Form 990

Return of Organization Exempt From Income Tax

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

DLN: 93493135089249 OMB No 1545-0047

		of the Treasur enue Service	 Do not enter social security numbers on this form as it ma ► Information about Form 990 and its instructions is at www. 			C	Open to Public Inspection
A F	or th	e 2017 ca	elendar year, or tax year beginning 07-01-2017 , and ending 06-30	0-2018			
☐ Ad ☐ Na ☐ Ini	dress me ch tial re	turn	C Name of organization Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc % ASTRID KING Doing business as		D Employs 30-0773		ication number
☐ An	nende	n/terminated d return ion pending	Number and street (or P O box if mail is not delivered to street address) Room/sui CLSB 5th Floor 3 Blackfan Circle	te	E Telephon (617) 43		
		F	City or town, state or province, country, and ZIP or foreign postal code Boston, MA 02115		G Gross red		
			F Name and address of principal officer DONALD E INGBER CLSB5TH FL 3 BLACKFAN CIRCLE BOSTON, MA 02115	subo	nis a group ret ordinates? all subordinate		□Yes ☑No
		mpt status te: ► http	✓ 501(c)(3) ☐ 501(c)() ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 //wyss harvard edu	l	lo," attach a li up exemption	•	•
K Forr	n of o	rganization	☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of forr	mation 2013	M State MA	of legal domicile
Pa	rt I	Sumi	marv				
Activities & Governance			s box ▶ ☐ If the organization discontinued its operations or disposed of m If voting members of the governing body (Part VI, line 1a)			ssets	12
20 년	4	Number o	of independent voting members of the governing body (Part VI, line 1b)			4	6
£	l		nber of individuals employed in calendar year 2017 (Part V, line 2a)		•	5	0
⋛	l		ber of volunteers (estimate if necessary)			6	0
ĕ	l		elated business revenue from Part VIII, column (C), line 12			7a	0
	l		ated business taxable income from Form 990-T, line 34			7b	0
					rior Year	1	Current Year
۵.	8	Contribut	ons and grants (Part VIII, line 1h)		48,564,8	18	42,367,318
Ravenua	9	Program :	service revenue (Part VIII, line 2g)		30,5	95	821
ðΛċ	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		1,676,6	36	1,686,183
<u> </u>	11	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	465,975
	12	Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		50,272,0	49	44,520,297
	13	Grants ar	d sımılar amounts paid (Part IX, column (A), lines 1–3)		10,598,0	36	9,764,091
	14	Benefits p	oald to or for members (Part IX, column (A), line 4)			0	0
82	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)			0	0
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)			0	0
e da	Ь	Total fundr	aising expenses (Part IX, column (D), line 25) ▶0				
<u> </u>	17	Other exp	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		77,131,5	77	75,642,703
	18	Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		87,729,6	13	85,406,794
	19	Revenue	less expenses Subtract line 18 from line 12		-37,457,5	64	-40,886,497

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

Signature of officer

20 Total assets (Part X, line 16) .

21 Total liabilities (Part X, line 26) . .

AYIS ANTONIOU ADMIN DIRECTOR

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

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

Paid
Preparer
Lise Only

Net Assets or Fund Balances

Sign Here

Paid	e or print name and title Print/Type preparer's name PAUL TANIS	Preparer's signature PAUL TANIS		Check I if self-employed	PTIN P01441612
Preparer	Firm's name PRICEWATERHOUSECO	Firm's EIN ▶			
Use Only	Firm's address ► 101 SEAPORT BOULEVA	Phone no (617) 530-5000			
Use Only	BOSTON, MA 02210				
May the IRS discu	iss this return with the preparer show	n above? (see instructions)			. 🗹 Yes 🗌 No

Beginning of Current Year

2019-05-14

114,275,335

111,187,021

3,088,314

End of Year

75,821,837

3,620,158

72,201,679

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check If Sche	edule O contains a resp	onse or note to	any line in this Part III		<u> </u>
1	Briefly describe the o	organization's mission				
SEE	SCHEDULE O					
2	-			vices during the year wh		
						☐ Yes ☑ No
_	•	ese new services on Sc				
3	_		_	changes in how it condu		П., П .,
						🗌 Yes 🗹 No
_		ese changes on Schedu				
4	Section 501(c)(3) an		ons are required	to report the amount of	argest program services, as meast f grants and allocations to others, t	
4a	(Code) (Expenses \$	71,166,531	ıncludıng grants of \$	9,764,091) (Revenue \$	821)
	See Additional Data					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
	(3343	, (2Apolioco +		monaumy grante or ¢	, (110701100 \$,
	-					
	-					
- A -	Other pre	see (Desembs in Cabital	ula O)			
4d	Other program servi (Expenses \$	ces (Describe in Sched	ule O) luding grants of	¢) (Revenue \$)
<u></u>	Total program serv			·	, (Nevenue p	,
4e	rotai program ser	vice expenses F	71,166,5	<u>) t</u>		Form 990 (2017)

Checklist of Required Schedules

Page 3

No

Nο

Nο

Nο

Nο

Nο

No

Nο

No

No

Nο

Νo

Nο

No

Nο

Form **990** (2017)

Yes

Yes

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Yes

Yes

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? 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . .

Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8 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 9

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 11a

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 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 11c 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 Yes 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

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

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

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

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

14a Did the organization maintain an office, employees, or agents outside of the United States? business, investment, and program service activities outside the United States, or aggregate foreign investments

14a 14b valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

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

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

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

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

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

29

No

Part IV Checklist of Required Schedules (co	ntınued)
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25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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

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," 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

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

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

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

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

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

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🕏

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

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

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

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

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

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

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

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

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

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 21

Yes

Yes

Yes

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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33

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35a

35h

36

37

Yes

Yes

Yes

Form 990 (2017)

Yes

Νo No

Nο

Νo

Nο

orm	990 (2017)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Compared to the number of Enter -0- in line 1a Enter -0- in line	.		
		-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	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	4 I		
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		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	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
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
Č	The rest, to line 3a of 3b, and the organization meronii 5000 fr	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Ne
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	- ' - 		NO
9	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?			
٥-	Did the annual manual manual and the state of the state o	8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
_	against amounts due or received from them)]		
L2a	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	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			
_	Enter the amount of reserves on hand]		
С				i
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

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Par	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	,	nse to li	
Se	Check if Schedule O contains a response or note to any line in this Part VI			✓
1a	Enter the number of voting members of the governing body at the end of the tax year 12		Yes	No
	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 6			
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	Yes	
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?	7 b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	⊋.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	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	
С	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?			
а	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		No
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		
Se	ction C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed▶			
	MA MA			
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 ASTRID KING 3 BLACKFAN CIRCLE CLSB 513 Boston, MA 02115 (617) 432-7786	<u>_</u>		0 (2017)

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"

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

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee)
- 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

 List all of the organization's former director organization, more than \$10,000 of reportable co 										
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 no		aanızat	ion c	omr	anc	: bete	anv	current officer dire	ector or trustee	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position that pers	on (do an on on is	(C) not e bot) t chox, t h an or/tr		ore er	(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
(1) ALAN GARBER DIRECTOR	0 5	×						0	686,907	193,993
(2) ROBERT BLAND DIRECTOR	0 5	x						0	0	0
(3) HANSJORG WYSS DIRECTOR	0 5	x						0	0	0
(4) HOWARD STEVENSON DIRECTOR	0 5	×						0	0	0
(5) SANDRA FENWICK DIRECTOR	0 5	×						0	0	0
(6) JEREMY BLOXHAM DIRECTOR	0 5 59 5	x						0	432,509	44,508
(7) KATHERINE LAPP DIRECTOR	0 5 59 5	х						0	693,510	43,387
(8) KENNETH LUTCHEN DIRECTOR	0 5	×						0	0	0
(9) NORBERT HAAS DIRECTOR	0 5	x						0	0	0
(10) RICHARD MCCULLOUGH	0 5	х						0	485,861	57,465

57,465 485,861 DIRECTOR 59 5 0 5 (11) FRANCIS DOYLE Х 0 568.179 60.500 DIRECTOR 59 5 0 5 (12) GEORGE DALEY 0 807,671 34,281 DIRECTOR 59 5 46.0 (13) DONALD INGBER Χ 0 553,327 57,629 PRESIDENT 0.0 0 5 (14) PETER KATZ Х 323.414 58.197 0 CLERK (UNTIL 12/15/17) 59 5 0 5 (15) JULIE FABER Х 0 292,001 34,364 CLERK (SINCE 12/15/17) 59 5 60 0 (16) AYIS ANTONIOU Χ 0 443,325 43,856 TREASURER/ADMIN DIRECTOR 0.0 60 0 (17) MARY TOLIKAS

Х 437.806 57.061 0 OPERATIONS DIRECTOR 0 0 Form 990 (2017) Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) (B) (C) (D) (E) (F)

Page 8

Section A. Officers, Directors	r Hustees, K	ey Eiii	pioy	zes	<u>, an</u>	<u>a nig</u>	jiies	st Compensated	Employees	COIL	mueu)	
(A) Name and Title	(B) Average hours per week (list any hours	than o	one b	ox, u an off tor/t	ot che unles fficer truste	<u> </u>	son a	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1095 MISC)	,- 	relat relat organiz:	ted
(18) MICHAEL SUPER	60 0			\Box		х		0	218	3,198		54,206
LEAD SENIOR STAFF SCIENTIST (19) ROBERT CUNNINGHAM	0 0 60 0	<u></u>		\vdash	\vdash	×		0	207	7,931		53,400
PLATFORM DEVELOPMENT DIRECTOR (20) JAMES NIEMI	0 0 60 0			 	\vdash	×	-	0		5,411		54,967
LEAD SENIOR STAFF ENGINEER (21) WILLIAM BLAKE	0 0 60 0		-	-	<u> </u>		 					
BUSINESS DEVELOPMENT LEAD (22) EDWARD DOHERTY	0 0 60 0			<u> -</u>	<u> </u>	×	<u> </u>	0	222	2,808		34,989
SENIOR LEAD STAFF SCIENTIST	0 0		<u> </u>	<u></u>	<u> '</u>	×	<u> </u>	0	196	5,092		50,567
			-	 '	<u> </u>	<u> </u>	<u> </u>			\dashv		
				\vdash	H	\vdash				\dashv		
				Г								
c Total from continuation sheets to Part	=		-		>	·	<u> </u>					
d Total (add lines 1b and 1c) Total number of individuals (including but of reportable compensation from the organisms)				abo\	► √e) v	<u>▶</u> who re	ceiv	0 ed more than \$100	6,774,95	i0		933,370
or reportable compensation from the orga											Yes	No
3 Did the organization list any former offic line 1a? If "Yes," complete Schedule J for	•		key (emp¹ •	loye	e, or h	nghe	est compensated er	nployee on	3		No
For any individual listed on line 1a, is the organization and related organizations grandividual									he		Vac	
5 Did any person listed on line 1a receive of services rendered to the organization? If '									dual for	5	Yes	No No
Section B. Independent Contractors	<u> </u>			—	—		—					110
Complete this table for your five highest from the organization Report compensat	compensated in									npen	sation	
Name and b	(A) ousiness address							Descrip	(B) tion of services		(C) Compen	
FRANK BOBE, 38 GRAND HILL DRIVE DOVER, MA 020301704								TECH CONSUL				237,105
PRICEWATERHOUSECOOPERS LLP, PO BOX 7247-8001 PHILADELPHIA, PA 19170								AUDIT/TAX SE	RVICES			113,483
·	-											

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 ▶ 2

Form 9 Part			Revenue								Page 9
			le O contains	a respo	onse or note to any				<u> </u>		
						(A) Total re		(B) Related exempt function revenue	t n	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1 a	Federated campaig	ns	1a				revend	- 1		1 312 314
ants	Ł	b Membership dues		1b							
Contributions, Gifts, Grants and Other Similar Amounts	6	Fundraising events		1c							
	(d Related organization	ns	1d	1,025,000						
E iii	•	e Government grants (c	ontributions)	1e	33,217,846						
tions r Sil	f	 All other contributions and similar amounts nabove 	, gıfts, grants, ot ıncluded	1f	8,124,472						
tribu Othe	ç	Noncash contribution In lines 1a-1f \$	ons included								
Con	h	Total.Add lines 1a-:	lf	. .	•	42.3	67,318				
<u> </u>					Business						
Ven	2a	MISCELLANEOUS				541700		821	821		
9¥	b										
rMC	c			_							
፠	d e										
Program Service Revenue	_	All other program se	rvice revenue	<u>.</u>							
Ρ̈́	g.	Total.Add lines 2a-2	f		•	821					
	3 I	Investment income (i	ncluding divid	lends, ı			1,671,710				1,671,710
		imilar amounts) . Income from investm			ond proceeds		1,071,710				1,0/1,/10
		Royalties				-	465,975	5			465,975
			(ı) Rea	I	(II) Personal						
	6a	Gross rents									
	b	Less rental expenses				7					
	c	Rental income or		0		0					
	_	(loss)				Ц	_				
	d	Net rental income o						7			
	7a	Gross amount	(ı) Securi	ties	(II) Other	-					
		from sales of assets other			16,35	64					
		than inventory				_					
	b	 Less cost or other basis and sales expenses 			1,88	1					
	c	Gain or (loss)			14,47	'3					
		Net gain or (loss)			•		14,473	3			14,473
ə	8a	Gross income from f (not including \$		ents of							
Other Revenue		contributions reporte See Part IV, line 18	ed on line 1c)	. a		,					
}ev	b	Less direct expense				_					
erF		Net income or (loss)			ents Þ	_	C				
oth	9a	Gross income from g See Part IV, line 19		ies							
		200 : 2::02:,0 25		а	l (
		Less direct expense		b	C						
		: Net income or (loss) Gross sales of invent		activit	es •		- (
	106	returns and allowand									
	L			a	(_					
		Less cost of goods s Net income or (loss)		b Invent			C				
		Miscellaneous		IIIVeille	Business Code						
	11	а				7					
	b										
		. ————									
	С										
	ام	All other revenue .									
		Total. Add lines 11a			•						
	12	Total revenue. See	Instructions								
							44,520,297	'[821		2,152,158

