenue $ 5,171,672)

See Additional Data

4b (Code) (Expenses $ 1,343,314 including grants of $) (Revenue $ 54,818)

See Additional Data

4c (Code) (Expenses $ 13,140,412 including grants of $) (Revenue $ 17,839,265)

See Additional Data

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses ▶** 17,316,230

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		No
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		No
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	Yes	
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		No
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		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
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? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	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? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
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? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

				Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	123			
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**	80			
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**		No
b If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			**3b**		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**		No
b If "Yes," enter the name of the foreign country ▶______ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		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**		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8 **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
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 **1a** 27 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent **1b** 26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	**5**		No
6	Did the organization have members or stockholders?	**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	**7a**	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	**7b**	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?	**8b**	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*	**9**		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?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	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?	**16a**	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		No

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶ PA , NJ , NY , MD , CA , MA , FL , GA , DC

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 CITY SCIENCE CENTER 3711 MARKET STREET STE 800 PHILADELPHIA, PA 19104 (215) 966-6000

Part VII **Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

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

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

● List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

● List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

● List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations

● List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations

● List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) 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	(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
See Additional Data Table										

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

	(D)	(E)	(F)
1b Sub-Total ▶			
c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c) ▶	2,018,930	855,699	353,416

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 ▶ 6

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	5		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
GDI SERVICESS INC 780 5TH AVE STE 115 KING OF PRUSSIA, PA 19406	JANITORIAL SERVICES	666,695
BELCHER ROOFING CORP 111 COMMERCE DR MONTGOMERYVILLE, PA 18936	CONSTRUCTION SERVICES	425,161
ALLIED BARTON SECURITY SERVICES PO BOX 828854 PHILADELPHIA, PA 19182	SECURITY SERVICES	366,816
LAZ PARKING MIDATLANTIC 15 LEWIS STREET 5TH FLOOR HARTFORD, CT 06103	PARKING MANAGEMENT	222,000
HERMAN GOLDNER & CO INC 7777 BREWSTER AVENUE PHILADELPHIA, PA 19153	CONSTRUCTION SERVICES	184,368

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 ▶ 10

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts						
1a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c	94,450				
d Related organizations	1d					
e Government grants (contributions)	1e	819,966				
f All other contributions, gifts, grants, and similar amounts not included above	1f	427,869				
g Noncash contributions included in lines 1a-1f $						
h **Total.** Add lines 1a-1f . . . ▶			1,342,285			
Program Service Revenue	Business Code					
2a RENTAL INCOME FROM EXEMPT-PURPOSE	532000		17,839,265	17,839,265		
b ~~EQUITY IN JOINT VENTURE PARTNERSH~~	531390		3,125,351	3,125,351		
c ~~INCUBATOR OPERATIONS~~	541900		1,546,321	1,546,321		
d ~~BUSINESS & COMMUNITY NETWORK~~	541900		54,818	54,818		
e						
f All other program service revenue						
g **Total.** Add lines 2a–2f . . . ▶			22,565,755			
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) . . . ▶			163,963			163,963
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties . . . ▶						
	(i) Real	(ii) Personal				
6a Gross rents						
b Less rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) . . . ▶						
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	10,919,423					
b Less cost or other basis and sales expenses	10,927,000					
c Gain or (loss)	-7,577					
d Net gain or (loss) . . . ▶			-7,577			-7,577
8a Gross income from fundraising events (not including $ 94,450 of contributions reported on line 1c) See Part IV, line 18 . . . a		27,750				
b Less direct expenses . . . b		49,919				
c Net income or (loss) from fundraising events . . ▶			-22,169			-22,169
9a Gross income from gaming activities See Part IV, line 19 . . . a						
b Less direct expenses . . . b						
c Net income or (loss) from gaming activities . . ▶						
10a Gross sales of inventory, less returns and allowances . . a						
b Less cost of goods sold . . b						
c Net income or (loss) from sales of inventory . . ▶						
Miscellaneous Revenue	Business Code					
11a CAPITAL CONTRIBUTION TO PHASE 1 V	900099		500,000	500,000		
b						
c						
d All other revenue . . .						
e **Total.** Add lines 11a–11d . . . ▶			500,000			
12 **Total revenue.** See Instructions . . . ▶			24,542,257	23,065,755	0	134,217

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) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	415,653	415,653		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,027,573	895,682	785,381	346,510
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,773,171	1,389,057	1,098,640	285,474
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	238,504	122,822	88,848	26,834
9 Other employee benefits	402,354	208,381	159,476	34,497
10 Payroll taxes	360,766	178,888	145,818	36,060
11 Fees for services (non-employees)				
a Management	10,315	10,315		
b Legal	74,687	17,636	57,051	
c Accounting	133,500	6,200	127,300	
d Lobbying	211,760		211,760	
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,083,571	339,409	744,162	
12 Advertising and promotion	323,410	49,010	274,400	
13 Office expenses	721,485	315,625	405,860	
14 Information technology				
15 Royalties . .				
16 Occupancy	6,815,370	6,452,478	362,892	
17 Travel	94,349	18,091	76,258	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest	2,535,271	2,535,271		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization . .	4,398,540	3,524,396	874,144	
23 Insurance . . .	275,088	204,796	70,292	
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 SECURITY	451,067	449,230	1,837	
b OTHER TAXES	284,248	101,988	182,260	
c MISCELLANEOUS	52,004	49,125	2,879	
d BAD DEBT	45,289	32,177	13,112	
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	23,727,975	17,316,230	5,682,370	729,375
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			9,461,252	1	9,991,973
	2	Savings and temporary cash investments			3,350,196	2	4,891,158
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			2,648,512	4	1,315,204
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	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				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			454,425	9	150,769
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	111,644,506			
	b	Less accumulated depreciation	10b	58,170,486	55,753,583	10c	53,474,020
	11	Investments—publicly traded securities			4,300,738	11	6,736,538
	12	Investments—other securities See Part IV, line 11			3,016,000	12	1,577,056
	13	Investments—program-related See Part IV, line 11			5,625,909	13	4,279,820
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			4,017,161	15	2,738,582
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			88,627,776	16	85,155,120
Liabilities	17	Accounts payable and accrued expenses			2,754,218	17	3,290,558
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	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				22	
	23	Secured mortgages and notes payable to unrelated third parties			61,249,533	23	58,840,084
	24	Unsecured notes and loans payable to unrelated third parties				24	
	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			3,392,853	25	3,297,825
	26	**Total liabilities.** Add lines 17 through 25			67,396,604	26	65,428,467
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			20,312,839	27	19,543,320
	28	Temporarily restricted net assets			918,333	28	183,333
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			21,231,172	33	19,726,653
	34	Total liabilities and net assets/fund balances			88,627,776	34	85,155,120

Part XI Reconcilliation of Net Assets

Check 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	24,542,257
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,727,975
3	Revenue less expenses Subtract line 2 from line 1	3	814,282
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21,231,172
5	Net unrealized gains (losses) on investments	5	-147,282
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	-2,171,519
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	19,726,653

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 23-1645908

Name: UNIVERSITY CITY SCIENCE CENTER

Form 990 (2017)

Form 990, Part III, Line 4a:

SCIENCE & TECHNOLOGYSEE DETAIL SCHEDULE O NARRATIVE

Form 990, Part III, Line 4b:

COMMUNITY ENGAGEMENTSEE DETAIL SCHEDULE O NARRATIVE

Form 990, Part III, Line 4c:

