Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2015

Open to Public Inspection

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

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2015 calendar year, or tax year beginning 07/01 2015, and ending 20 16 C Name of organization CARNEGIE INSTITUTION OF WASHINGTON D Employer identification number В Check if applicable: 53-0196523 Address change Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return 202-387-6400 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Amended return Washington, DC, 20005-1910 G Gross receipts \$ Application pending | F Name and address of principal officer: **MATTHEW SCOTT** H(a) Is this a group return for subordinates? Yes No 1530 P STREET NW, WASHINGTON, DC 20005 **H(b)** Are all subordinates included? Yes No If "No," attach a list. (see instructions) 501(c)(3) 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ WWW.CARNEGIESCIENCE.EDU **H(c)** Group exemption number ▶ Form of organization: Corporation Trust Association L Year of formation: M State of legal domicile: Part I 1 Briefly describe the organization's mission or most significant activities: The conduct of scientific discovery, research and education in the fields of plant biology, developmental biology, earth and planetary sciences, astronomy, and global ecology Activities & Governance 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 24 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 24 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 524 6 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a 83,480 Net unrelated business taxable income from Form 990-T, line 34 7b -246,122 **Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . 42,588,136 37,111,828 Revenue 9 Program service revenue (Part VIII, line 2g) 6,691,464 6,316,450 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 125,647,237 28.342.419 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 12,112,793 1,175,920 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 187,039,630 72.946.617 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,580,627 5,246,271 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 48,012,347 50,987,746 Professional fundraising fees (Part IX, column (A), line 11e) 16a 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,517,799 b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 48,143,406 45,078,906 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 101,736,380 101,312,923 19 Revenue less expenses. Subtract line 18 from line 12 85,303,250 -28,366,306 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 1,225,278,694 1,136,045,174 21 Total liabilities (Part X, line 26) . 178,558,460 179,859,720 22 Net assets or fund balances. Subtract line 21 from line 20 1,046,720,234 956,185,454 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here **Timothy Doyle, Chief Operating Officer** Type or print name and title Print/Type preparer's name Preparer's signature Date **Paid** Check if self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** May the IRS discuss this return with the preparer shown above? (see instructions) . Yes No

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Part		_		
	Check if Schedule O contains a resp	onse or note to any line in th	is Part III	🗸
1	Briefly describe the organization's mission:			
	The mission of the Carnegie Insitution of Was			in 1904,
	is "to encourage, in the broadest and most lib	eral manner, investigation, rese	arch, and discovery, and the application of	
	knowledge to the improvement of mankind."			
2	Did the organization undertake any significa	ant program convices during th	a year which were not listed on the	
2			<u> </u>	a 🖂 Na
	If "Yes," describe these new services on Sci		Ye	es 🗹 No
3	Did the organization cease conducting, of		in how it conducts any program	
Ū	services?	= = = = = = = = = = = = = = = = = = = =	_	es 🗸 No
	If "Yes," describe these changes on Schedu			;5 <u>•</u> NU
4	Describe the organization's program service		of its three largest program services, as m	eacured by
•	expenses. Section 501(c)(3) and 501(c)(4) o			
	the total expenses, and revenue, if any, for e			, 10 01,
	, , , , , , , , , , , , , , , , , , , ,			
4a	(Code:) (Expenses \$ 69,739	7,728 including grants of \$	0) (Revenue \$	0)
	Carnegie investigators are leaders in the field			
	and global ecology. Using molecular genetics			
	responses to light and the genetic controls ov	Y		
	survive disease and environmental stress. In a			·
	manages an online-integrated database, one of			
	biological information on the most widely use			
	fundamental questions in animal developmen	t and genetics at the cellular and	d molecular levels. Some researchers investig	gate the
	genetic programming behind cellular process	es as cells develop, while other	s explore the genes that control growth and o	besity,
	stimulate stem cells to become specialized bo	dy parts, and perform many oth	er functions. Other researchers examine the	physics
	and chemistry of Earth's deep interior and (Co	ontinued on Schedule O, Statem	ent 1)	
4b		,989 including grants of \$		<u>o</u>)
	Education. Carnegie, a non-degree granting en			
	are offered postgraduate and post doctoral tra			
	education is mostly conducted in the laborato			
	candidates to be capable researchers and tea			
	whom pursue their own research. Carnegie als			rsue
	formal degrees at degree-granting institututio			
	incorporate interactive science instruction int			
	education of public school children by training introduces and trains high school students to			
	available concerning Carnegie's scientific res			LIOII
	available concerning carriegle's scientific res	caren mangs to students and t	ne general public.	
4c	(Code:) (Expenses \$	o including grants of \$	0) (Revenue \$	0)
	None			
	011	1.0		
4d	Other program services (Describe in Schedu			
1-	(Expenses \$ 0 including grant		nue \$ 0)	
4e	Total program service expenses ►	82,009,717		