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must comp	lete column (A)	_
Check if Schedule O contains a response or note to any	line in this Part IX			🗆
Do not include amounts reported on lines 6b, /b, 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	8,680,903	8,680,903		
2 Grants and other assistance to domestic individuals See Part IV, line 22	986,198	986,198		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	96,990	96,990		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	0			
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7 Other salaries and wages	0			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9 Other employee benefits	0			
10 Payroll taxes	0			
11 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	65,388		65,388	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,091,718	918,324	173,394	
12 Advertising and promotion	0			
L3 Office expenses	465,760	313,891	151,869	
L4 Information technology	636,571	471,376	165,195	
L5 Royalties	0			
L6 Occupancy	15,850,648	13,259,078	2,591,570	
L 7 Travel	670,932	638,687	32,245	
L8 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
L9 Conferences, conventions, and meetings	757,064	749,210	7,854	
20 Interest	13,889		13,889	
21 Payments to affiliates	0		· ·	
22 Depreciation, depletion, and amortization	4,663,909	4,402,150	261,759	
23 Insurance	131,237	1,333	129,904	
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 PERSONNEL CHARGE BACK	37,529,132	30,524,870	7,004,262	
b LAB SUPPLIES AND SERVICES	9,564,875	9,564,875		
c PAYMENT TO RELATED ORG	3,729,367	177,231	3,552,136	
d TAX AND FEES	88,381	52,520	35,861	
e All other expenses	383,832	328,895	54,937	
25 Total functional expenses. Add lines 1 through 24e	85,406,794	71,166,531	14,240,263	C
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)				

Assets

19

20

21

Liabilities

Fund Balances

Assets or 30

Net

27

28

29

31

32

33

34

n 5

0 6

0 8

٥

0 14

0 18

0 19

0

0 22

0

2.708.043

3,088,314

28.221.374

54.965.647

28.000.000

111,187,021

114.275.335

1.209.073

19,498,154

35.800.267

21.577.802

114.275.335

380.271

7

9

10c

11 0

12

13

15

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17

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Page **11**

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2.838.555

3,620,158

24,455,400

19,746,279

28.000.000

72,201,679

75.821.837

Form **990** (2017)

939,199

16,128,752

37.701,422

14.028,742

75.821.837

781,603

6,370,775

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

		Beginning of year		End of ye
1	Cash-non-interest-bearing	0	1	
2	Savings and temporary cash investments	0	2	
3	Pledges and grants receivable net	25 703 922	7	

47,405,947

31,277,195

Pledges and grants receivable, net . 10.486.117 4 Accounts receivable, net

10a

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L

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)

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

basis Complete Part VI of Schedule D

Inventories for sale or use .

Deferred revenue . . .

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net . .

b Less accumulated depreciation 10b Investments—publicly traded securities .

11 12 13 Investments—program-related See Part IV, line 11 . 14 Intangible assets

Investments—other securities See Part IV, line 11 . . . 15 Other assets See Part IV, line 11

16

Total assets.Add lines 1 through 15 (must equal line 34) . . . 17 Accounts payable and accrued expenses 18 Grants payable . . .

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 .

Tax-exempt bond liabilities

23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . 25 and other liabilities not included on lines 17-24)

Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 .

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

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

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34.

Escrow or custodial account liability Complete Part IV of Schedule D

Page **12**

Yes

Yes

Yes

Yes

Yes Form 990 (2017)

2a

2b

2c

3a

3b

No

Nο

Form 990 (2017)

Schedule O

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

_	Total expenses (mase equal rate 174, column (77), mile 25)	_	03,100,73
3	Revenue less expenses Subtract line 2 from line 1	3	-40,886,49
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	111,187,02
5	Net unrealized gains (losses) on investments	5	1,901,15
6	Donated services and use of facilities	6	

7 Investment expenses Prior period adjustments . Other changes in net assets or fund balances (explain in Schedule O) . 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 72,201,679 10 Part XII **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☑ Both consolidated and separate basis

Additional Data

Software ID:

Software Version:

EIN: 30-0773387

Name: Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

Form 990 (2017)

Form 990, Part III, Line 4a:

Research and technology developmeNT on Biologically Inspired Engineering focused on Biological Control, Living Material, and Biology. The Institute conducts its research and development activities using focus areas to create new bioinspired materials and devices, and to translate them into products. The eight focus areas are. Adaptive Material Technologies, bioinspired soft robotics, immuno-materials, living cellular devices, bioinspired therapeutics and diagnostics, molecular robotics, 3d organ engineering, and syNthetic biology.

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SCI		ULE A		Dublic C	harity Status	and Dub	lic Suppe		OMB No 1545-0047
(For	m 99		Con	nplete if the org	ganization is a secti	on 501(c)(3) o	rganization or	I	2017
990E	LL)			•	4947(a)(1) nonexer ▶ Attach to Form 9				
		the Treasury	► Inf	ormation about	Schedule A (Form ! www.irs.go		and its instru	ctions is at	Open to Public Inspection
Nam	e of th	nue Service ne organiza			www.sige	<u> </u>		Employer identifica	
		ss Institute for neering at harv						30-0773387	
	rt I				s (All organizations			ee instructions.	
1 ne o	rganız		•		it is (For lines 1 throu	•		/A)/:\	
		·		·	ociation of churches d			(A)(I).	
2)(A)(ii). (Attach Scho	·	•		
3		·	•	•	ce organization descri			•	
4		name, city,	and state _		d in conjunction with a				
5	Ш		ition operate (iv). (Compl		of a college or univers	sity owned or ope	erated by a gove	ernmental unit describ	ed in section 170
6		A federal, s	tate, or local	l government or q	governmental unit des	cribed in sectio i	170(b)(1)(A)(v).	
7				rmally receives a (vi). (Complete l	substantial part of its Part II)	support from a	governmental ui	nit or from the genera	l public described in
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi) (Complete Part II)		
9					scribed in 170(b)(1)(e instructions Enter t				ge or university or a
10		from activit investment	ies related to income and	o its exempt func unrelated busine	(1) more than 331/3% tions—subject to certa ss taxable into New Market	ain exceptions, a	nd (2) no more	than 331/3% of its su	oport from gross
11				509(a)(2). (Con ed and operated	exclusively to test for	public safety Se	e section 509	(a)(4).	
12	▽	-	-	•	exclusively for the ber		·		e purposes of one or
	•	more public	ly supported	d organizations de	escribed in section 50 the type of supporting	9(a)(1) or sec	tion 509(a)(2)	. See section 509(a)	
а	✓	organizatio	n(s) the pow		ted, supervised, or co opoint or elect a major				
b		manageme	nt of the sup		rvised or controlled in tion vested in the sam nd C.				
С					ipporting organization				ed with, its
d		Type III n functionally	on-function integrated	nally integrated The organization	ns) You must comp A supporting organiz generally must satisfy IV, Sections A and	ation operated in a distribution re	n connection wit	h its supported organi	
e	~	Check this	box if the org	ganızatıon receive	ed a written determina	ation from the IR	S that it is a Tyj	pe I, Type II, Type III	functionally
f	_			non-functionally i d organizations	ntegrated supporting (organization		1	
g				3	oported organization(s	`			
	(i) N	lame of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					man decionary	Yes	No		
(A) PRES COLL		& FELLOWS OF	HARVARD	042103580	2	Yes		177,231	0
Total			4					177 221	
Tota For P		work Podus	1 tion Act Not	tice, see the In:	tructions for	Cat No 11285	: 6	177,231 Schedule A (Form 99	0 or 990-E7\ 2017

organization

instructions

supported organization

▶□

Schedule A (Form 990 or 990-EZ) 2017

(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	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
(or fiscal year beginning in) ▶	(4) 2013	(5) 2011	(0, 2013	(4) 2010	(0) 2017	(1) 10ta
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	39,663,533	35,749,473	38,926,502	48,564,818	42,367,318	205,271,644
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						C
The value of services or facilities furnished by a governmental unit to the organization without charge						C
4 Total. Add lines 1 through 3	39,663,533	35,749,473	38,926,502	48,564,818	42,367,318	205,271,644
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)						C
6 Public support. Subtract line 5 from line 4						205,271,644

Calendar year (c)2015 (d)2016 (e)2017 (a)2013 (b)2014 (f)Total (or fiscal year beginning in) Amounts from line 4 39,663,533 35,749,473 38,926,502 48,564,818 42,367,318 Gross income from interest. dividends, payments received on

205,271,644

1,357,862 1,695,566 2,137,685 8,257,386 securities loans, rents, royalties 1,448,843 1,617,430 and income from similar sources Net income from unrelated

business activities, whether or not the business is regularly carried on

Other income Do not include gain 10 or loss from the sale of capital 133,658 136,558 119,264 30,595 821 420,896 assets (Explain in Part VI) Total support. Add lines 7 through 11 213,949,926 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,

Section C. Computation of Public Support Percentage

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

14 95 944 %

15 Public support percentage for 2016 Schedule A, Part II, line 14 15 0 %

▶Ⅵ 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

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

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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

Page 4

No

No

No

No

No

No

No

No

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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

Schedule A (Form 990 or 990-EZ) 2017

10a

answer line 10b below

the organization had excess business holdings)

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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 Yes

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 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below 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

3a determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below

4a Did the 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 4b supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections

No 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 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 5a amendment to the organizing document) 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

No 5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

6 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 Yes

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 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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

8 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 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.

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

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

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

9b 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. 9с

Pa	Supporting Organizations (continued)		·	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		No
b	A family member of a person described in (a) above?	11b		No
	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		No
S	Section B. Type I Supporting Organizations			T
			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			
,	Did the example to energia for the benefit of any supported example to other than the supported example to that	_ 1	Yes	<u> </u>
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			N
	organization	2		No
S	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		
S	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		
				<u> </u>
	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 instruct a	ions)		
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	36		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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 (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

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		
 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		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

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

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

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

Schedule A (Form 990 or 990-Ez) 201/ Page :
Section A, lines 1, Part IV, Section D,	ormation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, 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, 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 5, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See
	Facts And Circumstances Test
990 Schedule A, Supplem	ental Information
Return Reference	Explanation
Treatm trenerance	

WYSS INSTITUTE PROVIDES RESEARCH SUPPORT TO ACADEMIC AND NONPROFIT MEDICAL INSTITUTIONS IN PART IV, SECTION A, LINE 6

FURTHERANCE OF ITS EXEMPT PURPOSE OF SUPPORTING PRESIDENT AND FELLOWS OF HARVARD COLLEGE

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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. OMB No 1545-0047

DLN: 93493135089249

Open to Public Inspection

Assets included in Form 990, Part X

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

(Form 990)

▶ Attach to Form 990. Department of the Treasury

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc 30-0773387 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 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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 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 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 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