RESEARCH PARKSEE DETAIL SCHEDULE O NARRATIVE

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
DARIO C ALTIERI BOARD MEMBER	1 00	X						0	0	0
KERRY BENSON BOARD MEMBER	0 30	X						0	0	0
M BRIAN BLAKE BOARD MEMBER	0 30	X						0	0	0
KENNETH J BLANK BOARD MEMBER - VICE CHAIRMAN	1 00	X		X				0	0	0
DAWN A BONNELL BOARD MEMBER	0 30	X						0	0	0
CRAIG R CARNAROLI BOARD MEMBER - CHAIRMAN	1 00	X		X				0	0	0
CHRISTOPHER M CASHMAN BOARD MEMBER	0 30	X						0	0	0
ERNEST J DIANASTASIS BOARD MEMBER	0 30	X						0	0	0
MICHAEL A DIPIANO BOARD MEMBER - VICE CHAIRMAN	1 00	X		X				0	0	0
GLEN N GAULTON BOARD MEMBER	0 50	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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
JANE H HOLLINGSWORTH BOARD MEMBER	0 30	X						0	0	0
OSAGIE O IMASOGIE BOARD MEMBER	0 30	X						0	0	0
J LARRY JAMESON BOARD MEMBER	0 30	X						0	0	0
DAVID R KING BOARD MEMBER	0 30	X						0	0	0
STEPHEN K KLASKO BOARD MEMBER	0 30	X						0	0	0
CARL KOPFINGER BOARD MEMBER	1 00	X						0	0	0
KENNETH L KRING BOARD MEMBER	0 50	X						0	0	0
KEITH LEAPHART BOARD MEMBER	0 30	X						0	0	0
WILLIAM J MARRAZZO BOARD MEMBER	0 30	X						0	0	0
MICHELE MASUCCI BOARD MEMBER	0 30	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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
JEREMY NOWAK BOARD MEMBER	0 30	X						0	0	0
KEITH A ORRIS BOARD MEMBER	0 30	X						0	0	0
KATHLEEN M SHAY BOARD MEMBER	1 00	X						0	0	0
STEPHEN SPINELLI JR PHD BOARD MEMBER	0 30	X						0	0	0
STEPHEN TANG PRESIDENT AND CEO (THROUGH 1/31/18)	40 00	X		X				658,713	0	47,410
THOMAS J TODOROW BOARD MEMBER	0 30	X						0	0	0
RICHARD W VAGUE BOARD MEMBER	0 30	X						0	0	0
TARA L WEINER BOARD MEMBER	1 00	X						0	0	0
STEPHEN ZARRILLI BOARD MEMBER	0 30	X						0	0	0
SAUL BEHAR VP & GENERAL COUNSEL, SECRETARY	40 00			X				337,326	0	56,110

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
RACHEL CERVANTES VP OF CORPORATE DEVELOPMENT (EFF 5/1/17)	40 00			X				142,076	0	7,864
CURTIS HESS SENIOR VP REAL ESTATE	10 00 30 00			X				90,930	272,790	59,058
LORRAINE LOPRESTI CFO AND VP OF FIN & ADMIN , TREASURER	20 00 20 00			X				89,783	89,783	25,446
JEANNE MELL VP MKTG/COMMUNICATION & CO	40 00			X				233,245	0	38,915
WENYONG WANG VP OF SCIENCE & TECHNOLOGY (EFF 7/24/17)	40 00			X				99,559	0	780
CHRISTOPHER LAING VP OF SCIENCE & TECHNOLOGY (FORMER)	40 00			X				175,014	0	22,360
RICHARD SOUTHERLAND DIRECTOR OF CONSTRUCTION	1 00 40 00					X		0	122,449	18,606
PETER MELLEY DIRECTOR, NEW VENTURES	40 00					X		128,651	0	12,883
MARY ROBERTSON PROPERTY MANAGER	1 00 40 00					X		0	139,910	28,710
JEFFERY ANDREWS SENIOR PROPERTY MANAGER	1 00 40 00					X		0	167,134	17,726

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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
CLAYTON MORAVEC III CORPORATE CONTROLLER	20 00 20 00					X		63,633	63,633	17,548

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
UNIVERSITY CITY SCIENCE CENTER

Employer identification number
23-1645908

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 **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 331/3% 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 331/3% 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? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170 (b)(1)(A)(ix)**
(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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) | 12 |

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2016 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2017.** 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—2016.** 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—2017.** 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—2016.** 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	1,233,705	2,332,245	4,605,546	1,720,575	1,342,285	11,234,356
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	18,757,011	21,368,957	22,673,873	21,569,431	22,565,755	106,935,027
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	19,990,716	23,701,202	27,279,419	23,290,006	23,908,040	118,169,383
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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	11,136,550	11,821,274	13,158,257	12,669,187	13,066,628	61,851,896
c Add lines 7a and 7b	11,136,550	11,821,274	13,158,257	12,669,187	13,066,628	61,851,896
8 **Public support.** (Subtract line 7c from line 6)						56,317,487

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6	19,990,716	23,701,202	27,279,419	23,290,006	23,908,040	118,169,383
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	180,442	145,181	146,048	90,931	163,963	726,565
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	180,442	145,181	146,048	90,931	163,963	726,565
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)			1,000,000	500,000	500,000	2,000,000
13 **Total support.** (Add lines 9, 10c, 11, and 12)	20,171,158	23,846,383	28,425,467	23,880,937	24,572,003	120,895,948

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 2017 (line 8, column (f) divided by line 13, column (f))	15	46 580 %
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	47 460 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	0 600 %
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	0 600 %

19a **331/3% support tests—2017.** 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—2016.** 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? *If "No," describe in **Part VI** how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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? *If "Yes," provide detail in **Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	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? *If "Yes," provide detail in **Part VI.***	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)? *If "Yes," answer line 10b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
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? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard*	**3b**		

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) **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 ☐ 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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 **Excess distributions carryover to 2018.** Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

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

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	CAPITAL CONTRIBUTION TO PHASE 1 VENTURES - 2015 AMOUNT $ 1,000,000 2016 AMOUNT $ 500,000 2017 AMOUNT $ 500,000

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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

2017

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	Employer identification number
UNIVERSITY CITY SCIENCE CENTER	23-1645908

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 (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ $

3 Volunteer hours for political campaign activities (see instructions)

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? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ 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? ☐ Yes ☐ 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-
1					
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

		(a)	(b)
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)** 2014	**(b)** 2015	**(c)** 2016	**(d)** 2017	**(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) Yes	(a) No	(b) 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)?		No	
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?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		211,759
j	Total Add lines 1c through 1i			211,759
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).**		
a	Current year	**2a**	
b	Carryover from last year	**2b**	
c	Total	**2c**	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	**3**	
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?	**4**	
5	Taxable amount of lobbying and political expenditures (see instructions)	**5**	

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
PART II-B, LINE 1	THE UNIVERSITY CITY SCIENCE CENTER UTILIZED THE SERVICES OF CONSULTANTS TO ASSIST IN THE PROCUREMENT OF PUBLIC SECTOR FUNDING TO SUPPORT ITS PROGRAMS AND CAPITAL PROJECTS THE CONSULTANTS POSITIONED UCSC TO RECEIVE FUNDING, PRIMARILY THROUGH DIRECT GRANTS

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

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

2017

Open to Public Inspection

Name of the organization
UNIVERSITY CITY SCIENCE CENTER

Employer identification number
23-1645908

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? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

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

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

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

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

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, 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)? ☐ Yes ☐ No

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

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

Complete if the organization answered "Yes" 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 ▶ $ ____________

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

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

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

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

a ☐ Public exhibition
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other
c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No**

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" 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**

			Amount
b	If "Yes," explain the arrangement in Part XIII and complete the following table		
c	Beginning balance	**1c**	
d	Additions during the year	**1d**	
e	Distributions during the year	**1e**	
f	Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ **Yes** ☐ **No**

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

Part V **Endowment Funds.** Complete if the organization answered "Yes" 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	247,385	239,353	234,167	227,194	206,908
b Contributions . . .					
c Net investment earnings, gains, and losses	37,530	8,032	5,186	6,973	20,286
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .					
f Administrative expenses					
g End of year balance	284,915	247,385	239,353	234,167	227,194

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

a Board designated or quasi-endowment ▶ 100 000 %

b Permanent endowment ▶

c Temporarily restricted endowment ▶

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

		Yes	**No**
(i) unrelated organizations	**3a(i)**		No
(ii) related organizations	**3a(ii)**		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

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		5,212,637		5,212,637
b Buildings		101,609,591	54,360,800	47,248,791
c Leasehold improvements				
d Equipment		4,185,232	3,809,686	375,546
e Other		637,046		637,046
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* . . ▶				53,474,020

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

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' 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)INVESTMENTS - PROGRAM RELATED	4,279,820	F
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶	4,279,820	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEPOSITS & OTHER CURRENT LIAB	1,087,499
OTHER LONG TERM LIABILITIES	2,210,326
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	3,297,825

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	22,126,660
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	1,366,139		
e	Add lines **2a** through **2d**			2e	1,366,139
3	Subtract line **2e** from line **1**			3	20,760,521
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	3,781,737		
c	Add lines **4a** and **4b**			4c	3,781,737
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	24,542,258

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	27,265,274
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	3,537,299		
e	Add lines **2a** through **2d**			2e	3,537,299
3	Subtract line **2e** from line **1**			3	23,727,975
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	23,727,975

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: 23-1645908
Name: UNIVERSITY CITY SCIENCE CENTER

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	DEVELOPMENT FUND INCOME IS ALLOCATED FOR USE IN SCIENCE CENTER OPERATIONS THE FUND IS AVA ILABLE TO SUPPORT WORKING CAPITAL, DEVELOPMENT AND CAPITAL PURPOSES THE ESTHER M KLEIN E NDOWMENT FUND SUPPORTS KLEIN GALLERY (EKG) OPERATIONS THROUGH STEAM PROGRAMMING, IN AN EFF ORT TO PROMOTE ART AND SCIENCE AND ART EDUCATION TO THE SURROUNDING PHILADELPHIA COMMUNITY