Cat No 52283D

Schedule D (Form 990) 2017

Pari	<u> </u>	Organizations Mai	ntaining Collec	tions of A	rt, Histor	ical T	reas	ures, or	Other	Similar A	lssets (c	ontınu	ed)	
3		the organization's acqui (check all that apply)	sition, accession, a	nd other reco	ords, check	any of	the f	ollowing t	hat are a	sıgnıfıcant	use of its	collec	tion	
а		Public exhibition			d		Loar	n or excha	ange prog	rams				
b		Scholarly research			е		Oth	er						
С		Preservation for future of	generations											
4	Provide Part	de a description of the or KIII	ganızatıon's collect	ions and exp	laın how th	ey furt	her th	ne organiz	atıon's ex	empt purp	ose in			
5		g the year, did the orgar s to be sold to raise fund								ular	☐ Ye	s [_ N-	o
Par	t IV	Escrow and Custo Complete if the orga X, line 21.			Form 990	O, Part	IV,	line 9, or	reporte	ed an amo	ount on F	orm 9	90,	Part
1a		e organization an agent, t ded on Form 990, Part X?		or other inter	mediary fo	r contri	butio	ns or othe	er assets i	not	Ye	s [□ N	0
b	If "Y∈	es," explain the arrangem	nent in Part XIII an	d complete th	ne following	table		[Amount			_
c		ining balance		,		- "		ļ	1c					_
d	-	ions during the year						ļ	1d					_
е		butions during the year						İ	1e					-
f		g balance						ŀ	1f					_
2 a		ne organization include a	n amount on Form	990, Part X,	lıne 21, for	escrov	v or c	ustodial a	ccount lia	ibility?	☐ Ye	s [□ N	– D
b	If "Ye	s," explain the arrangem	ent in Part XIII Ch	neck here if th	ne explana	tion has	s beei	n provideo	d in Part)	ΚIII				
Pa	rt V	Endowment Funds	. Complete if the	e organızatı	on answe	red "Y	es" c	n Form	990, Par	t IV, line	10.			
				(a)Current yea	r (b) l	Prior yea	ır	(c)Two ye	ears back	(d)Three ye	ears back	(e) Fou	r year	s back
1a	Beginn	ing of year balance .		36,013,	556	34,90	5,257	3	7,227,664	36	5,557,971		33,9	63,495
b	Contrib	outions												
С	Net inv	estment earnings, gains,	, and losses	3,403,	672	2,67	4,662		-724,030	2	2,011,268		4,8	321,732
d	Grants	or scholarships												
		expenditures for facilities ograms		1,474,	426	1,56	6,363		1,598,377	1	1,341,575		2,2	227,256
f	Admını	strative expenses												
g	End of	year balance	[37,942,	802	36,01	3,556	3	4,905,257	37	7,227,664		36,5	557,971
2	Provid	de the estimated percent	age of the current	year end bala	ance (line 1	.g, colu	mn (a	a)) held a:	s					
а	Board	d designated or quasi-end	dowment 🕨											
b	Perm	anent endowment >	73 800 %											
c	Temp	orarily restricted endowr	nent ▶ 26 200	%										
٠		percentages on lines 2a, 2												
За		here endowment funds n	•	•	nization tha	at are h	eld a	nd admını	stered for	r the				
		nization by	·	-								`	/es	No
	(i) ur	nrelated organizations .										(i)		No
		elated organizations .									-	` '	⁄es	
b		es" on 3a(II), are the relat	-								3	b '	Yes	
4	_	ribe in Part XIII the inten		janization's e	ndowment	runas								
Par	t VI	Land, Buildings, a Complete if the orga		ed "Vec" on	Form 99) Dart	· T\/	line 11a	See For	-m aan b	art V lin	۵10		
	Descri	ption of property	(a) Cost or other be (investment)		Cost or othe					lepreciation		d) Book	value	9
12	Land							+						
								+						
	Buildin	· ⊢	10	865 374				+		10 001 074			7	644 000
		old improvements		,865,374				+		12,221,374	1			,644,000
		nent	27	,540,573				+		19,055,821			8	,484,752
-				15 000		/= 1	. ,	10())						
ota	ı. Add	lines 1a through 1e <i>(Colu</i>	ımn (d) must equa	ı Form 990, F	art X, colu	mn (B)	, line	10(c)).		▶	1		16	,128,75

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(1-)		
	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(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, P	Part IV. line	e 11c. See Form 990. Part X. line 13.	
-	ook value	(c) Method of valuation Cost or end-of-year market value	
(1)		cost of end of year market value	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶			
Part IX Other Assets. Complete if the organization answered 'Yes' on For (a) Description	m 990, Part	IV, line 11d See Form 990, Part X, line 15 (b) Book value	
(1) DUE FROM HARVARD UNIVERSITY		7,22	28,742
(2) HARVARD UNI CONTRIB RECEIVED (3)		6,80	00,000
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		• 14,02	28,742
Part X Other Liabilities. Complete if the organization answered 'Y See Form 990, Part X, line 25.	es' on Fori	m 990, Part IV, line 11e or 11f.	
1. (a) Description of liability	(b) Boo	ok value	
(1) Federal Income taxes		0	
POOLED LOANS		397,083	
DEFERRED RENT OTHER LIABILITIES		1,572,092 869,380	
(4)		009,380	
(5)			
(6)			
(7)			
(8)			
(8)			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		2,838,555	

Schedule D (Form 990) 2017

Page 4

1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
С	Recoveries of prior year grants		2 c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4d	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Part			Retur	n.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
С					4c	
5		Ic. (This must equal Form 990, Part I, line 18) .		5	
Pai	t XIII Supplemental Info	ormation				
Pro [,] XI,	vide the descriptions required for Pi lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and 4 2d and 4b Also complete this part to provide	4, Part any a	IV, lines 1b and 2b, Part dditional information	V, line	e 4, Part X, line 2, Part
	Return Reference		Exp	planation		
See A	Addıtıonal Data Table					

Page 5		Schedule D (Form 990) 2017
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

EIN: 30-0773387

Name: Hansjorg Wyss Institute for Biologically

Inspired Engineering at harvard univ inc

Supplemental Information

Return Reference

Part V. line 4

Explanation

The endowment funds in THE Hansjorg Wyss Institute for Biologically Inspired Engineering a t Harvard University are usED to further scientific research programs and bring TOP invest igators into a collaborative effort in accordance with its mission. THE WYSS INSTITUTE END OWMENT PROVIDES FUNDING FOR SEVEN ENDOWED CHAIRS

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -	ita - DLN: 93493135089				
SCHEDULE F (Form 990) Statement of Activities Outside the United States				OMB No 1545-0047			
(1 0 000)	► Complete if the orga		Yes" to Form 990, Part IV, I to Form 990.	2017			
Department of the Treasury	Open to Public Inspection						
Internal Revenue Service Name of the organization				Employer ider	ntification number		
Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc 30-0773387							
	formation on Activiti art IV, line 14b.	es Outside the l	Jnited States. Comple	te if the organization a	inswered "Yes" to		
other assistance, the to award the grants	e grantees' eligibility for or assistance? Describe in Part V the o	the grants or assis	substantiate the amount stance, and the selection dures for monitoring the	-	✓ Yes □ No her assistance		
3 Activites per Region	(The following Part I, line	3 table can be dupli	cated if additional space is	needed)			
(a) Region	(b) Number offices in the region			(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1) See Add'l Data			-				
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuation Part I					326,500		
c Totals (add lines 3a a For Paperwork Reduction Ac		ions for Form 990	<u>Cat</u>	No 50082W Schedu	326,500 le F (Form 990) 2017		

Schedule F (Form 990)	chedule F (Form 990) 2017								
	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
(1)		Europe (Including Iceland and Greenland)	PROGRAM SERVICES	42,541	CHECK				
(2)		North America	GRANTMAKING	54,449	CHECK				
(3)									
(4)									
2 Enter total numb	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-								

(3)								
(4)								
2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-								

Schedule F (Form 990) 2017

(13) (14) (15) (16) (17) (18) Page **3**

Schedule F (Form 990) 2017

Part III can be	duplicated if addition	<u>onal space is r</u>	needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							

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

(4) (5) (6) (7) (8) (9) (10)

(11) (12)

Sche	dule F (Form 990) 2017		Page 4
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	✓ No
	Schedul	e F (Form 9	990) 2017

Schedule F (Form	990) 2017 Page 5				
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provi any additional information (see instructions).					
Return Reference	Explanation				
FORM 990, SCHEDULE F, PART I, LINE 2	ALL DISBURSEMENTS MADE BY WYSS INSTITUTE IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE REVIEWED AND APPROVED BY AUTHORIZED EMPLOYEES HARVARD UNIVERSITY AND WYSS INSTITUTE ARE RESPONSIBLE FOR THE PROGRAMMATIC AND FINANCIAL MONITORING OF THEIR SPONSORED RESEARCH AWARDS SUBRECIPIENTS, PRINCIPAL INVESTIGATORS, AND PROJECT STAFF PERFORM ONGOING REVIEWS OF PROJECT ACTIVITIES IN ADDITION, ON AN ANNUAL BASIS, HARVARD UNIVERSITY AND WYSS INSTITUTE'S RESEARCH ADMINISTRATORS REVIEW ALL ACTIVE SUBCONTRACTS AND INQUIRE FURTHER INTO THOSE THAT ARE DEEMED TO REQUIRE CLOSER SCRUTINY IN LIGHT OF A VARIETY OF ATTRIBUTES UPON IDENTIFICATION OF SUBRECIPIENTS THAT MANDATE CLOSER SCRUTINY HARVARD UNIVERSITY AND WYSS INSTITUTE IMPLEMENT ADDITIONAL				

MONITORING ACTIONS TO ENSURE COMPLIANCE WITH SUBAGREEMENT PERFORMANCE, FINANCIAL TERMS AND

CONDITIONS, AND WITH ALL APPLICABLE FEDERAL RULES AND REGULATIONS

Additional Data

East Asia and the Pacific

Software ID: Software Version:

EIN: 30-0773387

Name: Hansiers M

Name: Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

62,430

Form 990 Schedule F Par	t 1 - Activities	Outside The C	inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Send agents to seminar		713

Send agents to seminar

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and Send agents to seminar 132,595 Greenland) Europe (Including Iceland and RESEARCH 42.541 Program Services Greenland) ICOLLABORATION |

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) North America Send agents to seminar 26.878 North America Grantmakıng FEDERAL SUBAWARD 54,449

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) South America Send agents to seminar 2.235 Sub-Saharan Africa Send agents to seminar 4,659

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -					DLI	N: 934931350	89249
Schedule I (Form 990)			Other Assistan	_			0	2017	47
Department of the Treasury Internal Revenue Service			ation answered "Yes," ▶ Attach to Form le I (Form 990) and its	า 990.				Open to Public Inspection	
Name of the organization Hansjorg Wyss Institute for Biol Inspired Engineering at harvard	univ inc						oyer identific 773387	ation number	
	nation on Grants								
the selection criteria used Describe in Part IV the or	d to award the grants ganızatıon's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States			Don't IV has	✓ Yes	□ No
			ditional space is needed	ents. Complete if the o	rganization answered "Yes	on Form 990,	Part IV, line	21, for any recip	ient
(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) Descr noncash a		(h) Purpose of or assistance	f grant
(1) See Additional Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
2 Enter total number of sec3 Enter total number of oth		-					. •		20
For Paperwork Reduction Act Not	tice, see the Instruction	ns for Form 990.		Cat No 50055	5P		Sch	edule I (Form 990) 2017

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

FINANCIAL TERMS AND CONDITIONS. AND WITH ALL APPLICABLE FEDERAL RULES AND REGULATIONS

Explanation ALL DISBURSEMENTS MADE BY WYSS INSTITUTE IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE REVIEWED AND APPROVED BY AUTHORIZED EMPLOYEES FORM 990, SCHEDULE I, PART I, HARVARD UNIVERSITY AND WYSS INSTITUTE ARE RESPONSIBLE FOR THE PROGRAMMATIC AND FINANCIAL MONITORING OF THEIR SPONSORED RESEARCH AWARDS

Return Reference LINE 2

(5)

Schedule I (Form 990) 2017

SUBRECIPIENTS. PRINCIPAL INVESTIGATORS. AND PROJECT STAFF PERFORM ONGOING REVIEWS OF PROJECT ACTIVITIES IN ADDITION, ON AN ANNUAL BASIS. HARVARD UNIVERSITY AND WYSS INSTITUTE'S RESEARCH ADMINISTRATORS REVIEW ALL ACTIVE SUBCONTRACTS AND INQUIRE FURTHER INTO THOSE THAT ARE DEEMED TO REQUIRE CLOSER SCRUTINY IN LIGHT OF A VARIETY OF ATTRIBUTES UPON IDENTIFICATION OF SUBRECIPIENTS THAT MANDATE CLOSER SCRUTINY

Page 2

Additional Data

Children's Hospital Corporation 300 Longwood Avenue

Boston, MA 02115

		Software 1D	•				
		Software Version	:				
		EIN	: 30-0773387				
		Name	: Hansjorg Wyss Ins Inspired Engineerin	titute for Biologically ng at harvard univ ir			
Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic 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
Beth Israel Deaconess Medical	04-2103881	501(c)(3)	132,098				FED SPONSORED

1,071,929

AWARDS

COLLAB

FED SPONSORED

AWARDS & RESEARCH

Coffware ID.

501(c)(3)

Beth Israel Deaconess Medical 04-2103881 501(c)(3)| Center 330 Brookline Avenue Boston, MA 02215

04-2774441

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Trustees of Boston University 04-2103547 501(c)(3) 321.049 FED SPONSORED 881 Commonwealth Ave IAWARDS & RESEARCH COLLAB BOSTON, MA 02215

FED SPONSORED

LAWARDS

147,503

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

CFD Research Corporation

701 McMillian Wav

Huntsville, AL 35806

63-0944385

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Dana-Farber Cancer Institute 04-2263040 501(c)(3) 337.692 FED SPONSORED AWARDS & RESEARCH Inc 450 Broookline ave COLLAB Boston, MA 02215

The Massachusetts General 04-1564655 501(c)(3) 313.382 FED SPONSORED Hospital AWARDS

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

54 Fruit Street BOSTON, MA 02114

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 04-2103594 501(c)(3) 331.067 Massachusetts Institute of IFED SPONSORED IAWARDS & RESEARCH

Technology 77 Massachusetts Ave COLLAB Cambridge, MA 02139

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

shrewsbury, MA 01545

University of Massachusetts 04-3167352 115 34.264 INONEED SPONSORED 333 south ste 450 AWARDS & RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 25-0965591 501(c)(3) 91.383 UNIVERSITY OF PITTSBURGH IFED SPONSORED

116 Atwood street IAWARDS Pittsburgh, PA 15260 The Brigham and Women's 04-2312909 501(c)(3) 837,036

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

Boston, MA 02115

FED SPONSORED AWARDS & RESEARCH Hospital Inc 75 Francis Street COLLAB

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Trustees Of Columbia 13-5598093 501(c)(3) 274.687 IFED SPONSORED UnivERSITY IAWARDS

615 West 131st Street New York, NY 10027

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

Ithaca, NY 14850

Cornell University 15-0532082 501(c)(3) 203.850 FED SPONSORED 341 Pine Street Road AWARDS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance New Balance Athletic Shoe Inc 04-2460172 45.385 IFED SPONSORED 20 Guest Street IAWARDS Boston, MA 02135

20 Guest Street
Boston, MA 02135

The Research Foundation for SUNY
PO Box 9

AWARDS

AWARDS

AWARDS

FED SPONSORED
AWARDS

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

Albany, NY 12201

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance J Craig Venter Institute 52-1842938 501(c)(3) 600.064 FED SPONSORED

9704 Medical Center Dr Rockville, MD 20850		(-)(-)			AWARDS
COLD SPRING HARBOR LABORATORY PO BOX 100 ONE BUNGTOWN RD	11-2013303	501(c)(3)	2,025,740		FED SPONSORED AWARDS

COLD SPRING HARBOR, NY 11724

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 41-6011702 501(c)(3) 176.018 MAYO CLINIC IFED SPONSORED 200 FIRST STREET SW IAWARDS ROCHESTER, MN 55905

NONFED SPONSORED

IAWARDS

126,593

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

501(c)(3)

The Trustees of Princeton

701 CARNEGIE CENTER PRINCETON, NJ 08540

University

21-0634501

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 04-2103634 501(c)(3) 113.614 TRUSTEES OF TUFTS COLLEGE IFED SPONSORED 169 HOLLAND STREET IAWARDS & RESEARCH

169 HOLLAND STREET
SOMERVILLE, MA 02144

Temple University 23-1365971 501(c)(3) 126,379
1805 NORTH BROAD ST
WACHMAN HALL

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

PHILADELPHIA, PA 19122

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 22-3681278 501(C)(3) 85.001 THE CLOUD ARTSCIENCE IRESEARCH FOUNDATION COLLABORATIONS

FED SPONSORED

AWARDS

1.114.260

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

650 FAST KENDALL ST CAMBRIDGE, MA 02142 READCOOR INC

CAMBRIDGE, MA 02139

840 Memorial Drive

81-2041558

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance UNIVERSITY OF LOUISVILLE 61-1029626 501(c)(3) 38.346 RESEARCH RESEARCH FOUNDATION INC COLLABORATIONS CONTROLLERS OFFICE LOUISVILLE, KY 40292 SPONSORSHIP

KNect365 US Inc (DBA-13-3179256 6.400 XCONOMY)

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

PO Box 3685 BOSTON, MA 02241

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed D	ata	-	DLN: 934	9313	35089	249
Sch	edule J	Compensa	atio	on Information	ОМ	1B No	1545-0	0047
(For	n 990)	For certain Officers, Directors	s, Tr	ustees, Key Employees, and High	nest			
		Comper ▶ Complete if the organization an		ed Employees	line 23	20	17	7
		▶ Atta	ach 1	to Form 990.				
•	tment of the Treasury al Revenue Service			(Form 990) and its instructions is ov/form990.	s at C		to Pul ectio	
	ne of the organiza				Employer identificat			
	sjorg Wyss Institute oired Engineering at				30-0773387			
Pa	rt I Questi	ons Regarding Compensation		-				
							Yes	No
1a		piate box(es) if the organization provided any ection A, line 1a Complete Part III to provide						
		or charter travel	_	Housing allowance or residence for p				
	_	companions	_	Payments for business use of persor				
		nification and gross-up payments	_	Health or social club dues or initiatio				
	☐ Discretion	ary spending account L	_	Personal services (e g , maid, chauff	eur, cner)			
b		ces in line 1a are checked, did the organization Il of the expenses described above? If "No," c			ent or reimbursement	1b	Yes	
2		ition require substantiation prior to reimbursin es, officers, including the CEO/Executive Direc			152	2	Yes	
	directors, truste	es, officers, including the CEO/Executive Direc	ctor,	regarding the items checked in line	lar			
3		of any, of the following the filing organization is			e			
	_	EO/Executive Director Check all that apply D d organization to establish compensation of th		•	n Part III			
	·		_	•				
		ent committee Lent compensation consultant	_	Written employment contract Compensation survey or study				
		of other organizations	-	Approval by the board or compensat	ion committee			
4	During the year related organiza	did any person listed on Form 990, Part VII, tion	Sec	tion A, line 1a, with respect to the fil	ing organization or a			
•	_	ance payment or change-of-control payment?				4a		No
a b		receive payment from, a supplemental nong		ied retirement plan?		4b		No
c	•	receive payment from, an equity-based comp		· ·		4c		No
	•	f lines 4a-c, list the persons and provide the a		-	III			
5), 501(c)(4), and 501(c)(29) organizatio ed on Form 990, Part VII, Section A, line 1a, d						
5		ontingent on the revenues of	na ci	le organización pay or accide any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section A, line 1a, d ontingent on the net earnings of	lıd th	ne organization pay or accrue any				
а	The organization	7				6 a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A, line 1a, d escribed in lines 5 and 6 ⁷ If "Yes," describe in				7		No
8		nts reported on Form 990, Part VII, paid or ac itial contract exception described in Regulatio			scribe			N-
9		3, did the organization also follow the rebuttab	ble p	resumption procedure described in I	Regulations section	9		No_
For I	Danerwork Pedi	ction Act Notice, see the Instructions for	For	m 990 Cat No 5	0053T Schedule 1		990)	2017

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 (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC (C) Retirement (E) Total of (F) and other benefits columns compensation Compensation in deferred (B)(i)-(D) column (B)

	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017	Page 3									
Part III Supplemental Inform	art III Supplemental Information									
Provide the information, explanation, or	rovide 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									
	THE HANSJORG WYSS INSTITUTE FOR BIOLOGICALLY INSPIRED ENGINEERING AT HARVARD UNIVERSITY, INC (WYSS INSTITUTE) TRAVEL POLICY ALLOWS FOR FIRST CLASS TRAVEL FOR WYSS INSTITUTE BUSINESS PURPOSES ON AN EXCEPTION BASIS IN LIMITED CIRCUMSTANCES IN ACCORDANCE WITH THIS POLICY, ONE OFFICER TRAVELED FIRST CLASS DURING THE YEAR TRAVEL EXPENSES ARE INCURRED FOR WYSS INSTITUTE BUSINESS PURPOSES AND ARE NOT TREATED AS TAXABLE COMPENSATION									

Schedule 1 (Form 990) 2017

Software ID:

Software Version:

EIN: 30-0773387

Name: Hansjorg Wyss Institute for Biologically

Inspired Engineering at harvard univ inc

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

(A) Name and Title

(B) Propidown of W-2 and/or 1099-MISC compensation

(C) Retirement and

(D) Nontaxable

(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1ALAN GARBER DIRECTOR	(1)				0	0	o	
	(11)	684,551		2,356	34,140	159,853	880,900	
1JEREMY BLOXHAM DIRECTOR	(1)			·	0	0	0	
DIRECTOR	(11)	318,621		113,888	34,140	10,368	477,017	
2KATHERINE LAPP	(1)				0	0	0	
DIRECTOR	(11)	673,154		20,356	34,140	9,247	736,897	
3RICHARD MCCULLOUGH	(1)	,		20,330	0	0	730,037	
DIRECTOR	(11)	420,716		65,145	24.140	23,325	E42 226	
4FRANCIS DOYLE	(1)	.23,723		65,145	34,140	23,323	543,326	
DIRECTOR	(11)	444,821		422.250	24.40	26.260		
5 GEORGE DALEY	(1)	444,021		123,358	34,140	26,360	628,679	
DIRECTOR		700 000						
6DONALD INGBER	(11)	788,000	0	19,671	34,140	141	841,952	
PRESIDENT	100				0	0	0	
	(11)	439,662	110,917	2,748	34,140	23,489	610,956	
7 PETER KATZ CLERK (UNTIL 12/15/17)	(1)				0	0	0	
	(11)	260,926	16,100	46,388	34,140	24,057	381,611	
8JULIE FABER CLERK (SINCE 12/15/17)	(1)				0	0	0	
	(11)	257,658	16,100	18,243	34,140	224	326,365	
9 AYIS ANTONIOU TREASURER/ADMIN	(1)				0	0	0	
DIRECTOR	(11)	349,594	73,658	20,073	34,140	9,716	487,181	
10MARY TOLIKAS OPERATIONS DIRECTOR	(1)				0	0	0	
OF EIGHTONS BIRECTOR	(11)	363,775	73,658	373	34,140	22,921	494,867	
11MICHAEL SUPER LEAD SENIOR STAFF	(1)		•		O	0	O	
SCIENTIST	(11)	187,944	30,000	254	28,010	26,196	272,404	
12ROBERT CUNNINGHAM	(1)	·	30,000		0	0	0	
PLATFORM DEVELOPMENT DIRECTOR	(11)	184,698	23,000	233	 26,568	26,832	261,331	
13JAMES NIEMI	(1)		23,000	233	20,308	20,832	201,331	
LEAD SENIOR STAFF ENGINEER	(11)	176,829	30 500		26.464	20.502		
14WILLIAM BLAKE	(1)	170,029	28,500	82	26,464	28,503	260,378	
BUSINESS DEVELOPMENT LEAD		100 747						
15EDWARD DOHERTY	(II)	198,747	24,000	61	31,748	3,241	257,797	
SENIOR LEAD STAFF SCIENTIST						0		
	(11)	168,885	27,000	207	24,658	25,909	246,659	

efile GRAPH	IC print - DO	NOT PROCESS	As Filed Data -		DLN:	93493135089249
SCHEDUL (Form 990 or EZ)	99() or 990- 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.				ions on on.	OMB No 1545-0047 2017 Open to Public Inspection
Internal Revenue Service Name of the organization Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc			Employer identi	fication number		
990 Schedule	O, Suppleme	ental Informatio	on			
Return Reference				Explanation		
FORM 990, PART III, LINE 1	NC (wyss institute purposes the LLOWS of HAI ESEARCH AND FUL ACTIVITY EVENUE CODE he WYSS INSTITUTE OF HOM A RELATED GBER HAVE AS INSTITUTE IS LLOWS OF HAI D IN ADDITION RS AND RIGHT	ute) IS ORGANIZED HE CORPORATION RVARD COLLEGE D INVENTIONS IN T PERMITTED TO AN E AND CHAPTER 11 ITUTE HAS NO EM EL ASSIGNED to the O OFFICER OF HAF ARVARD UNIVERS D ORGANIZATION BUSINESS RELAT ES THE INDIVIDUAL RVARD COLLEGE, ITO THE RIGHT TO S AS ARE VESTEE	O AND OPERATED EXITED E	LY INSPIRED ENGINEERING A CCLUSIVELY FOR CHARITABLE OAS A SUPPORTING ORGANI. THE PROVING THE PROVOST ON UNTIL HIS OR HER SUCCES OF OR UNTIL HIS OR HER SUCCES OF OR CAND, THE MEMBER OF OR CAND THE ART VI, LINE 2 ALAN OF CAND OR CAN	LE AND EDUCATION OF PRESIDENT AND DEVELOTION OF PRESIDENT AND DEVELOTION OF THE INTERDOM SERVICE PRESIDENT AND DOMEST OF PRESIDENT AS SOR HAS BEEN GANIZATION OR	DNAL IDENT AND FE DP R ITHER LAW NAL R LINE 2A t DF H DENT AND ATION FR VALD IN HE WYS AND FE INSTALLE ER POWE THE BYLA

Return Explanation
Reference

Form 990 The Wyss Institute's tax return was prepared by management in connection with an independe
Part VI, line nt accounting firm, AND IS REVIEWED BY THE AUDIT COMMITTEE A final copy of Form 990 was p

royided to each voting member of the Board prior to filing with the IRS

990 Schedule O, Supplemental Information

11B

Return Explanation
Reference

990 Schedule O, Supplemental Information

13 and 14

Form 990, part VI, Lines

The Wyss Institute adheres to Harvard Universitys whistleblower and document retention and destruction policies

Return Explanation

990 Schedule O, Supplemental Information

Form 990, part VI, Lines
15a and 15b
15a a

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990, part VI, Lines 10

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	135089	249
SCHEDULE R (Form 990)		Related O	zation ar	swered "Yes ▶ Attach to	s" on Form Form 990.	990, Parl	IV, line 33	, 34, 35b,	36, or				17	
Department of the Treasury Internal Revenue Service	•	Information about S	chedule I	R (Form 990)) and its in	structions	s is at <u>www</u>	irs.gov/f	orm990	<u>)</u> .		Open to	Public ection	
Name of the organization Hansjorg Wyss Institute for Biologica Inspired Engineering at harvard univ										loyer identif 773387	icatior	number		
Part I Identification	of Disregarded E	ntities Complete If the	ne organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3		,,,,,,,,,				
Name, address, and	(a) EIN (if applicable) of disr	egarded entity		(b) Primary a		Legal dom	c) nicile (state n country)	(d) Total inc	ome	(e) End-of-year as	ssets	(f Direct co ent	ntrolling	
	of Related Tax-Ex		S Comple	ete ıf the org	anızatıon	answered	"Yes" on F	orm 990,	Part IV	/, line 34 be	cause	ıt had one or	more	
See Additional Data Table Name, address, an	(a) d EIN of related organizat	ion	Prim	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod		Public cl	(e) narity status n 501(c)(3))	Dir	(f) rect controlling entity	Section (13) cor enti	512(b) itrolled ty?
													Yes	No
For Paperwork Reduction Ac	t Notice, see the Inc	structions for Form 99	00.		Ca	it No 5013	 35Y				Schr	edule R (Form	990) 20	17