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE SCIENCE CENTER IS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL RE VENUE CODE, ALTHOUGH ITS CONSOLIDATED ENTITIES, THE PARK, PTI, PIV, AND SCEC, ARE FOR PROF IT ENTITIES WHICH ARE SUBJECT TO INCOME TAXES TOTAL FEDERAL AND STATE INCOME TAX EXPENSE FROM THE CONSOLIDATED ENTITIES WAS $180,000 AND $0 FOR THE YEARS ENDED DECEMBER 31, 2017 A ND 2016, RESPECTIVELY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AM ERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN AND RECOGNIZE A TAX LIABILITY, IF THE CENTER HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUS TAINED UPON EXAMINATION BY A GOVERNMENT AUTHORITY MANAGEMENT HAS ANALYZED THE TAX POSITIO NS TAKEN BY THE CENTER, AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2017 OR 2016, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A L IABILITY OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS THE CENTER WOULD RECOGNIZ E FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AND LIABILITI ES IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	REVENUE OF CONSOLIDATED SUBSIDIARIES 996,220 QED MATCH 320,000 DIRECT FUNDRAISING EXPENSES 49,919

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	EQUITY IN NET EARNINGS (LOSS) OF JV'S 3,125,351 INVESTMENT INCOME 163,963 REALIZED LOSS ON SALE OF INVESTMENTS -7,577 CONTRIBUTIONS TO PHASE 1 VENTURES 500,000

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENDITURES OF CONSOLIDATED SUBSIDIARIES 3,167,380 QED PROGRAM MATCH 320,000 DIRECT FUNDRAISING EXPENSES 49,919

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

2017

Open to Public Inspection

Name of the organization
UNIVERSITY CITY SCIENCE CENTER

Employer identification number
23-1645908

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
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ 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? Yes	No	**(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
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

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

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.

		(a) Event #1 NUCLEUS EVENT (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	122,200			122,200
	2 Less Contributions	94,450			94,450
	3 Gross income (line 1 minus line 2)	27,750			27,750
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	4,181			4,181
	7 Food and beverages	24,651			24,651
	8 Entertainment				
	9 Other direct expenses	21,087			21,087
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				49,919
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-22,169

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.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ 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? ☐ **Yes** ☐ **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? ☐ **Yes** ☐ **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? ☐ **Yes** ☐ **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 ▶

☐ Director/officer ☐ Employee ☐ 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? ☐ Yes ☐ 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 provide any additional information (see instructions).

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493218002018

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

2017

Open to Public Inspection

Name of the organization
UNIVERSITY CITY SCIENCE CENTER

Employer identification number
23-1645908

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 noncash assistance	**(h)** Purpose of grant or assistance
(1) See Additional Data							
(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 . . . . . ▶ 3

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 5

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(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
PART I, LINE 2	GRANT FUNDS MONITORING AT UCSC IS AN ORGANIZATION-WIDE ENDEAVOR THE GRANT PROCESS IS COORDINATED FROM APPLICATION THROUGH CLOSE OUT WITH OVERSIGHT PROVIDED BY AN EXECUTIVE STAFF MEMBER AWARD DOCUMENTATION AND APPLICABLE LAWS ARE REVIEWED TO ENSURE COMPLIANCE WITH THE TERMS AND CONDITIONS OF THE AWARD IN INSTANCES WHERE THE SCIENCE CENTER GRANTS SUB-AWARDS, THE SCIENCE CENTER RESERVES THE RIGHT TO REQUEST PROOF OF EXPENDITURE AS WELL AS SUPPORTING DOCUMENTATION TO SUBSTANTIATE EXPENSES FROM THE SUB-RECIPIENT REPORTING REQUIREMENTS ARE COORDINATED IN CONJUNCTION WITH THE ASSIGNED EXECUTIVE UPON TERMINATION OF THE AWARD, ALL REQUIRED CLOSE OUT MATERIALS ARE SUBMITTED

Additional Data

Software ID:
Software Version:
EIN: 23-1645908
Name: UNIVERSITY CITY SCIENCE CENTER

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
ROWAN UNIVERSITY 201 MULLICA HILL ROAD GLASSBORO, NJ 08028	22-2764819	501(C)(3)	100,000				QED PROOF OF CONCEPT FUNDING
THE PENNSYLVANIA STATE UNIVERSITY 500 UNIVERSITY DRIVE HERSHEY, PA 17033	24-6000376	501(C)(3)	100,000				QED PROOF OF CONCEPT FUNDING

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
HOSPITAL UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	100,000				QED PROOF OF CONCEPT FUNDING
IMMERGE LABS LLC 3401 GRAYS FERRY AVE BLDG 176-1004 PHILADELPHIA, PA 19146	81-4724734	N/A	25,000				DIGITAL HEALTH ACCELERATOR FUNDING

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
REGDESK INC 3401 MARKET STREET SUITE 200 PHILADELPHIA, PA 19104	46-5749922	N/A	25,000				DIGITAL HEALTH ACCELERATOR FUNDING
REPISODIC INC 614 S 4TH STREET NUM 112 PHILADELPHIA, PA 19147	82-1095813	N/A	25,000				DIGITAL HEALTH ACCELERATOR FUNDING

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
PAINQX INC 1 YORKTOWN CIRCLE KENNETT SQUARE, PA 19348	47-4331446	N/A	25,000				DIGITAL HEALTH ACCELERATOR FUNDING
ONE HEALTH 3401 MARKET STREET SUITE 201 PHILADELPHIA, PA 19104	81-1182918	N/A	15,143				DIGITAL HEALTH ACCELERATOR FUNDING

Schedule J (Form 990)

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.

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
UNIVERSITY CITY SCIENCE CENTER

Employer identification number
23-1645908

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☑ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
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	1b	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?	2	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 ☐ Compensation committee ☑ Independent compensation consultant ☐ Form 990 of other organizations ☑ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
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?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		No
	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?	5a		No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	5b		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?	6a		No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	6b		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

For each individual whose compensation must be reported 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				
1 STEPHEN TANG PRESIDENT AND CEO (THROUGH 1/31/18)	(i)	423,330	204,160	31,223	28,584	18,826	706,123	0
	(ii)	0	0	0	0	0	0	0
2 SAUL BEHAR VP & GENERAL COUNSEL, SECRETARY	(i)	245,675	90,942	709	34,187	21,923	393,436	0
	(ii)	0	0	0	0	0	0	0
3 CURTIS HESS SENIOR VP REAL ESTATE	(i)	66,890	23,849	191	9,284	5,480	105,694	0
	(ii)	200,671	71,547	572	27,851	16,443	317,084	0
4 LORRAINE LOPRESTI CFO AND VP OF FIN & ADMIN , TREASUR	(i)	80,733	8,930	120	8,860	3,863	102,506	0
	(ii)	80,733	8,930	120	8,860	3,863	102,506	0
5 JEANNE MELL VP MKTG/COMMUNICATION & CO	(i)	168,686	63,585	974	24,160	14,755	272,160	0
	(ii)	0	0	0	0	0	0	0
6 CHRISTOPHER LAING VP OF SCIENCE & TECHNOLOGY (FORMER)	(i)	101,597	67,611	5,806	17,186	5,174	197,374	0
	(ii)	0	0	0	0	0	0	0
7 MARY ROBERTSON PROPERTY MANAGER	(i)	0	0	0	0	0	0	0
	(ii)	133,135	6,657	118	12,948	15,762	168,620	0
8 JEFFERY ANDREWS SENIOR PROPERTY MANAGER	(i)	0	0	0	0	0	0	0
	(ii)	150,750	15,075	1,309	16,240	1,486	184,860	0

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
PART I, LINE 1A	THE SCIENCE CENTER REIMBURSES THE DUES OF THE PRESIDENT/CEO OF THE CENTER PAID TO THE UNION LEAGUE OF PHILADELPHIA THIS ORGANIZATION INCLUDES AS MEMBERS MANY TOP LEADERS IN BUSINESS, LAW, ACADEMIA, ETC , PROVIDING FACILITIES AND RESOURCES FOR NETWORKING, MEETINGS, AND KNOWLEDGE ENHANCEMENT MEMBERSHIP IN THE LEAGUE FOSTERS DEVELOPMENT AND ENHANCEMENT OF RELATIONSHIPS WITH RESOURCES AND INDIVIDUALS VITAL TO THE CONTINUATION AND GROWTH OF THE CENTER'S PROGRAMS AND GOALS
PART I, LINE 3	SEE SCHEDULE O NARRATIVE - FORM 990, PART VI, SECTION B, LINE 15
PART I, LINE 4B	SECTION 457(F) DEFERRED COMPENSATION PLAN ACCRUED CONTRIBUTION APPLICABLE TO OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES LISTED ON SCHEDULE J TOTALED $114,000 FOR THE YEAR ENDED DECEMBER 31, 2017

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization	Employer identification number
UNIVERSITY CITY SCIENCE CENTER	23-1645908

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	SCIENCE & TECHNOLOGY QED PROOF OF CONCEPT PROGRAM IN EARLY 2009 THE SCIENCE CENTER LAUNCHE D THE NATION'S FIRST MULTI-INSTITUTIONAL PROOF-OF-CONCEPT PROGRAM TO FUND AND PROMOTE THE DEVELOPMENT AND COMMERCIALIZATION OF EARLY-STAGE LIFE SCIENCE TECHNOLOGIES AT ACADEMIC RES EARCH INSTITUTIONS THIS PROGRAM - NAMED "QED", AFTER THE LATIN PHRASE QUOD ERAT DEMONSTRA NDUM ("THAT WHICH MUST BE DEMONSTRATED") - PROVIDES BUSINESS DEVELOPMENT AND FUNDING SUPPO RT FOR ACADEMIC RESEARCHERS THROUGHOUT PENNSYLVANIA, NEW JERSEY AND DELAWARE BY SUPPORTING EARLY-STAGE LIFE SCIENCE R&D WITH HIGH COMMERCIAL POTENTIAL AS ANGEL INVESTORS, VENTURE CAPITALISTS, AND ESTABLISHED COMPANIES INCREASINGLY INVEST IN LATER-STAGE ENTERPRISES, FIN DING EARLY-STAGE FUNDING TO ACCELERATE INNOVATION HAS BECOME MORE DIFFICULT QED ASSISTS P ROMISING RESEARCHERS IN BRIDGING THE GAP - OFTEN REFERRED TO AS THE "VALLEY OF DEATH" - BE TWEEN PUBLICLY FUNDED LABORATORY RESEARCH AND PRIVATELY-FUNDED TECHNOLOGY COMMERCIALIZATIO N AND PRODUCT DEVELOPMENT QED LEVERAGES THE SCIENCE CENTER'S RELATIONSHIPS WITH UNIVERSIT IES, GOVERNMENT AGENCIES, AND PUBLIC AND PRIVATE COMPANIES, DRIVING TECHNOLOGY TRANSFER AN D NEW BUSINESS FORMATION, ADVANCING ENTREPRENEURSHIP, AND ENCOURAGING INNOVATION, COMPETIT IVENESS, AND KNOWLEDGE-BASED RETENTION AND EXPANSION THE PROGRAM'S KEY GOAL IS TO MARSHAL EXISTING REGIONAL RESOURCES TO SUBSTANTIALLY REDUCE INVESTMENT RISK IN BOTH EARLY-STAGE L IFE SCIENCE AND DIGITAL HEALTH R&D PROJECTS, PREPARING THEM FOR ESTABLISHED HEALTH CARE CO MPANIES AND PRIVATE INVESTORS, WITHOUT ADDING TO THE PROLIFERATION OF SUB-SCALE, UNDERCAPI TALIZED VENTURES ALREADY IN THE MARKET BY ENGAGING THE REGION'S ACADEMIC INSTITUTIONS, RE SEARCH SCIENTISTS, ENTREPRENEURS, INVESTORS, AND INDUSTRY STAKEHOLDERS IN EARLY-STAGE COMM ERCIALIZATION, THE SCIENCE CENTER SEEKS TO INCREASE THE PACE AND VALUE OF TECHNOLOGY TRANS FER IN THE REGION QED GOES BEYOND A TYPICAL GAP FUND IN TWO PRIMARY RESPECTS THAT CAN BE APPLIED TO ANY RESEARCH AREA FIRST, IT ADDS COMMERCIAL GUIDANCE AS A CRITICAL, EARLY COMP ONENT THIS GUIDANCE TAKES THE FORM OF BUSINESS ADVISORS, SPECIALIST CONSULTANTS (E G , PA TENT LAWYERS, REGULATORY EXPERTS, AND MEDICAL REIMBURSEMENT CONSULTANTS), TECHNICAL AND CL INICAL REVIEW OF TECHNOLOGY BY OUTSIDE REVIEWERS, AND MARKET-BASED SCREENING AND SELECTION SECOND, IT PROMOTES COMPETITIVE PARTICIPATION BY A LARGE NUMBER OF RESEARCH INSTITUTIONS , INCORPORATING TRANSPARENT PROCESSES AND IDENTIFYING PROJECTS WITH THE GREATEST COMMERCIA L POTENTIAL CURRENTLY, A TOTAL OF 21 RESEARCH INSTITUTIONS IN PENNSYLVANIA, NEW JERSEY AN D DELAWARE PARTICIPATE IN THE PROGRAM PROJECTS ARE REVIEWED, PRIORITIZED, AND RECOMMENDED FOR FUNDING BY A SELECTION TEAM COMPRISED EXCLUSIVELY OF PROFESSIONALS WHO WORK IN VENTUR E CAPITAL AND INDUSTRY, REPRESENTING NUMEROUS REGIONAL AND NATIONAL FIRMS AND COMPANIES P ARTICIPATING ACADEMIC INSTITUTIONS, INVESTORS, AND COMPANIES ARE LISTED AT HTTP //WWW SCIE NCECENTER ORG/DISCOVER/QED EA