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. See Additional Data Table (b) (c) (d) (i) (k) (e) (f) (g) (ı) Name, address, and EIN of Primary Legal Direct Predominant Share of Share of Disproprtionate Code V-UBI General or Percentage related organization controlling income(related, total income end-of-year allocations? amount in box ownership activity domicile managing unrelated, 20 of (state entity assets Schedule K-1 excluded from or tax under (Form 1065) foreign country) sections 512-514) Yes No Yes No Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of 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) (b) (c) (d) (e) (f) (h) (ı) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Section 512(b) Primary activity Percentage domicile (C corp, S corp, ownership (13) controlled related organization entity ıncome vear (state or foreign or trust) assets entity? country) Yes No See Additional Data Table

Schedule R (Form 990) 2017										
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.										
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No							
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		Ī								
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)	10	Yes								
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)	1 g		No							
h Purchase of assets from related organization(s)	1h		No							
i Exchange of assets with related organization(s)	11		No							
	4.5	+	 							

		1 1	
е	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
	Lagra of facilities, equipment, or other assets to related organization(s)	11	No

е	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		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	_
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		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

f	Dividends from related organization(s)	1f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		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)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p	Yes	-
q	Reimbursement paid by related organization(s) for expenses	1 q		No

(b) Transaction

type (a-s)

(c) Amount involved

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

1r Yes 1s

(d) Method of determining amount involved

Schedule R (Form 990) 2017

No

(a) Name of related organization

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

was not a related organization. See instructions regarding exclusion for certain investment particles inps																					
(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) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(h) Disproprtionate allocations?								(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No									
										Schedul	e R (Forn	1 99	0) 2017								

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017

Software ID: Software Version:

EIN: 30-0773387

Name: Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

Form 990, Schedule R, Part II - Identification of Related			/ ZEV	1 7-3	15	1 .	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(i contro entit	n 512 13) olled
						Yes	No
	RESEARCH	TZ			HPF	Yes	
PO BOX 79810 MWAI KIBAKI RD DAR ES SALAAM TZ							
	PERFORMING AR	MA	501(C)(3)	10	HPF	Yes	
64 BRATTLE ST CAMBRIDGE, MA 02138 04-2665867							
AVENIDA PAULISTA 1337 CJ 171 SAO PAULO 01311-200 BR	EDUCATION	BR			HPF	Yes	
	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 23-7014581							
	RESEARCH	BC			HPF	Yes	
PRIVATE BAG BO 320 GABORONE BC							
62 RUE FRANCOIS 1 ER	RESEARCH SUPP	FR			HPF	Yes	
PARIS FR							
600 ATLANTIC AVENUE BOSTON, MA 02210	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
04-3044742	RESEARCH SUPP	MA	501(C)(3)	12, TYPE I	HPF	Yes	
800 BOYLSTON ST BOSTON, MA 02199 04-3478889							
	EDUCATION AND	MA	501(C)(3)	12, TYPE I	HPF	Yes	
401 PARK DR BOSTON, MA 02215 52-2446955							
	EDUCATION	MA	501(C)(3)	12, TYPE I	NA	Yes	
141 PORTLAND ST 9TH fL CAMBRIDGE, MA 02139 46-0807740							
	RESEARCH	MA	501(C)(3)	12 TYPE III	HPF	Yes	
745 BOYLSTON ST 7TH FL BOSTON, MA 02116 04-2702030							
	RESEARCH SUPP	AR			HPF	Yes	
CARLOS PELLEGRINI 1163 PISO 12 CO BUENOS AIRES C1009ABW AR							
	FACULTY AND S	CI			HPF	Yes	
AVENIDA DAG HAMMARSKJOLD 3269 SANTIAGO CI							
	RESEARCH SUPP	MA	501(C)(3)	12, TYPE I	HPF	Yes	
HMS DEAN OF FAC OF MED BOSTON, MA 02115 04-3293162							
	EXECUTIVE EDU	MA	501(C)(3)	12, TYPE I	HPF	Yes	
SOLDIERS FIELD RD BOSTON, MA 02163							
04-3395140	PUBLISHING	MA	501(C)(3)	12, TYPE I	HPF	Yes	
20 GUEST STREET STE 700 BRIGHTON, MA 02135 04-3177990							
	ELECTRICITY P	MA	501(C)(3)	12, TYPE I	HPF	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 03-0425512							
	GLOBAL SUPPOR	MA	501(C)(3)	12, TYPE I	HPF	Yes	
114 MOUNT AUBURN ST 5TH FL CAMBRIDGE, MA 02138 45-4535664							
	RESEARCH	TS			HGRSS	Yes	
3EME ETAGE IMMEUBLE SLIM BLOCK 1 TUNIS 1053 TS							
	RESEARCH	IN			HGRSS	Yes	
9SE 9TH FL 29 SENAPATI BAPAT MA MUMBAI, MAHARASHTRA 400028 IN							

Form 990, Schedule R, Part II - Identification of Related (a)	Tax-Exempt Organizat (b)	tions (c)	(d)	(e)	(f)	(6	a)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling entity	Sectio	n 512 (13)
		or foreign country)		(if section 501(c) (3))	J,	contr	olled
				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Yes	No
	RESEARCH	SF			HGRSS	Yes	
22 BREE ST CAPE TOWN 8000							
SF	RESEARCH	UK			HGRSS	Yes	
VERNON HOUSE 22 SICILIAN AVE							
LONDON WC1A-2QS UK							
	PUBLISHING	MA	501(C)(3)	12 TYPE III	HPF	Yes	
7 WARE ST CAMBRIDGE, MA 02138							
04-6112308	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE							
BOSTON, MA 02210 23-7361259							
	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210							
04-3070522	MEDICAL EDUCA	MA	501(C)(3)	12, TYPE I	NA	Yes	
25 SHATTUCK ST						-	
BOSTON, MA 02115 04-2213292							<u>L</u>
	RESEARCH SUPP	MA	501(C)(3)	12, TYPE I	HPF	Yes	
25 SHATTUCK ST BOSTON, MA 02115							
31-1745145	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE				12,2			
BOSTON, MA 02210 04-3070519							
	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210							
22-3138409	TITLE HOLDING	MA	501(C)(25)		HPF	Yes	
1033 MASS AVE 3RD FL							
CAMBRIDGE, MA 02138 04-3373410							
	REAL ESTATE B	MA	501(C)(3)	12, TYPE I	HPF	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138							
04-2649303	EDUCATION	MA	501(C)(3)	12, TYPE I	NA	Yes	
VANSERG HALL 25 FRANCIS AVE							
CAMBRIDGE, MA 02138 04-2062394							
	RESEARCH	MA	501(C)(3)	12, TYPE I	HPF	Yes	
1350 MASS AVE CAMBRIDGE, MA 02138							
22-3032677	ENERGY SERVIC	MA	501(C)(3)	12, TYPE I	NA	Yes	
160 LONGWOOD AVE							
BOSTON, MA 02115 04-3476764							
400 PYST OW ST	RESEARCH	MA	501(C)(3)	12, TYPE I	NA	Yes	
100 BIGELOW ST HOLYOKE, MA 01040 27-3014805							
2/-50146003	RESEARCH	MA	501(C)(3)	12, TYPE I	NA	Yes	
100 BIGELOW ST HOLYOKE, MA 01040							
45-2257442	INVESTMENT MA		E01/C)/3)	12 TVPF 1	HPF	V	
600 ATLANTIC AVENUE	TINA EO LIMEIN I MA	MA	501(C)(3)	12, TYPE I	III E	Yes	
BOSTON, MA 02210 04-2997367							
	EDUCATION AND	MA	501(C)(3)	2	NA		No
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138							
04-2103580	ATHIETICS	<u> </u>	E01(C)(3)	12 TVPF 1	HPF	V-:	
MURR CTR 65 NORTH HARVARD ST	ATHLETICS	со	501(C)(3)	12, TYPE I		Yes	
BOSTON, MA 02163 51-0189788							
<u> </u>	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE							
BOSTON, MA 02210 04-3263656							ĺ

(c) (d) (e) (f) (g) (a) (b) Name, address, and EIN of related organization Primary activity Legal domicile Exempt Code Public charity Direct controlling Section 512 (state (b)(13)section status entity (if section 501(c) controlled or foreign country)

MA

DC

501(C)(3)

501(C)(3)

12. TYPE I

12, TYPE II

INA

HPF

Yes

Yes

				(3))		entit	ty?
						Yes	No
	STUDENT SUPPO	MA	501(C)(3)	12, TYPE I	HPF	Yes	
SOLDIERS FIELD RD							

MEDICAL EDUCA

EDUCATION

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

BOSTON, MA 02163 57-1152691

330 BROOKLINE AVE BOSTON, MA 02215 04-3326928

1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138

53-0199180

Form 990, Schedule R, Part	III - Identification (of Relate	ed Organizati	ons Taxable a	s a Partnersi	hip										
(a)	(b)	(c) Legal	(d)	(e) Predominant	(f)		(h	n) rtionate (i)		(j Gen	eral	(k)				
Name, address, and EIN of related organization	Primary activity	Domicile (State or Foreign Country)	Direct Controlling Entity	income(related, unrelated, excluded from tax under sections		Share of end- of-year assets	allocations?				allocations?		Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Mana Part	aging	Percentage ownership
				512-514)			Yes	No		Yes	No					
	INVESTMENTS	DE	NA	N/A												
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 47-4542524																
170 BROADWAY LLC	INVESTMENTS	DE	NA	N/A												
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 46-4145333																
4 BLACKFAN SECONDARY CONDOMINIUM ASSOCIA	REAL ESTATE	MA	NA	N/A												
180 A LONGWOOD AVENUE BOSTON, MA 02115 00-1330897																
	INVESTMENTS	DE	NA	N/A												
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 30-0829016																
522 FULTON REALTY LLC	INVESTMENTS	DE	NA	N/A								_				
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 13-4215034																
	INVESTMENTS	DE	NA	N/A												
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 46-5244987																
ADAGE CAPITAL PARTNERS GP	INVESTMENTS	DE	NA	N/A												
LLC 200 CLARENDON ST 52ND FLOOR BOSTON, MA 02116 04-3574588																
	INVESTMENTS	DE	NA	N/A												
C/O AMERRA CAPITAL MANAGEMENT 1140 NEW YORK, NY 10036 27-3310646																
APOLLO THUNDER PARTNERS LP ONE MANHATTANVILLE ROAD SUITE 201 PURCHASE, NY 10577	INVESTMENTS	DE	NA	N/A												
36-4827348 AR HOLDINGS II LLC	INVESTMENTS	DE	NA	N/A												
11990 SAN VINCENTE BLVD STE 200 LOS ANGELES, CA 90049																
36-4868496 ATLANTIC CT HOLDINGS II LLC	INVESTMENTS	DE	NA	N/A												
4343 VON KARMAN AVE SUITE 200 NEWPORT BEACH, CA 92660																
46-2548899 ATLANTIC CT HOLDINGS III LLC	INVESTMENTS	DE	NA	N/A												
4343 VON KARMAN AVE SUITE 200 NEWPORT BEACH, CA 92660																
47-5397308 ATLANTIC CT HOLDINGS LLC	INVESTMENTS	DE	NA	N/A												
4343 VON KARMAN AVE SUITE 200																
NEWPORT BEACH, CA 92660 46-2501216																
-	INVESTMENTS	DE	NA	N/A												
4380 LAJOLLA VILLAGE DRIVE SUITE 2 SAN DIEGO, CA 92122 47-2638594																
ATLANTIC REGENT HOLDINGS LLC	INVESTMENTS	DE	NA	N/A												
11990 SAN VICENTE BOULEVARD SUITE LOS ANGELES, CA 90049 47-2097418																