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Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	CH PROJECT SELECTED FOR FUNDING RECEIVES UP TO $200,000 OVER 12 MONTHS, WITH HALF OF THE F UNDING PROVIDED BY THE SCIENCE CENTER AND THE OTHER HALF BY THE SCIENTIST'S HOST INSTITUTI ON CONTINUED FUNDING DURING THE PROJECT IMPLEMENTATION PHASE IS CONDITIONAL UPON SATISFYI NG THE OBJECTIVES OUTLINED IN THE R&D PLAN, ACCORDING TO MILESTONES AND SCHEDULE THE QED STAFF MEETS REGULARLY WITH THE PROJECT TEAMS, AND THE INVESTIGATORS PROVIDE PERIODIC PROGR ESS UPDATES ON RESEARCH AND COMMERCIALIZATION ACTIVITIES DURING THIS PHASE, THE QED STAFF ALSO ASSISTS WITH THE IDENTIFICATION AND PURSUIT OF APPROPRIATE SOURCES OF FOLLOW-ON FUND ING FOR SUCCESSFUL PROJECTS THAT EXIT THE PROGRAM THROUGH 10 FUNDING CYCLES, QED HAS AWAR DED AN AGGREGATE OF MORE THAN $6 MILLION TO 31 PROJECTS AT RESEARCH INSTITUTIONS THROUGHOU T THE TRI-STATE AREA THE PROGRAM HAS FACILITATED THE FORMATION OF EIGHT STARTUP COMPANIES AND THE LICENSING OF 10 TECHNOLOGIES IN ADDITION, 13 PROJECTS HAVE LEVERAGED A TOTAL OF $22 MILLION IN FOLLOW-ON FUNDING PHASE 1 VENTURES (P1V) P1V IS A TECHNOLOGY ACCELERATOR F OR NEW BUSINESS FORMATION AND GROWTH FOR ACADEMIC INSTITUTIONS SEEKING TO COMMERCIALIZE T ECHNOLOGIES THROUGH NEW STARTUPS, P1V IS A TURNKEY APPROACH TO THE MARKET-DRIVEN CREATION AND DEVELOPMENT OF NEW INVESTIBLE COMPANIES P1V PROVIDES STRATEGIC FUNDING, INDEPENDENT P ROVEN MANAGEMENT, CORPORATE STRUCTURE AND RESOURCES THAT AVOID INSTITUTIONAL CONFLICT OF I NTEREST, AND CONNECTIONS TO NETWORKS OF ENTREPRENEURS, INVESTORS, AND INDUSTRY PARTNERS T ECHNOLOGIES WITH COMMERCIAL PROMISE ARE SELECTED AND NURTURED FOR THE PREPARATION OF COMPE TITIVE GRANT APPLICATIONS PROJECTS THAT SECURE SBIR/STTR FUNDING THROUGH P1V ARE ELIGIBLE FOR ADDITIONAL SUPPORT AND SERVICES, INCLUDING SUPPLEMENTARY FUNDING, MANAGEMENT AND ADVI SORY EXPERTISE, AND PHYSICAL SPACE THE GOAL FOR EACH OF THESE "PHASE 1" PROJECTS IS TO CO MPLETE RESEARCH MILESTONES, VALIDATE MARKET OPPORTUNITIES, AND PREPARE AND SUBMIT A COMPET ITIVE "PHASE 2" SBIR/STTR APPLICATION P1V IS A MANAGED, STANDARDIZED, MULTI-INSTITUTIONAL PROCESS THAT LAUNCHES NEW COMPANIES IN A COST-EFFICIENT MANNER, LEVERAGING FEDERAL SBIR/S TTR FUNDING P1V TESTS THE SCIENTIFIC AND MARKET FEASIBILITY OF TECHNOLOGIES FOR NEW COMPA NY FORMATION AND LAUNCH, THEREBY ENHANCING THE ABILITY OF THESE PROJECTS TO ATTRACT GRANTS AND PRIVATE SECTOR INVESTMENT P1V PROVIDES ACCESS TO STRATEGIC FUNDING, INDEPENDENT MANA GEMENT, CORPORATE STRUCTURE AND RESOURCES THAT AVOID INSTITUTIONAL CONFLICTS OF INTEREST, PROVEN EXPERTISE IN EARLY PRODUCT DEVELOPMENT AND PROJECT MANAGEMENT, AND CONNECTIONS TO N ETWORKS OF ENTREPRENEURS, INVESTORS, AND INDUSTRY PARTNERS THROUGH P1V, THE SCIENCE CENTE R IS CAPITALIZING ON AND EXPANDING ITS DEEP RELATIONSHIPS WITH UNIVERSITIES AND HEALTHCARE INSTITUTIONS THROUGHOUT THE TRI-STATE AREA AND BEYOND, IN ORDER TO FACILITATE MORE (AND B ETTER) START-UP COMPANY FORMATION THAT WILL ULTIMATELY LEAD TO ECONOMIC GROWTH AND JOB CRE ATION AS A PUBLIC-PRIVATE PAR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS	TNERSHIP, P1V WILL BE ECONOMICALLY VIABLE BECAUSE IT LEVERAGES SBIR/STTR FUNDING AND AGGRE GATE RESOURCES THAT CAN BE SHARED AMONG SEVERAL PROJECTS, CREATING ECONOMIES OF SCALE AS A COLLABORATIVE PLATFORM, P1V PROVIDES GREATER OPPORTUNITIES FOR INVENTORS, INSTITUTIONS, ENTREPRENEURS AND INVESTORS TO FORM AND GROW SPINOUT COMPANIES AROUND EARLY-STAGE TECHNOLO GIES WITH HIGH COMMERCIAL POTENTIAL SINCE THE INCEPTION OF THE PROGRAM, P1V HAS COMMITTED A TOTAL OF MORE THAN $1 9 MILLION OF FUNDING TO 28 COMPANIES, THESE COMPANIES HAVE SUBSEQ UENTLY ATTRACTED A TOTAL OF CLOSE TO $2 4 MILLION OF NON-DILUTIVE FUNDING, PLUS A TOTAL OF $1 MILLION OF FOLLOW-ON INVESTMENT FOURTEEN RESEARCH INSTITUTIONS ARE REPRESENTED IN THE PROGRAM THE PORT BUSINESS INCUBATOR THE SCIENCE CENTER'S PORT BUSINESS INCUBATOR HOUSES AND FACILITATES THE GROWTH OF EARLY-STAGE TECHNOLOGY COMPANIES SINCE THE SCIENCE CENTER'S INCEPTION IN 1963, GRADUATE ORGANIZATIONS AND CURRENT RESIDENTS OF THE INCUBATOR HAVE SUP PORTED MORE THAN 40,000 DIRECT AND INDIRECT JOBS THAT REMAIN IN THE GREATER PHILADELPHIA R EGION TODAY AND CONTRIBUTE MORE THAN $13 BILLION TO THE REGIONAL ECONOMY ANNUALLY THE POR T PROVIDES FACILITATED ACCESS TO AN INNOVATION ENVIRONMENT OF ADVISORY SERVICES, BUSINESS SERVICES, ACADEMIC RESOURCES AND EXPERTISE, AND A 30,000-SQUARE-FOOT BUSINESS INCUBATOR FA CILITY PORT COMPANIES BENEFIT FROM THE SCIENCE CENTER'S BUSINESS ADVISORY COMMUNITY OF PR OVEN ENTREPRENEURIAL MENTORS, AND THE SCIENCE CENTER'S SCIENTIFIC ADVISORY COMMITTEE COMPR ISING THE SENIOR RESEARCH OFFICERS AT THE REGION'S LEADING RESEARCH INSTITUTIONS COMPANIE S ARE HOUSED WITHIN A PLUG-AND-PLAY, STATE-OF-THE-ART OFFICE AND LABORATORY FACILITY ABLE TO ACCOMMODATE UP TO 150 PERSONNEL RESIDENTS HAVE ACCESS TO EDUCATIONAL AND NETWORKING EV ENTS, BROADBAND CONNECTIVITY, SHARED LABORATORY AND OFFICE EQUIPMENT, AND SHARED CONFERENC E FACILITIES PORT MANAGERS SUPPORT THE INCUBATION PROCESS, ASSISTING RESIDENTS WITH INDIV IDUAL GROWTH NEEDS AND FACILITATING THEIR "GRADUATION" FROM THE PORT TYPICAL RESIDENTS HA VE SEED-STAGE TO SERIES A CAPITAL AND 1-25 EMPLOYEES THE PORT FLEXIBLY ACCOMMODATES THE C HANGING NEEDS OF EMERGING, FAST-GROWTH COMPANIES BY OFFERING FOOTPRINTS FROM VIRTUAL THROU GH SINGLE DESK, TO SINGLE-, DOUBLE- OR TRIPLE-OCCUPANCY OFFICE SPACE, AND A RANGE OF LAB S PACE TO ACCOMMODATE 1 - 16 RESEARCHERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	IN FURTHERING THEIR ADVANCEMENT OF SCIENCE, THE INCUBATOR COMPANIES' WORK ENCOMPASSES INNO VATIONS IN THERAPEUTICS, MEDICAL DEVICES, DIAGNOSTICS, RESEARCH TOOLS, BIOINFORMATICS, NAN OTECHNOLOGY, INFORMATION TECHNOLOGY, AND CLEAN ENERGY BASED ON ITS INITIAL SUCCESS AS AN "INCUBATOR OF INCUBATORS," THE PORT HAS CONTINUED TO HOST A NUMBER OF PROGRAMS ON BEHALF O F ACADEMIC INSTITUTIONS, CORPORATIONS, AND GOVERNMENT ORGANIZATIONS WHICH ARE SEEKING FLEX IBLE WAYS TO INCUBATE THEIR OWN BUSINESS VENTURES PORT STAFF CONTINUES TO SEEK OPPORTUNIT IES TO PARTNER AND COLLABORATE WITH DOMESTIC AND FOREIGN ORGANIZATIONS IN BUSINESS INCUBAT ION AND ACCELERATION INNOVATION CENTER @3401 LOCATED AT 3401 MARKET STREET, THE INNOVATIO N CENTER @3401 IS THE LARGEST GROUP OF FUNDED EARLY-STAGE TECH COMPANIES IN PHILADELPHIA A COLLABORATION BETWEEN THE SCIENCE CENTER AND DREXEL UNIVERSITY, IC@3401 IS ALSO HOME TO DREAMIT VENTURES & CHARACTER LAB OPENED IN 2014, THIS SYNERGISTIC PROGRAM SUPPORTS INNOVA TION, COLLABORATION, AND BUSINESS CREATION, IT IS AN INTEGRATED COMMUNITY DESIGNED TO HELP ENTREPRENEURS GO FROM AN IDEA TO A BUSINESS PROJECTS THAT ENTER AS TEAMS OF 2 TO 3 GRADU ATE AS TEAMS OF 8 TO 12, HAVING OBTAINED THEIR FIRST REVENUES, HIRED THEIR FIRST EMPLOYEES , AND RAISED THEIR FIRST CAPITAL THE INNOVATION CENTER @3401 BUILDS UPON THE SUCCESS OF D REXEL'S EXCITE CENTER AND THE SCIENCE CENTER'S LONG AND IMPACTFUL TRADITION OF INCUBATING STARTUPS AND CONVENING COMMUNITIES AROUND INNOVATION AND ENTREPRENEURSHIP IC@3401 CURRENT LY HAS 41 MEMBER COMPANIES, IN 2017, 26 MEMBER COMPANIES RAISED OVER $16 MILLION OF FUNDIN G AND INVESTMENT DIGITAL HEALTH ACCELERATOR LAUNCHED IN 2014, THE DIGITAL HEALTH ACCELERA TOR FOCUSES ON COMPANIES DEVELOPING A HEALTHCARE PRODUCT COMPRISING A DIGITAL COMPONENT T O BE ELIGIBLE, COMPANIES MUST HAVE A PRODUCT THAT IS AT LEAST AT PROTOTYPE STAGE AND READY TO BEGIN COMMERCIAL DEVELOPMENT THE DIGITAL HEALTH ACCELERATOR PROVIDES FUNDING, MENTORS HIP (INTELLECTUAL PROPERTY, SALES AND MARKETING, REGULATORY, FUNDRAISING ETC), WARM INTRO DUCTIONS, AND A FLEXIBLE WORKPLACE FOR PARTICIPANTS TO DATE, THE COMPANIES IN THE PROGRAM HAVE CREATED MORE THAN 180 JOBS, GENERATED SALES REVENUES OF MORE THAN $20 7 MILLION, AND ATTRACTED INVESTMENTS OF MORE THAN $46 4 MILLION UCITY SQUARE AS THE SCIENCE CENTER HAS EXPANDED ITS IMPACT AND FOOTPRINT, WE'VE ADAPTED AND EXPANDED OUR OPERATIONS AS WELL THE CAMPUS THAT THE SCIENCE CENTER HAS BUILT OVER THE LAST 50+ YEARS IS NOW KNOWN AS UCITY SQU ARE, A MIXED-USE COMMUNITY THAT WE'RE CONTINUING TO DEVELOP IN PARTNERSHIP WITH WEXFORD SC IENCE + TECHNOLOGY UCITY SQUARE REFERS TO OUR EXISTING PHYSICAL ASSETS, AS WELL AS THE PL ANNED ADDITIONAL 4 MILLION SQUARE FEET OF OFFICE, LAB, RESIDENTIAL AND RETAIL THE GROWTH OF UCITY SQUARE AS A PHYSICAL DEVELOPMENT LEVERAGES THE SCIENCE CENTER'S VISION OF PHILADE LPHIA AS A GLOBAL INNOVATION CITY, BY PROVIDING MORE SPACE FOR COMPANIES TO GROW AND SCALE , MORE COMMUNITY MEMBERS TO IN

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	TERACT AND COLLABORATE WITH, AND MORE OPPORTUNITIES FOR PROGRAMMING, EDUCATION, ACCESS, AN D INCLUSION AT UCITY SQUARE, THE SCIENCE CENTER WILL CONTINUE TO EXPAND UPON ITS 50+ YEAR LEGACY OF SUPPORTING INNOVATION, ENTREPRENEURSHIP, AND TECHNOLOGY-BASED ECONOMIC DEVELOPM ENT UCITY SQUARE IS THE PLACE FOR INNOVATION TO HAPPEN - AND THE SCIENCE CENTER IS THE NU CLEUS THAT MAKES IT ALL POSSIBLE

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Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	COMMUNITY ENGAGEMENT THE SCIENCE CENTER SUPPORTS THE COMMUNITY THROUGH A VARIETY OF PROGRA MS AND PARTNERSHIPS, INCLUDING QUORUM, THE REGIONAL AFFINITY INCUBATION NETWORK (RAIN), ED UCATION INITIATIVES SUCH AS OUR FIRSTHAND PROGRAM, AND THE UNIVERSITY CITY KEYSTONE INNOVA TION ZONE (UC KIZ) STEAM (SCIENCE, TECHNOLOGY, ENGINEERING, ART AND MATH) THE SCIENCE CEN TER'S STEAM PROGRAMMING ADDS ART TO THE STEM SUBJECTS OF SCIENCE, TECHNOLOGY, ENGINEERING AND MATH, TO CREATE PROJECT-BASED PROGRAMS AND WORKSHOPS THAT EMPOWER INDIVIDUALS AND CONV ENE COMMUNITIES AROUND CREATIVE APPLICATIONS OF TECHNOLOGY MANY OF OUR STEAM OFFERINGS FO CUS ON REACHING AT-RISK YOUTH, PRIMARILY IN THE NEIGHBORHOODS SURROUNDING THE SCIENCE CENT ER'S WEST PHILADELPHIA CAMPUS, WHILE OTHERS ARE OPEN TO ALL MEMBERS OF THE COMMUNITY OUR GOAL IS TO SPARK AND NURTURE A LIFELONG INTEREST IN THE STEM DISCIPLINES AND LOWER THE BAR RIERS TO ENTRY FOR THOSE SEEKING A CAREER IN A STEM-RELATED FIELD EQUAL PARTS SCIENCE, TE CHNOLOGY, ENGINEERING, ART AND MATH, THE SCIENCE CENTER'S FIRSTHAND INITIATIVE PROVIDES PH ILADELPHIA'S CURIOUS MINDS ACCESS TO THE KNOWLEDGE AND RESOURCES OF THE SCIENCE CENTER BY FUELING DISCOVERY AND EXPLORATION WITH INTERACTIVE PROGRAMMING, WE ARE OPENING THE DOORS FOR THE MINDS OF TOMORROW USING A COMBINATION OF HIGH- AND LOW-TECH TOOLS PAIRED WITH HAN DS-ON PROJECT-BASED LEARNING OPPORTUNITIES, FIRSTHAND OFFERS YEAR-ROUND PROGRAMMING TO YOU TH FREE OF CHARGE MAKING THE FIRSTHAND EXPERIENCE UNIQUE IS THE LOCATION IN A PROFESSIONA L SCIENCE/BUSINESS ENVIRONMENT, DEMONSTRATIONS IN THE LABS OF COMPANIES WORKING ON THE SCI ENCE CENTER CAMPUS, AND MENTORSHIP OPPORTUNITIES WITH SCIENTISTS, DESIGNERS AND ENTREPRENE URS WHO MAKE UP THE SCIENCE CENTER COMMUNITY DURING 2017, THE FOURTH FULL YEAR OF OPERATI ON, FIRSTHAND WORKED WITH 307 LOCAL YOUTH AND PROVIDED MORE THAN 4,100 HOURS OF STUDENT EN GAGEMENT THROUGH 28 INDIVIDUAL PROGRAMS AND EVENTS FIRSTHAND PROGRAMS INCLUDE - DNA SELF IE ASKS GROUPS OF 10 TO 15 MIDDLE SCHOOL GIRLS TO LOOK AT AND PRESENT THEMSELVES IN A NEW CREATIVE LIGHT THEY TRANSLATE REAL-LIFE LAB EXPERIENCES BY EXTRACTING THEIR OWN DNA AND S TUDYING THEIR OWN CELLS TO TRANSFORM THEM INTO INNOVATIVE SELF-PORTRAITS USING PHOTO-MICRO SCOPY, VINYL CUTTERS, LASER CUTTERS AND THEIR OWN INGENUITY THE GIRLS THEN DESIGN A GROUP EXHIBIT OF THEIR GENETIC "SELFIES" TO EXHIBIT TO THE PUBLIC - POLYMER PLAY TEACHES YOUTH ABOUT THE INS AND OUTS OF MATERIAL SCIENCE THROUGH MAKING AND BUILDING WITH POLYMERS REA L-LIFE LAB EXPERIENCES INSPIRE EXPERIMENTS AND CONSTRUCTION PROJECTS ACTIVITIES INCLUDE M AKING BIO-PLASTIC, RECYCLING PLASTICS INTO NEW MATERIALS, AND EXPERIMENTING WITH TOOLS LIK E VACUUM SEALS, LASER CUTTERS AND POWER TOOLS A FINAL TEAM PROJECT IS DESIGNED AND BUILT BY THE GROUP, AND THEN EXHIBITED TO THE PUBLIC - AMPITUP EXPLORES THE INNER WORKINGS OF T HE BATTERIES AND CIRCUITS THAT POWER OUR DAILY ACTIVITIES STUDENTS STEP INTO THE WORLD OF ELECTROCHEMISTRY AND TINKER W