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) General (c) Legal Domicile (h) (e) (g) Share of end-(d) Disproprtionate Predominant (i) Direct Share of total or Name, address, and EIN of related organization allocations? Percentage Primary activity Code V-UBI amount in income(related. Managing Controlling (State ıncome of-year assets unrelated, Box 20 of Schedule K-1 ownership Partner? or Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes No Yes No ATLANTIC SCIOTO HOLDINGS INVESTMENTS DE NΑ N/A 230 PARK AVENUE 12TH FLOOR NEW YORK, NY 10169 47-1979711 ATLANTIC TORONTO LP INVESTMENTS DE N/A NΑ 600 ATLANTIC AVENUE BOSTON, MA 02210 35-2384789 ATLANTIC US REAL ESTATE LLC INVESTMENTS DE NA N/A C/O BAIN CAPITAL RE LP 200 CLAREND BOSTON, MA 02116 82-4033944 BAINBRIDGE CC URBANA INVESTMENTS N/A DE NA APARTMENTS LLC 12765 WEST FOREST HILL BLVD WELLINGTON, FL 33414 80-0910794 BAYNORTH REALTY FUND IV INVESTMENTS МА NΑ N/A LIMITED PARTNER 200 CLARENDON STREET 54TH FLOOR BOSTON, MA 02116 04-3423446 BCC CAMBRIDGE FINANCING INVESTMENTS N/A DE lνa SOLUTION (REVOLV MAPLES FIDUCIARY SERVICES DELAWARE WILMINGTON, DE 19807 82-3380137 BCC CAMBRIDGE FINANCING INVESTMENTS DΕ NΑ N/A SOLUTION (TL) L MAPLES FIDUCIARY SERVICES WILMINGTON, DE 19807 82-3376244 BH INVESTMENTS FUND LLC INVESTMENTS DE NA N/A 655 THIRD AVENUE - 11TH NEW YORK, NY 10017 04-3070522 BLACKSTONE EDISON MANAGED INVESTMENTS DE NΑ N/A PARTNERSTE L C/O THE BLACKSTONE GROUP 345 PARK NEW YORK, NY 10154 81-1172959 INVESTMENTS N/A BLC FIC FIDC-NP BR lΝΑ BLC II MASTER FUND LP INVESTMENTS CJ NΑ N/A PO BOX 309 UGLAND HOUSE GRAND CAYMAN, GRAND CAYMAN KY1-1104 98-1386749 BLC MASTER FUND LP INVESTMENTS CJ NA N/A PO BOX 309 UGLAND HOUSE GEORGE TOWN, GRAND CAYMAN KY1-1104 CJ 98-1251228 BLUE ATLANTIC ACQUISITION INVESTMENTS DE NA N/A GROUP II LLC 353 NORTH CLARK STREET SUITE 730 CHICAGO, IL 60654 90-0909419 BLUE ATLANTIC ACQUISITION INVESTMENTS DE NA N/A **GROUP LLC** 353 NORTH CLARK STREET SUITE CHICAGO, IL 60654 27-4668306 CA ATLANTIC URBAN LV LLC INVESTMENTS DE NA N/A C/O CROWN ACQUISITIONS INC NEW YORK, NY 10065 81-5215845

Form 990, Schedule R, Part	III - Identification		ed Organizati	ons Taxable a	s a Partners	hip	1		I			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropi allocat	rtionate tions?	Code V-UBI amount in		j) eral or aging ner?	(k) Percentage ownership
CA USQUARE LLC	INVESTMENTS	DE	NA	N/A			Yes	No		Yes	No	
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 47-3889463												
CCC INVESTORS HOLDINGS II LP	INVESTMENTS	DE	NA	N/A								
C/O CRRF GP II LLC GENERAL PARTNER NEWTON LOWER FALLS, MA 02462 47-2033623												
CERBERUS MA PARTNERS LP	INVESTMENTS	CJ	NA	N/A								
C/O CERBERUS CAPITAL MANAGEMENT L GEORGE TOWN, GRAND CAYMAN KYI-9005 CJ												
36-4762301 CH NBS II LIMITED	INVESTMENTS	JE	NA	N/A								
C/O CRESTBRIDGE CORP SERVICES LTD ST HELIER, CHANNEL ISLANDS JE1 0BD JE	INVESTIMENTS											
81-4342773 CH NBS LIMITED	INVESTMENTS	JE	NA	N/A								
C/O CRESTBRIDGE CORP SERVICES LTD ST HELIER, CHANNEL ISLANDS JE1 0BD JE 98-1207239												
	INVESTMENTS	DE	NA	N/A								
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 46-2568911												
CHEROKEE INVESTMENT PARTNERS III PARALLE	INVESTMENTS	DE	NA	N/A								
111 EAST HARGETT STREET SUITE 300 RALEIGH, NC 27601 71-0890767												
CORAL SENIOR HOUSING II LLC	INVESTMENTS	DE	NA	N/A								
1275 PENNSYLVANIA AVENUE NORTH WEST WASHINGTON, DC 20004 32-0410036												
CORAL SENIOR HOUSING III LLC	INVESTMENTS	DE	NA	N/A								
1275 PENNSYLVANIA AVENUE NORTH WEST WASHINGTON, DC 20004 38-3931197												
CORAL SENIOR HOUSING IV LLC	INVESTMENTS	DE	NA	N/A								
1275 PENNSYLVANIA AVENUE NORTH WEST WASHINGTON, DC 20004 81-4574488												
	INVESTMENTS	DE	NA	N/A								
1275 PENNSYLVANIA AVENUE NORTH WEST WASHINGTON, DC 20004 27-3934030												
	INVESTMENTS	DE	NA	N/A								
1275 PENNSYLVANIA AVE NW 2ND FLOO WASHINGTON, DC 20004 82-2658473												
CORAL-FSP INVESTMENT FUND II LLC	INVESTMENTS	DE	NA	N/A								
178 SOUTH MAIN STREET SUITE 375 ALPARETTA, GA 30009												
	INVESTMENTS	DE	NA	N/A								
HOLDINGS LLC 300 THIRD AVENUE SUITE 2 WALTHAM, MA 02451 04-3520886												
	INVESTMENTS	DE	NA	N/A								
C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 47-3233984												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) General Legal (d) Predominant Disproprtionate (b) or Direct Share of end-Share of total Domicile Name, address, and EIN of Primary activity income(related, allocations? Code V-UBI amount in Percentage Controlling Managing of-vear assets (State income ownership related organization unrelated, Box 20 of Schedule K-1 Partner? or Entity (Form 1065) excluded from Foreign tax under Country) sections 512-514) Yes No Yes No CROWN ATLANTIC INTL OLIVE INVESTMENTS DE NΑ N/A C/O CROWN ACQUISITIONS INC 667 MA NEW YORK, NY 10065 47-1830643 CROWN ATLANTIC RETAIL II LLC INVESTMENTS DE N/A NA C/O CROWN ACQUISITIONS INC NEW YORK, NY 10065 36-4806500 CROWN ATLANTIC RETAIL LLC **INVESTMENTS** DE NΑ N/A C/O CROWN ACQUISITIONS INC NEW YORK, NY 10065 46-1605646 CROWN ICS 5TH ACQUISITIONS INVESTMENTS DE NA N/A C/O CROWN ACQUISITIONS INC NEW YORK, NY 10065 47-1827246 CROWN SRP LLC INVESTMENTS DE NΑ N/A C/O CROWN ACQUISITIONS INC NEW YORK, NY 10065 47-2106149 CVI CHVF LP INVESTMENTS DE NA N/A 9320 EXCELSIOR BLVD MS144-HOPKINS, MN 55343 80-0941373 DS CO-INVESTORS LLC INVESTMENTS DE INA N/A 7121 FAIRWAY DRIVE SUITE 410 PALM BEACH GARDENS, FL 33418 55-0911808 EAE ATLANTIC LLC INVESTMENTS DE NA N/A C/O AE REAL ESTATE HOLDINGS LLC 1 NEW YORK, NY 10024 36-4743445 EDGE PRINCIPAL INVESTMENTS INVESTMENTS DE NA N/A III PV LP 1700 BROADWAY 37TH FLOOR NEW YORK, NY 10019 47-5253229 EVOLUTION CREDIT PARTNERS I INVESTMENTS DE NA N/A 125 HIGH STREET HIGH STREET **TOWER** BOSTON, MA 02210 GBE INVESTMENTS LP INVESTMENTS CJ NA N/A MAPLES CORPORATE SERVICES GEORGE TOWN, GRAND CAYMAN KY1-1104 CJ GERRITY ATLANTIC RETAIL INVESTMENTS DE NA N/A PARTNERS LLC 973 LOMAS SANTA FE DRIVE SOLANA BEACH, CA 92075 27-4257497 INVESTMENTS GREENFIELD BLR FINANCE N/A DΕ NA PARTNERS LP C/O GREENFIELD PARTNERS LLC WESTPORT, CT 06880 27-4267038 GREENFIELD BLR PARTNERS LP INVESTMENTS NA N/A DE 2 POST ROAD WEST WESTPORT, CT 06880 20-1221910 GUEPARDO MASTER FUND LLC INVESTMENTS DΕ NA N/A 98-0536488

Form 990, Schedule R, Part	III - Identification (1	ed Organizati	ons Taxable a	s a Partners	hip	ı		I	1 4	.,	l
(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	(f) Share of total Income	(g) Share of end- of-year assets	(h Dispropi allocat	rtionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
HAMPDEN INSURANCE PARTNERS	INVESTMENTS	CJ	NA	512-514) N/A			Yes	No		Yes	No	
I LP C/O MOURANT OZANNES CORPORATE SERVI CAMANA BAY, GRAND CAYMAN KY1-1108 CJ												
	INVESTMENTS	MA	NA	N/A								
HMC INC 600 ATLANTIC AVE BOSTON, MA 02210 04-3344621												
HARVARD INVESTMENT ASSOCIATES	INVESTMENTS	DE	NA	N/A								
600 ATLANTIC AVENUE BOSTON, MA 02210 04-3507407												
HB INSTITUTIONAL LIMITED PARTNERSHIP	INVESTMENTS	MA	NA	N/A								
10 ST JAMES AVE STE 1700 BOSTON, MA 02116 04-3425685												
1345 AVENUE OF THE AMERICAS 42ND F NEW YORK, NY 10105	INVESTMENTS	DE	NA	N/A								
47-2205984	INVESTMENTS	CJ	NA	N/A								
MAPLES CORPORATE SERVICES LTD PO B GEORGE TOWN, GRAND CAYMAN KY1-1104 CJ												
98-1196430 ILS PROPERTY & CASUALTY FUND	INVESTMENTS		NA	N/A		1						
II LP	TIMENTS		INA	IN/A								
C/O CREDIT SUISSE ASSET MGMT LLC NEW YORK, NY 100103629												
INDY BLUE EQUITY LLC	INVESTMENTS	DE	NA	N/A								
C/O US REALTY ADVISORS LLC 1370 NEW YORK, NY 10019 45-3668839												
	INVESTMENTS	DE	NA	N/A								
PO BOX 171305 SALT LAKE CITY, UT 84117 82-1208714												
	INVESTMENTS	DE	NA	N/A								
201 MAIN STREET SUITE 2300 FORT WORTH, TX 76102 45-4748900												
	INVESTMENTS	DE	NA	N/A								
300 N MAIN STREET SUITE 402 GREENVILLE, SC 29601 47-1180960												
JUS BG I - MASTER LP (FKA GAVEA JUS BG 1	INVESTMENTS	DE	NA	N/A								
3500 S DUPONT HIGHWAY DOVER, DE 19901 46-2781217												
L-A SATURN ACQUISITION LP 2929 ARCH STREET SUITE 1650 THE C	INVESTMENTS	DE	NA	N/A								
PHILADELPHIA, PA 19104 30-0825127	IND/ECTATES	67	NIA.	N/A								
LIQUID REALTY PARTNERS IV (PF1) LP	INVESTMENTS	CJ	NA	N/A								
101 MARKET ST 769 CAMANA BAY GEORGE TOWN, GRAND CAYMAN KY1-9006 CJ												
26-0346359 LIQUID REALTY PARTNERS IV INVESTMENTS AI	INVESTMENTS	DE	NA	N/A								
199 E LINDA MESA AVE 10 DANVILLE, CA 94526												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) General (h) Lègal Domicile (g) Share of end-(d) (a) Name, address, and EIN of Disproprtionate (k) (b) Predominant Direct Share of total or allocations? Code V-UBI amount in Percentage Primary activity income(related. Managing (State Controlling ıncome of-year assets related organization unrelated, Box 20 of Schedule K-1 ownership Partner? or Entity excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes No Yes No LIQUID REALTY PARTNERS IV INVESTMENTS DE NA N/A INVESTMENTS II 199 E LINDA MESA AVE 10 DANVILLE, CA 94526 LIQUID REALTY PARTNERS IV TAX INVESTMENTS CJ NA N/A 101 MARKET ST 769 CAMANA BAY GEORGE TOWN, GRAND CAYMAN KY1-9006 26-0489545 LMA RESEARCH COMPLEX REAL ESTATE N/A MA NA PRIMARY CONDOMINIUM 181 A LONGWOOD AVE BOSTON, MA 02116 00-1330896 LONGFELLOW ATLANTIC INVESTMENTS DE NA N/A HOLDINGS LLC 260 FRANKLIN STREET SUITE 1920 BOSTON, MA 02210 80-0965922 LUBERT-ADLER CAPITAL REAL INVESTMENTS DE NA N/A ESTATE FUND II 2929 ARCH STREET SUITE 1650 PHILADELPHIA, PA 19104 52-2279515 LUBERT-ADLER REAL ESTATE INVESTMENTS DE NA N/A FUND VII LP 2929 ARCH STREET SUITE 1650 THE C PHILADELPHIA, PA 19104 80-0955742 LUBERT-ADLERLARAMAR URBAN INVESTMENTS DE NA N/A NEIGHBORHOOD 171 17TH STREET SUITE 1575 ATLANTA, GA 30363 61-1804548 MCRB LLC INVESTMENTS DE NA N/A 1503 LBJ FREEWAY SUITE 300 DALLAS, TX 75234 46-1235435 INVESTMENTS MΑ INA N/A MCRS LLC 1503 LBJ FREEWAY SUITE 300 DALLAS, TX 75234 27-3637201 MDH ATLANTIC HOLDINGS II LLC INVESTMENTS DE NA N/A 3715 NORTHSIDE PARKWAY NW BUILDING ATLANTA, GA 30327 82-1549241 MDH ATLANTIC HOLDINGS LLC INVESTMENTS DE NA N/A 3715 NORTHSIDE PARKWAY NW BUILDING ATLANTA, GA 30327 46-5214306 MOUNTAIN CAPITAL PARTNERS INVESTMENTS DE NA N/A NPI LP **811 LOUISIANA STREET SUITE** 2550 HOUSTON, TX 77002 81-0788984 NAVITAS CAPITAL II LP INVESTMENTS NA N/A DE 9460 WILSHIRE BLVD SUITE 850 BEVERLY HILLS, CA 90212 30-0934660 NIMBUS WEATHER MASTER FUND INVESTMENTS INA ln/a LTD C/O CONYERS CORPORATE SERVICES BER HAMILTON HM11 BD 98-1059620 OAK 1425 HARRISON STREET INVESTMENTS DE NA N/A PROPERTY LLC 220 MONTGOMERY STREET 20TH FLOOR SAN FRANCISCO, CA 94104 81-4003488

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership **(j)** General (c) (e) (d) Direct Legal Predominant Disproprtionate (b) Share of total Share of endor Domicile allocations? Percentage Name, address, and EIN of Primary activity income(related, Code V-UBI amount in Managing (State Controlling ıncome of-year assets ownership related organization unrelated. Box 20 of Schedule K-1 Entity Partner? (Form 1065) excluded from Foreign tax under Country) sections 512-514) Yes No Yes No OAK-MOSSER II LLC INVESTMENTS DE NΑ N/A 220 MONTGOMERY ST 20TH **FLOOR** SAN FRANCISCO, CA 94104 82-1988562 OAK-MOSSER LLC INVESTMENTS DE NA N/A 220 MONTGOMERY STREET 20TH **FLOOR** SAN FRANCISCO, CA 94104 81-3349445 INVESTMENTS PAG ASIA ALPHA LP CJ NΑ N/A PO BOX 472 2ND FLOOR HARBOR GEORGE TOWN KY1-1106 98-1269265 PREMIER A-1 ST LOUIS INVESTMENTS DE NA N/A HOLDINGS LLC 3519 FEE FEE RD 221 BRIDGETON, MO 63044 81-4162579 PREMIER A-2 DMV HOLDINGS INVESTMENTS DE NΑ N/A 1802 CEDAR STREET LEWES, DE 19958 81-5118269 PSI ATLANTIC HOLDINGS II LLC INVESTMENTS DE NA N/A 530 OAK COURT DRIVE SUITE MEMPHIS, TN 38117 81-0786898 PSI ATLANTIC HOLDINGS III LLC INVESTMENTS DE NA N/A 530 OAK COURT DRIVE SUITE MEMPHIS, TN 38117 81-0780333 PSI ATLANTIC HOLDINGS IV-A INVESTMENTS DE NA N/A LLC 530 OAK COURT DRIVE STE 185 MEMPHIS, TN 38117 82-1992560 PSI ATLANTIC HOLDINGS LLC INVESTMENTS DE NΑ N/A 530 OAK COURT DRIVE SUITE 185 MEMPHIS, TN 38117 46-4391864 QUEENS VENTURES LLC INVESTMENTS DE NA N/A C/O AE REAL ESTATE HOLDINGS NEW YORK, NY 10024 80-0963664 RUBY ATLANTIC AJCP HOLDINGS INVESTMENTS DE NΑ N/A 133 NORTH JEFFERSON STREET 4TH FLO CHICAGO, IL 60661 46-4623957 SF MEZZ LLC INVESTMENTS DE NA N/A C/O BAIN CAPITAL RE LP 200 CLAREND BOSTON, MA 02116 81-1908770 SOIL INNOVATIONS LLC INVESTMENTS DE NΑ N/A AV DR CARDOSO DE MELO 1340-SAO PAULO BR 90-0538481 TDC ATLANTIC HOLDINGS LLC INVESTMENTS DE NA N/A 5130 SOUTH ALSTON AVENUE SUITE 210 DURHAM, NC 27713 47-5340743 TETRIS PROPERTY LP INVESTMENTS DE NA N/A C/O US REALTY ADVISORS LLC 1370 NEW YORK, NY 10019 46-1625319

(c) (h) (e) Legal (d) (f) (g) Disproprtionate Predominant (b) (a) Domicile Direct Share of total Share of endallocations? Code V-UBI amount in Name, address, and EIN of Primary activity income(related, (State Controlling income of-year assets related organization unrelated, Box 20 of Schedule K-1 Entity or

excluded from

tax under

sections 512-514)

N/A

N/A

N/A

N/A

N/A

N/A

N/A

(j)

General

or

Managing

Partner?

Yes No

(Form 1065)

Yes

No

(k)

Percentage

ownership

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

Foreign

Country)

CJ

JΕ

CJ

DE

DE

DE

JΕ

INA

NA

INA

INA

NA

INA

lΝΑ

THE BREITHORN FUND LP	INVESTMENTS

INVESTMENTS

INVESTMENTS

INVESTMENTS

INVESTMENTS

INVESTMENTS

INVESTMENTS

GROUND FLOOR WINDWARD 1

GRAND CAYMAN KY1-1201

THE TRITON FUND II NO 2 LP

ST HELIER, GRAND CAYMAN

C/O MAPLES CORPORATE

USRA ATLANTIC CAPITAL

NEW YORK, NY 10019 45-2686195

NEW YORK, NY 10018 80-0858078 WBH KIRBY HILL CO-

INVESTMENT LLC

GRAND CAYMAN KY1-1104

C/O US REALTY ADVISORS LLC

WASHINGTON HEIGHTS I LLC

C/O AE REAL ESTATE HOLDINGS

7121 FAIRWAY DRIVE SUITE 410 PALM BEACH GARDENS, FL

XILOS DAKOTA SEPARATE

LIMITED PARTNERSHI 11-15 SEATON PLACE ST HELIER JE4 0QH

SERVICES LTD

PARTNERS LLC

1370

LLC 1

33418 14-1933484

98-1293611

CHARTER PLACE 1ST FLOOR 23-

TPRV CAPITAL MASTER FUND LP

REGATTA O

98-0549446

27 SEA

JE2 3QL JE 98-0634601

CJ

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (h) (i) (b) (c) (d) (e) (f) (g) Direct controlling Name, address, and EIN of Primary activity Legal Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, domicile entity income year ownership (b)(13)(state or foreign or trust) assets controlled country) entity? Yes No 365 CHURCH STREET LIMITED PARTNERSHIP INVESTMENTS CA NΑ C Corporation Yes 4711 YONGE STREET SUITE 1400 TORONTO, ONTARIO M2N 7E4 ADELAIDE-PETER DEVELOPMENTS INVESTMENTS CA NΑ C Corporation Yes 4711 YONGE STREET SUITE 1400 TORONTO, ONTARIO M2N 7E4 98-0684328 AGRICOLA BRINZAL LIMITADA **INVESTMENTS** CI NΑ C Corporation Yes AVENIDA SANTA MARIA 6350 PISO 3 VITACURA, SANTIAGO CI NΑ AGRICOLA DURAMEN LIMITADA **INVESTMENTS** CI C Corporation Yes AVENIDA SANTA MARIA 6350 PISO 3 VITACURA, SANTIAGO CI AGRICOLA E INVERSIONES PAMPA ALEGRE INVESTMENTS CI NΑ C Corporation Yes SA AVENIDA SANTA MARIA 6350 PISO 3 VITACURA, SANTIAGO CI AGRICOLA EL CARDONAL LIMITADA INVESTMENTS CI NΑ C Corporation Yes LO FONTECILLA NO 2014 SUITE 834 LAS CONDES, SANTIAGO CI 98-1204153 CI AGRICOLA FUNDO BUCALEMU LIMITADA INVESTMENTS NΑ C Corporation Yes DEL INCA 4446 OFFICE 1007 LAS CONDES, SANTIAGO 98-0639220 CI AGRICOLA LOS RIOS SPA CI NΑ INVESTMENTS C Corporation Yes AVENIDA SANTA MARIA 6350 OFICINA 3 VITACURA, SANTIAGO CI 98-1209592 AGRICOLA RAPEL LIMITADA CI **INVESTMENTS** NΑ C Corporation Yes AVE ISIDORA GOYENECHEA NO 2939 1 LAS CONDES, SANTIAGO CI 98-0639218 AGRICOLA RETIRO LIMITADA INVESTMENTS CI NΑ C Corporation Yes DEL INCA 4446 OFFICE 1007 LAS CONDES, SANTIAGO CI AGRICOLA RIBERA LIMITADA **INVESTMENTS** CI NΑ Yes C Corporation DEL INCA 4446 OFFICE 1007 LAS CONDES, SANTIAGO CI AGROFLORESTAL VERDE SUL SA INVESTMENTS BR NΑ C Corporation Yes RODOVIA RS-473 KM 22 RINCAO SO SA DISTRICT MATARAZZO PEDRO OSORIO, RIO GRANDE DO SUL BR AQUILA INC INVESTMENTS CJ NΑ C Corporation Yes C/O WALKERS SPV LTD PO BOX 908GT GEORGE TOWN, GRAND CAYMAN 96360-000 CJ 98-0532782 AR II REIT INC INVESTMENTS DE NΑ C Corporation Yes 11990 SAN VINCENTE BLVD STE 200 LOS ANGELES, CA 90049 82-1624121 AR LEGACY REIT INC INVESTMENTS NΑ Yes DE C Corporation 11990 SAN VICENTE BOULEVARD SUITE LOS ANGELES, CA 90049 81-5332102

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (i) (b) (c) (d) (e) (f) (g) (h) Direct controlling Name, address, and EIN of Primary activity Legal Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, income year ownership (b)(13) (state or foreign assets controlled or trust) country) entity? Yes No ARA INC INVESTMENTS CJ NΑ C Corporation Yes C/O WALKERS SPV LTD PO BOX 908GT GEORGE TOWN, GRAND CAYMAN 98-0543813 ASH R ONE LLC DE NΑ INVESTMENTS C Corporation Yes 230 PARK AVENUE 12TH FLOOR NEW YORK, NY 10169 30-0949766 VI NΑ ASIA ALPHA SECRETARIES LIMITED INVESTMENTS C Corporation Yes COMMENCE CHAMBERS PO BOX 2208 ROA **TORTOLA** ASIA LANDMARK SPECIAL FUND LTD CJ NΑ INVESTMENTS C Corporation Yes C/O OGIER FIDUCIARY SERVICES CAYMA CAMANA BAY, GRAND CAYMAN NΑ ATLANTIC AVENUE REALTY LTD INVESTMENTS CJ C Corporation Yes C/O MAPLES CALDER CORP SERVICES GEORGE TOWN, GRAND CAYMAN KY1-9007 CJ 98-0533323 ATLANTIC BRIDGE REIT INC NΑ INVESTMENTS DE C Corporation Yes 600 ATLANTIC AVENUE BOSTON, MA 02210 81-0810982 ATLANTIC CAYMAN LIMITED INVESTMENTS CJ NΑ C Corporation Yes C/O MAPLES AND CALDER PO BOX 309 GEORGE TOWN, GRAND CAYMAN CJ 98-1219940 ATLANTIC CT REIT II INC INVESTMENTS DE NΑ C Corporation Yes 4343 VON KARMAN AVE SUITE 200 NEWPORT BEACH, CA 92660 47-5565843 ATLANTIC DV HOLDINGS LTD INVESTMENTS CJ NΑ C Corporation Yes C/O MAPLES AND CALDER PO BOX 309 GRAND CAYMAN CJ 98-1196247 ATLANTIC EUROPE INVESTMENTS GP LIMITED INVESTMENTS UK NΑ C Corporation Yes C/O BURNESS LLP 50 LOTHIAN ROAD F EDINBURGH KY1-1104 UK ATLANTIC EUROPE INVESTMENTS LP INVESTMENTS UK NΑ C Corporation Yes C/O BURNESS LLP 50 LOTHIAN ROAD F EDINBURGH EH39WJ UK 98-0670648 ATLANTIC FM LTD INVESTMENTS CJ NΑ C Corporation Yes C/O MAPLES AND CALDER PO BOX 309 GRAND CAYMAN EH39WJ CJ 98-1249059 ATLANTIC NBS LIMITED **INVESTMENTS** JΕ NΑ C Corporation Yes C/O CRESTBRIDGE CORP SERVICES LTD CHANNEL ISLANDS KY1-1104 JΕ 98-1220176 ATLANTIC NREP II LTD INVESTMENTS CJ NΑ C Corporation Yes C/O MAPLES AND CALDER SERVICES LTD GEORGE TOWN, GRAND CAYMAN JE1 0BD CJ 98-1273705 ATLANTIC P3 PROGRAM REIT INC **INVESTMENTS** DE NΑ C Corporation Yes 4380 LAJOLLA VILLAGE DRIVE SUITE 2 SAN DIEGO, CA 92122 47-2704934

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BARRA DA TIJUCA, RIO DE JANEIRO