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	ITH DESIGNING DIFFERENT TYPES OF BATTERIES AND EXPERIMENTING WITH ELECTRICAL CIRCUITS PAR TICIPANTS LEARN TO USE SOLDERING IRONS, MULTI-METERS, LASER CUTTERS AND HAND TOOLS AT THE END OF THE PROGRAM THE FINAL PROJECTS ARE PRESENTED TO THE PUBLIC AT THE SCIENCE CENTER - TASTE TEST, A SUMMER PROGRAM LAUNCHED IN 2016, ENCOURAGES STUDENTS TO PLAY WITH THEIR FO OD AND EXPERIMENT WITH THEIR SENSES PARTICIPANTS LEARN ABOUT THE FACTORS THAT AFFECT FLAV OR, EXPLORE HOW YOUR SENSES WORK TOGETHER WHEN YOU EAT, AND UNDERSTAND WHY EACH PERSON'S U NIQUE GENETICS INFLUENCE THEIR TASTING EXPERIENCE USING CULINARY TOOLS, STUDENTS DIVE INT O THE COMPLEX WORLD OF MOLECULAR GASTRONOMY TO CREATE BUBBLES OUT OF GRAPE JUICE AND TURN FRUIT INTO SPAGHETTI, AND THEN DESIGN THEIR OWN EXPERIMENTS AND PRESENT THEM TO THE SCIENC E CENTER COMMUNITY - PROJECT INQUIRY, ALSO LAUNCHED IN 2016, IS AN INNOVATIVE EIGHT-MONTH PROGRAM FOR HIGH SCHOOL SOPHOMORES THAT EXPLORES CONCEPTS IN ENGINEERING, DESIGN, TECHNOL OGY, AND ENTREPRENEURSHIP STUDENTS LEARN HOW TO USE LAB EQUIPMENT, INVESTIGATE THE DESIGN PROCESS, AND SOLVE REAL WORLD PROBLEMS USING CUTTING-EDGE TECHNOLOGIES LIKE LASER CUTTERS AND 3D PRINTERS USING THIS NEWFOUND KNOWLEDGE, THE PARTICIPANTS THEN WORK DIRECTLY WITH PROFESSIONAL SCIENTISTS AND ENTREPRENEURS WHO SERVE AS MENTORS FOR TEAM PROJECTS - FIRSTH AND TEACHERS INSTITUTE IS AN OPPORTUNITY FOR EDUCATORS LOOKING TO BRING THE TENETS OF STEA M EDUCATION INTO THEIR CLASSROOMS THE GOAL IS FOR EDUCATORS TO LEARN THE PRACTICE OF DESI GN-BASED STEAM EDUCATION BY EXPERIENCING IT THEMSELVES THE TAKEAWAYS ARE A RESOURCE KIT F OR INCLUDING STEAM PEDAGOGY IN FUTURE LESSON PLANS - THE SCIENCE CENTER EXPERIENCE IS A W INDOW INTO THE WORLD OF REAL-LIFE SCIENCE RESEARCH LABS THE SCIENCE CENTER'S LABS AND OFF ICE SPACES ARE TEEMING WITH SCIENTISTS AND ENTREPRENEURS WHO ARE EAGER TO SHARE FIRSTHAND EXPERIENCES OF THEIR WORK AND CAREER PATHS WITH STUDENTS AND TEACHERS PARTICIPANTS TOUR T HE SCIENCE CENTER CAMPUS, VISIT THE LABS AND INTERACT WITH THE RESIDENT SCIENTISTS TO LEAR N WHAT IT'S REALLY LIKE TO WORK IN THE STEM DISCIPLINES THE SCIENCE CENTER'S STEAM PERSON NEL ALSO MANAGE AND OPERATE AN ART GALLERY SPACE ON THE SCIENCE CENTER CAMPUS THAT IS OPEN TO THE PUBLIC, KNOWN AS ESTHER KLEIN GALLERY (EKG) EXHIBITS HELD AT EKG EXPLORE INTERSEC TIONS BETWEEN ART, DESIGN, SCIENCE AND TECHNOLOGY THE PRIMARY AIM OF EKG IS TO EXAMINE NE W ART AND CONTEMPORARY ARTS PRACTICES THAT ARE INFLUENCED BY TECHNOLOGY AND THE SCIENCES, AND TO GENERATE PUBLIC DISCOURSE THROUGH THE EXHIBITION OF CREATIVE WORKS THAT COMMENT ON LIFE AND OUR ENVIRONMENT IN A DIGITAL AGE EKG CELEBRATED ITS 40TH ANNIVERSARY IN 2016, AN D IN 2017 LAUNCHED AN ARTIST-IN-RESIDENCE PROGRAM FOCUSED ON BIOTECHNOLOGY, IN PARTNERSHIP WITH INTEGRAL MOLECULAR, A BIOTECH COMPANY AND UCITY SQUARE RESIDENT THE GOAL OF THE RES IDENCY PROGRAM IS TO PROVIDE ACCESS, OPPORTUNITY AND AWARENESS FOR ARTISTS TO EXPLORE THE EVER-CHANGING WORLD OF BIOTECH

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS	NOLOGY QUORUM QUORUM IS A SCIENCE CENTER INITIATIVE THAT UNITES THE REGION'S ENTREPRENEUR SHIP AND INNOVATION COMMUNITIES THROUGH A CENTRAL, NEUTRAL GATHERING SPACE AT 3711 MARKET STREET AND PROGRAMS THAT CONNECT ENTREPRENEURS TO INVESTORS AND ADVICE AN EFFORT TO SUPPO RT LONG-TERM COLLABORATIVE REGIONAL ECONOMIC DEVELOPMENT, QUORUM STRENGTHENS THE REGION'S CULTURE OF TECHNOLOGY-BASED ECONOMIC DEVELOPMENT BY OFFERING PROGRAMS AND FACILITATING CON NECTIONS BETWEEN ENTREPRENEURS, INNOVATORS, FUNDERS AND RESOURCE ORGANIZATIONS, WITH THE U LTIMATE GOAL OF INNOVATION, COMPANY FORMATION AND JOB CREATION BETWEEN JUNE 2011 WHEN QUO RUM OPENED ITS DOORS AND DECEMBER 31, 2017, 70, 043 PEOPLE PARTICIPATED IN 1,146 EVENTS AN D PROGRAMS IN QUORUM IN 2017, MORE THAN 11,400 PEOPLE PARTICIPATED IN 187 QUORUM PROGRAMS AND EVENTS REGIONAL AFFINITY INCUBATION NETWORK (RAIN) RAIN IS A REGIONAL NETWORK OF 75- PLUS RESEARCH PARKS, BUSINESS INCUBATORS, CO-WORKING SPACES, ACCELERATORS AND SUPPORT ORGA NIZATIONS IN PENNSYLVANIA, NEW JERSEY AND DELAWARE THAT SHARE INFORMATION, CAPABILITIES AN D OPPORTUNITIES - AS WELL AS BUILD STRENGTH ACROSS THE REGION LAUNCHED IN 2009, RAIN HAS EXPANDED TO INCLUDE THE DIVERSE GROUP OF CO-WORKING SPACES, ACCELERATORS AND OTHER MODELS THAT SUPPORT ENTREPRENEURSHIP IN THE REGION MORE THAN 150 PEOPLE ATTENDED THE 9TH ANNUAL RAIN CONFERENCE IN JULY 2017 TITLED DIVERSITY & ACCESS BUILDING AN INCLUSIVE ENTREPRENEU RIAL COMMUNITY, THE CONFERENCE EXPLORED HOW INNOVATION COMMUNITIES ARE ENGAGING A DIVERSE AND INCLUSIVE POPULATION WITH ENTREPRENEURSHIP AFTER A KEYNOTE FROM THE EWING MARION KAUF FMAN FOUNDATION'S DIRECTOR OF ENTREPRENEURIAL COMMUNITIES, PHILIP GASKIN, THE CONFERENCE L OOKED AT EXISTING SUCCESSFUL PROGRAMS THAT PROMOTE DIVERSITY, INVESTORS FOCUSED ON MAKING AN IMPACT, AND RESOURCES THAT EXPAND OPPORTUNITY BEYOND THE STATUS QUO UNIVERSITY CITY KE YSTONE INNOVATION ZONE THE SCIENCE CENTER IS ONE OF THE FOUNDING PARTNERS AND THE FISCAL A GENT OF THE UNIVERSITY CITY KEYSTONE INNOVATION ZONE (UC KIZ), A PARTNERSHIP DESIGNED TO B UILD KNOWLEDGE-BASED ECONOMIES AND CULTIVATE ENTREPRENEURSHIP IN PENNSYLVANIA HOME TO NUM EROUS LIFE SCIENCES AND IT STARTUPS, SEVERAL MAJOR UNIVERSITIES, NON-PROFIT RESEARCH INSTI TUTES, AND RESEARCH AND TEACHING HOSPITALS, THE UC KIZ COMMUNITY HAS THE INFRASTRUCTURE AN D RESOURCES THAT GROWING LIFE SCIENCES AND IT COMPANIES NEED UC KIZ PARTNERS INCLUDE BIOA DVANCE, DREXEL UNIVERSITY, THOMAS JEFFERSON UNIVERSITY, UNIVERSITY CITY SCIENCE CENTER, TH E UNIVERSITY OF PENNSYLVANIA, UNIVERSITY OF THE SCIENCES AND THE WISTAR INSTITUTE THIRTY- SIX UC KIZ COMPANIES RECEIVED A COLLECTIVE $2 4 MILLION IN TAX CREDITS AWARDED BY THE PENN SYLVANIA DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT IN 2017 AS PART OF THE KEYSTONE INNOVATION ZONE (KIZ) TAX CREDIT PROGRAM SINCE 2006, OVER $12 7 MILLION IN KIZ TAX CREDIT S HAVE BEEN AWARDED TO 79 COMPANIES IN THE UNIVERSITY CITY KIZ