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (b) (d) (f) (h) (i) (c) (e) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, domicile entity income year ownership (b)(13) (state or foreign or trust) assets controlled country) entity? Yes No GBE PROPRIEDADES E EMPREENDIMENTOS INVESTMENTS BR Ina Yes C Corporation MINAS AV DAS AMERICAS 700 BLOCO 5 SALA BARRA DA TIJUCA, RIO DE JANEIRO GBE PROPRIEDADES GUADALUPE LTDA INVESTMENTS BR lΝΑ C Corporation Yes AV DAS AMERICAS 700 BLOCO 5 SALA BARRA DA TIJUCA, RIO DE JANEIRO GBE PROPRIEDADES HOLDINGS BAHIA LTDA INVESTMENTS BR Ina C Corporation Yes AVENUE OF AMERICAS NO 700 OFFICE RIO DE JANEIRO GBE PROPRIEDADES HOLDINGS GUADALUPE INVESTMENTS BR NΑ C Corporation Yes LTDA AVENUE OF AMERICAS NO 700 OFFICE RIO DE JANEIRO CEP 22640-100 GBE PROPRIEDADES HOLDINGS MARANHAO INVESTMENTS BR lnα C Corporation Yes LTDA AVENUE OF AMERICAS NO 700 OFFICE RIO DE JANEIRO CEP 22640-100 GBE PROPRIEDADES HOLDINGS TOCANTINS BR NΑ INVESTMENTS C Corporation Yes LTDA AVENUE OF AMERICAS NO 700 OFFICE RIO DE JANEIRO CEP 22640-100 GBE PROPRIEDADES PARTICIPACOES PIAUI INVESTMENTS BR Ina Yes C Corporation LTD AVENUE OF AMERICAS NO 700 OFFICE RIO DE JANEIRO CEP 22640-100 GERRITY ATLANTIC RETAIL PARTNERS INC INVESTMENTS DE NA C Corporation Yes 973 LOMAS SANTA FE DRIVE SOLANA BEACH, CA 92075 27-4802513 GERRITY RETAIL FUND 2 INC INVESTMENTS DE NA C Corporation Yes 973 LOMAS SANTA FE DRIVE SOLANA BEACH, CA 92075 46-4417545 GRADUATE OXFORD LESSEE LLC DE INVESTMENTS NΑ C Corporation Yes 133 NORTH JEFFERSON STREET 4TH FLO CHICAGO, IL 60661 37-1749319 GRANARY INVESTMENTS INVESTMENTS MΡ NA Yes C Corporation C/O IFS LIMITED IFS COURT TWENTY CYBERCITY, EBENE MP 98-0607880 GRANARY NORMANDIEN (PROPRIETARY) INVESTMENTS SF NA C Corporation Yes C/O MAITLAND 32 FICKER ROAD ILLOVO **JOHANNESBURG** SF 98-0610461 **GREEN ROSELLA TRUST** INVESTMENTS AS NA C Corporation Yes LEVEL 25 20 BOND STREET SYDNEY 02210 AS 98-1126908 GREENGOLD AGRIROM SRL INVESTMENTS RO NΑ C Corporation Yes 24 CONSTANTIN NOICA STREET ROOM 2 SIBIU NSW 2000 RO 98-1091760 GREENGOLD EUROPEAN CAPITAL SA INVESTMENTS LU NA C Corporation Yes **5 RUE GUILLAUME KROLL** SENNINGERBERG

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (i) (b) (c) (d) (e) (f) (g) (h) Primary activity Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 year related organization domicile entity (C corp, S corp, ıncome ownership (b)(13)(state or foreign or trust) assets controlled country) entity? No Yes HARVARD UNIVERSITY PRESS OF NEW YORK PUBLISHING NA NY C Corporation Yes HU PRESS 79 GARDEN ST CAMBRIDGE, MA 02138 13-3784301 HARVARD UNIVERSITY PRESS LTD BOOK DISTRIBUTION UK NΑ C Corporation Yes VERNON HOUSE 23 SICILIAN AVE LONDON UK HB CAYMAN LIMITED **INVESTMENTS** CJ INA C Corporation Yes PO BOX 309 GT GRAND CAYMAN CJ HG GULF FZ LLC EDUCATION AND RES ΑE lna C Corporation Yes MAKTOUM ACADMED CTR 2 FL DUBAI BWI CJ ΑE HIP BERMUDA REINSURANCE I LIMITED INVESTMENTS BD INA C Corporation Yes 141 FRONT STREET 3RD FLOOR **HAMILTON** BD HMC ADAGE MANAGER INC DE INVESTMENTS NA C Corporation Yes 600 ATLANTIC AVENUE BOSTON, MA 02210 04-3567988 HMC BEEFEATER INC NA **INVESTMENTS** DE C Corporation Yes 1209 ORANGE STREET WILMINGTON, DE 19801 82-0888543 HMC JUWEEL INVESTORS LP CJ NA INVESTMENTS C Corporation Yes MAPLES CORPORATE SERVICES LTD PO B GEORGE TOWN, GRAND CAYMAN CJ HOUND PARTNERS LONG FUND LTD CJ INVESTMENTS NA C Corporation Yes ELIAN FIDUCIARY SERVICES CAYMAN L GRAND CAYMAN, GRAND CAYMAN KY1-1104 CJ **HUEQUI SPA** INVESTMENTS CI NA C Corporation Yes C/O ANINAT SCHWENCKE CIA AV LO SANTIAGO KY1-9007 CI HUNTER PATTON LTD INVESTMENTS CJ NA C Corporation Yes C/O MAPLES CORP SVCS PO BOX 30 GEORGE TOWN, GRAND CAYMAN CJ 98-1395917 ILS PROPERTY & CASUALTY FEEDER FUND II INVESTMENTS CJ lΝΑ C Corporation Yes C/O CREDIT SUISSE ASSET MGMT LLC NEW YORK, NY 100103629 INSOLO AGROINDUSTRIAL SA INVESTMENTS BR INA C Corporation Yes AV DR CARDOSO DE MELO 1340-11 ANDAR SAO PAULO BR INVERSIONES CATIVAL SA INVESTMENTS NU lna C Corporation Yes VILLA FINTANA DEL CLUB TERRAZA 2 C MANAGUA CJ 111 INVERSIONES HEFEI SAC INVESTMENTS PΕ lΝΑ C Corporation Yes AV PARDO Y ALIAGA 695 DPTO 11 URB SAN ISIDORO, LIMA PΕ 98-1111292

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (h) (i) (b) (c) (d) (e) (f) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, income year ownership (b)(13)(state or foreign or trust) assets controlled country) entity? Yes No INVERSIONES LEFKADA SAC NΑ INVESTMENTS PΕ C Corporation Yes AV PARDO Y ALIAGA 695 DPTO 11 URB SAN ISIDORO, LIMA PΕ 98-1110859 INVERSIONES MOSQUETA SAC NΑ INVESTMENTS PΕ C Corporation Yes AV PARDO Y ALIAGA 695 DPTO 11 URB SAN ISIDORO, LIMA PΕ 98-1110734 INVERSIONES PIRONA SAC INVESTMENTS PΕ NΑ C Corporation Yes AV PARDO Y ALIAGA 695 DPTO 11 URB SAN ISIDORO, LIMA PΕ 98-1111636 INVERSIONES SANTA RITA SA INVESTMENTS NU NΑ C Corporation Yes VILLA FINTANA DEL CLUB TERRAZA 2 C MANAGUA NU INVERSIONES TRES CUMBRES LTDA INVESTMENTS CI NΑ C Corporation Yes ROGER DE FLOR 2736 DP 8 COMUNA LAS CONDES, SANTIAGO CI 98-0446986 IPE AGROINDUSTRIAL LTDA INVESTMENTS BR NΑ C Corporation Yes FAZENDA IPE S/N - ZONA RURAL-BAIXA GRANDE DO RIBEIRO, PIAUI BR JADE RETAIL INC INVESTMENTS CJ NΑ C Corporation Yes PO BOX 309 UGLAND HOUSE GRAND CAYMAN CJ 98-1401548 JUS BG I - FEEDER LP (FKA GAVEA JUS BG 1 INVESTMENTS CJ NΑ C Corporation Yes PO BOX 896 GEORGE TOWN, GRAND CAYMAN KY1-1104 CJ 98-1018586 LA JACARANDA SA **INVESTMENTS** NU NΑ C Corporation Yes VILLA FINTANA DEL CLUB TERRAZA 2 C MANAGUA KY1-1106 NU LA MORA SA INVESTMENTS NU NΑ C Corporation Yes VILLA FINTANA DEL CLUB TERRAZA 2 C MANAGUA NU LA ZARZA SA INVESTMENTS NU NΑ C Corporation Yes VILLA FINTANA DEL CLUB TERRAZA 2 C MANAGUA NU LAS ACACIAS SA INVESTMENTS NU NΑ C Corporation Yes VILLA FINTANA DEL CLUB TERRAZA 2 C MANAGUA NU LAS MISIONES SA INVESTMENTS AR NΑ C Corporation Yes SUIPACHA 1111 PISO 18 **BUENOS AIRES** LASALLE ASIA OPPORTUNITY CAYMAN I LTD INVESTMENTS CJ NΑ C Corporation Yes WALKER HOUSE 87 MARY STREET GEORGE TOWN, GRAND CAYMAN C1008AAW CJ 98-0447511 LIFETIME CENTRECOURT GRENVILLE LIMITED INVESTMENTS CA NΑ C Corporation Yes 22 ST CLAIR AVENUE EAST SUITE 101

TORONTO, ONTARIO

CA 98-0684331

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GRAND CAYMAN KY1-1104

C/O WALKERS SPV LIMITED WALKER HOU GEORGE TOWN, GRAND CAYMAN KY1-1104 **INVESTMENTS**

CJ

NΑ

C Corporation

Yes

CJ 98-0643164 NICATECA INC

CJ 98-0520487

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CI

CJ 98-1098256

98-0632838 SORA LTD

C/O MAPLES AND CALDER PO BOX 309 GRAND CAYMAN, GRAND CAYMAN **INVESTMENTS**

CJ

NΑ

C Corporation

Yes

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (b) (d) (h) (i) (c) (e) (f) (g) Direct controlling Primary activity Share of total Percentage Name, address, and EIN of Legal Type of entity Share of end-of-Section 512 related organization domicile entity (C corp, S corp, income year ownership (b)(13)(state or foreign controlled or trust) assets country) entity? Yes No STELIS LTD INVESTMENTS CJ NΑ C Corporation Yes C/O MAPLES AND CALDER PO BOX 309 GRAND CAYMAN, GRAND CAYMAN KY1-1104 C198-1083800 SUSTAINABLE TEAK PARTCIPACOES LTDA **INVESTMENTS** NΑ BR C Corporation Yes AV CASTELO BRANCO 272 ROOM 3 SA CACERES, MATO GROSSO KY1-1104 98-0639215 TACORA SPA **INVESTMENTS** CI NΑ C Corporation Yes C/O ANINAT SCHWENCKE CIA AV LO SANTIAGO 78200-000 CI TAGUA SPA INVESTMENTS CI NΑ C Corporation Yes 2939 AVENIDA ISIDORA GOYENECHEA 11 LAS CONDES, SANTIAGO CI 98-1120143 TDCA REIT INC INVESTMENTS DE NΑ C Corporation Yes 5130 SOUTH ALSTON AVENUE SUITE 210 DURHAM, NC 27713 47-5575876 TDR SCOTLAND LP INVESTMENTS UK NΑ C Corporation Yes C/O TDR CAPITAL LLP 20 BENTINCK ST LONDON UK 98-0471766 INVESTMENTS NΑ TERENA SA UY C Corporation Yes MONES ROSES 6937 MONTEVIDEO W1U 2EU TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NΑ Yes C Corporation UNIDAD AV DAS AMERICAS 700 BL 5 SALAS BARRA DA TIJUCA, RIO DE JANEIRO 11000 TERRACAL ALIMENTOS E BIOENERGIA -**INVESTMENTS** BR NA C Corporation Yes UNIDAD FAZENDA SANTO ANONIO DA MANGA S/N MARANHAO BR TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NΑ C Corporation Yes UNIDAD FAZENDA FLEXAS S/N ZONA RURAL SAO ROMAO, MINAS GERAIS TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NΑ C Corporation Yes UNIDAD AV DAS AMERICAS 700 BL 5 SALAS BARRA DA TIJUCA, RIO DE JANEIRO CEP 39290-000 BR TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NΑ C Corporation Yes UNIDAD FAZENDA OITEIROS S/N ZONA RURAL, GUADALUPE TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NA C Corporation Yes UNIDAD FAZENDA OITEIROS S/N ZONA RURAL, GUADALUPE CEP 64840-000 BR TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NΑ C Corporation Yes UNIDAD FAZENDA OITEIROS S/N ZONA RURAL, GUADALUPE CEP 64840-000 TERRACAL ALIMENTOS E BIOENERGIA -INVESTMENTS BR NΑ C Corporation Yes RUA DO FORUM S/N SALA A CENTRO GUADALUPE CEP 64840-000

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (f) (h) (i) (a) (b) (c) (d) (e) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ownership (b)(13)income vear or trust) controlled (state or foreign assets entity? country) Yes No lΝΑ USRA ATLANTIC NET LEASE CAPITAL CORP INVESTMENTS DE C Corporation Yes C/O US REALTY ADVISORS LLC 1370 NEW YORK, NY 10019 45-2732642 VISTA VERDE AGROINDUSTRIAL LTDA INVESTMENTS BR INA C Corporation Yes RODOVIA TRANSCERRADO KM 120 - ROOM PALIMETRA DO PTAUT, PTAUT Yes Yes 973 LOMAS SANTA FE DRIVE

C Corporation

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Yes

Yes

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LEVEL 25 20 BOND STREET SYDNEY	INVESTMENTS	AS	NA	C Corporation		
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WOOD VILLAGE SUB III GARP LLC	INVESTMENTS	DE	NA	C Corporation		Γ

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