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS	RESEARCH PARK THE SCIENCE CENTER LEGACY CAMPUS ENCOMPASSES 17 ACRES, 15 BUILDINGS, AND 2 5 MILLION SQUARE FEET WITHIN A FOUR-BLOCK AREA THAT IS HOME TO 100 COMPANIES EMPLOYING 8,000 PEOPLE CURRENTLY, THE SCIENCE CENTER OWNS AND MANAGES APPROXIMATELY 1 5 MILLION SQUARE FEET OF SPACE IN SEVEN BUILDINGS, INCLUDING THREE INCUBATORS FOR FLEDGLING BUSINESSES IN KEEPING WITH THE AGILITY OF ENTREPRENEURS, SHORT-TERM LEASES ARE AVAILABLE, WITH OPPORTUNITIES FOR GROWTH IN 2014, WE OPENED OUR NEWEST OFFICE AND LAB BUILDING AT 3737 MARKET STREET, A 332,000-SQUARE-FOOT MIXED USE PROPERTY THE ANCHOR TENANT IS PENN PRESBYTERIAN MEDICAL CENTER'S CENTER FOR SPECIALTY CARE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE OWNERSHIP OF SHARES OF THE CORPORATION IS RESTRICTED TO CORPORATIONS QUALIFIED FOR EXEMPTION FROM FEDERAL INCOME TAXES UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	ANNUAL STOCKHOLDER MEETINGS AFTER EACH ANNUAL ELECTION OF DIRECTORS, THE BOARD OF DIRECTORS MEETS FOR THE PURPOSE OF ORGANIZATION, ELECTION OF A CHAIRMAN OF THE BOARD AND OTHER OFFICERS, AND THE TRANSACTION OF OTHER BUSINESS AT THE OFFICE OF THE CORPORATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	REGULAR AND ANNUAL MEETINGS ARE HELD FOR THE TRANSACTION OF BUSINESS SPECIAL MEETINGS MAY ALSO BE HELD AT THE DIRECTION OF THREE OR MORE SHAREHOLDERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE COMPLETED 990 IS PRESENTED FOR REVIEW AND DISCUSSION BY THE AUDIT COMMITTEE, AND IS SUBSEQUENTLY MADE AVAILABLE TO THE ENTIRE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH BOARD MEMBER AND EXEMPT EMPLOYEE IS REQUIRED TO ANNUALLY SIGN A CONFLICT OF INTEREST DISCLOSURE FORM, INDICATING THAT HE/SHE UNDERSTANDS THE POLICY AND WILL ALERT THE ORGANIZATION SHOULD A CONFLICT OCCUR THIS PROCESS IS OVERSEEN BY THE SCIENCE CENTER'S GENERAL COUNSEL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD HIRED SULLIVAN COTTER ON DECEMBER 24, 2013 TO REVIEW CEO AND EXECUTIVE COMPENSATION AND PROVIDE BENCHMARK INFORMATION ON SALARY AND INCENTIVE COMPENSATION AN ARRAY OF 501 C3 AND FOR-PROFIT BENCHMARKS WERE INCLUDED IN THE STUDY IN ORDER TO COMPARE ENTITIES AND THEIR COMPENSATION STRUCTURES THAT REPRESENTED BUSINESS AND SERVICE OPERATIONS OF A COMPARABLE NATURE THE FINDINGS FROM THE SULLIVAN COTTER STUDY WERE AND HAVE BEEN INCORPORATED INTO ANNUAL REVIEW AND COMPENSATION PLANNING FOR THE CEO AND HIS TEAM THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS ANNUALLY REVIEWS MANAGEMENT COMPENSATION AND APPROVES ALL CHANGES IN 2017 THE BOARD REENGAGED SULLIVAN COTTER TO PERFORM AN UPDATED STUDY FOR CEO AND EXECUTIVE COMPENSATION RELATED TO 2018 COMPENSATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	A PERSON REQUESTING A COPY OF THE GOVERNING DOCUMENTS ETC PLACES HIS / HER REQUEST WITH THE SECRETARY OF THE UNIVERSITY CITY SCIENCE CENTER UPON RECEIPT OF THE REQUEST, THE REQUESTED INFORMATION IS MADE AVAILABLE TO THE INTERESTED PARTY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 16B	THE SCIENCE CENTER IS IN THE PROCESS OF DOCUMENTING ITS POLICY REGARDING EVALUATION OF PARTICIPATION IN JOINT VENTURES AND SIMILAR ARRANGEMENTS PRESENTLY, THE CENTER UNDERTAKES SIGNIFICANT DUE DILIGENCE PRIOR TO ENTERING INTO ANY JOINT VENTURE ARRANGEMENT, WHICH INCLUDES TAKING APPROPRIATE STEPS TO SAFEGUARD THE CENTER'S EXEMPT STATUS WITH RESPECT TO ANY SUCH ARRANGEMENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	NET RPI ACTIVITY -724,317 NET SCEC ACTIVITY 90,415 NET P1V ACTIVITY -1,537,617

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THERE HAS BEEN NO CHANGE DURING THE CURRENT PERIOD BY THE ORGANIZATION IN THE AUDIT OVERSIGHT OR INDEPENDENT AUDITOR SELECTION PROCESS

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

2017

Open to Public Inspection

Name of the organization
UNIVERSITY CITY SCIENCE CENTER

Employer identification number
23-1645908

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) 3701 UNIVERSITY CITY SCIENCE CENTER ASSOCIATES LLC 3711 MARKET STREET SUITE 800 PHILADELPHIA, PA 19104 23-3040121	COMMERICAL REAL ESTATE PROPERTY OWNERSHIP AND RENTAL	PA	1,144,065	33,954,655	UNIVERSITY CITY SCIENCE CENTER
(2) 3701 UNIVERSITY CITY SCIENCE CENTER ASSOCIATES LP 3711 MARKET STREET SUITE 800 PHILADELPHIA, PA 19104 23-3040122	COMMERICAL REAL ESTATE PROPERTY OWNERSHIP AND RENTAL	PA	11,556	342,976	UNIVERSITY CITY SCIENCE CENTER

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

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

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) Disproprtionate 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) WHALEY PARTNERS LP 3711 MARKET STREET 8TH FLOOR PHILADELPHIA, PA 19104 20-8824011	INVESTMENT	PA	UNIVERSITY CITY SCIENCE CENTER	RELATED		135,069		No			No	80 070 %
(2) PHASE I VENTURES LLC 3711 MARKET STREET SUITE 800 PHILADELPHIA, PA 19104 47-4150042	TECHNOLOGY ACCELERATOR	PA	UNIVERSITY CITY SCIENCE CENTER	RELATED	172,196	1,074,369		No		Yes		51 200 %

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)PORT OF TECHNOLOGY INC 3711 MARKET STREET SUITE 800 PHILADELPHIA, PA 19104 23-3054794	INCUBATOR STARTUP SUPPORT	PA	UNIVERSITY CITY SCIENCE CENTER	C	-93,831	1,583,380	100 000 %		No
(2)RESEARCH PARK INC 3711 MARKET STREET SUITE 800 PHILADELPHIA, PA 19104 23-2671100	SERVICES - REAL ESTATE MGMT	PA	UNIVERSITY CITY SCIENCE CENTER	C	266,076	858,650	100 000 %		No
(3)SCEC VENTURES INC 3711 MARKET STREET SUITE 800 PHILADELPHIA, PA 19104 47-4043064	PROPERTY DEVELOPMENT	PA	UNIVERSITY CITY SCIENCE CENTER	C	-62,075	3,249,544	100 000 %		No

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

			Yes	No
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 orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a	Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or**(iv)** rent from a controlled entity	**1a**		**No**
b	Gift, grant, or capital contribution to related organization(s)	**1b**		**No**
c	Gift, grant, or capital contribution from related organization(s)	**1c**		**No**
d	Loans or loan guarantees to or for related organization(s)	**1d**		**No**
e	Loans or loan guarantees by related organization(s)	**1e**		**No**
f	Dividends from related organization(s)	**1f**		**No**
g	Sale of assets to related organization(s)	**1g**		**No**
h	Purchase of assets from related organization(s)	**1h**		**No**
i	Exchange of assets with related organization(s)	**1i**		**No**
j	Lease of facilities, equipment, or other assets to related organization(s)	**1j**	**Yes**	
k	Lease of facilities, equipment, or other assets from related organization(s)	**1k**		**No**
l	Performance of services or membership or fundraising solicitations for related organization(s)	**1l**		**No**
m	Performance of services or membership or fundraising solicitations by related organization(s)	**1m**	**Yes**	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**		**No**
o	Sharing of paid employees with related organization(s)	**1o**		**No**
p	Reimbursement paid to related organization(s) for expenses	**1p**	**Yes**	
q	Reimbursement paid by related organization(s) for expenses	**1q**		**No**
r	Other transfer of cash or property to related organization(s)	**1r**		**No**
s	Other transfer of cash or property from related organization(s)	**1s**		**No**

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)RESEARCH PARK INC	M	-458,241	
(2)RESEARCH PARK INC - NET INTERCOMPANY CHANGE	P	-33,738	
(3)RESEARCH PARK INC	J	325,152	
(4)SCEC VENTURES INC - NET INTERCOMPANY CHANGE	P	-110,933	
(5)PORT OF TECHNOLOGY INC - NET INTERCOMPANY CHANGE	P	-232,384	

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

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

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

Part VII **Supplemental Information**

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