Part	Checklist of Required Schedules			
4	Let the experient in decay had in costion $FO(1/2)/(2)$ on $AO(47/2)/(4)$ (at least the experience for model in $AO(47/2)/(4)$).		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	'	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV </i>	9		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	,	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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	~	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		,
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> .	11e	ν ν	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	/	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		,
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	V	
b		14b	V	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV </i>	15		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		,
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		,

Part	V Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	,	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	/	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a	~	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	1	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?			
الم		24c		V
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		·
23a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	254		ľ
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26	~	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			ر ا
00	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			١,
_	Schedule L, Part IV	28b		~
С	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	_	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			١,
33	complete Schedule N, Part II	32		~
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	200		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
91	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	~	

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Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 262			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 524			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	_	/	
L-	15.00	4a		
D	If "Yes," enter the name of the foreign country: Chile			
	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		>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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		~
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?	_		_
L	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		/
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
C	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		•
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		· ·
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	. <u>_</u> a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 24 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. Enter the number of voting members included in line 1a, above, who are independent 1b 24 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 ~ 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a ~ 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 1 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c ~ 13 13 ~ 1 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 1 15a 15b 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 16a / 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 CA, DC, MD Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 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) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 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: ▶ Timothy Doyle, (202)387-6400

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee.
				((C)					
(A)	(B)	,,		Pos				(D)	(E)	(F)
Name and Title	Average					than or is both		Reportable	Reportable	Estimated
	hours per					or/trus	tee)	compensation	compensation from	
	week (list any hours for	or o	Ins	Officer	<u>S</u>	em Hig	Former	from the	related organizations	other compensation
	related organizations	Individual trustee or director	Institutional trustee	cer	Key employee	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	below dotted	tor	ona		ploy	ee con		(00-2/1099-101130)		organization and related
	line)) uste	tru		/ee	nper				organizations
		8	stee			Highest compensated employee				
						ă				
Stephen P A Foder	1									
Trustee	0	~						0	0	0
Suzanne Nora Johnson	1									
Trustee	0	~						0	0	0
Bruce W Ferguson	1									
Trustee	0	~						0	0	0
Deborah Rose	1									
Trustee	0	~						0	0	0
Craig R Barrett	1									
Trustee	0	~						0	0	0
John C Botts	1									
Trustee	0	~						0	0	0
John F Crawford	1									
Trustee	0	~						0	0	0
Michael A Duffy	1									
Trustee	0	~						0	0	0
W Gary Ernst	1									
Trustee	0	~						0	0	0
Sandra M Faber	1									
Trustee	0	~						0	0	0
William K Gayden	1									
Trustee	0	~						0	0	0
Michael E Gellert	1									
Trustee	0	~						0	0	0
William R Hearst III	1									
Trustee	0	~						0	0	0
Rush D Holt Jr	1									
Trustee	0	~						0	0	0

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

				(0	C)					
(A)	(B)	(-1		Pos		. 41		(D)	(E)	(F)
Name and Title	Average	١,	(do not check more than one box, unless person is both an officer and a director/trustee)					Reportable	Reportable	Estimated
	hours per week (list any						tee)	compensation from	compensation from related	amount of other
	hours for	or c	Inst	Officer	Şe)	Hig	Former	the	organizations	compensation
	related organizations	ividu		cer	/ em	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted		Institutional trustee		Key employee	ee		(00-2/1099-101150)		and related
	line)	uste	Ę		/ee	nper				organizations
		ф	stee			Highest compensated employee				
						<u> </u>				
Walter Isaacson	1					1				
Trustee	0	~						0	0	0
Mary C King	1									
Trustee	0	~						0	0	0
Katherine Lapp	1									
Trustee	0	~						0	0	0
Michael Long	1									
Trustee	0	~						0	0	0
Richard Meserve	1									
Trustee	0	~						0	0	0
Cristian Samper	1									
Trustee	0	~						0	0	0
Maxine Singer	1									
Trustee	0	~						0	0	0
Christopher T S Stone	1									
Trustee	0	~						0	0	0
Marshal Wais	1									
Trustee	0	~						0	0	0
Michael Wilson	1									
Trustee	0	~						0	0	0
Matthew P Scott	50									
President	0			~				550,000	0	50,679
Timothy P Doyle	50									
Chief Operating Officer	0			~				275,028	0	46,751
Cynthia Allen	50									
Staff	0			~			~	216,145	0	44,832
Gotthard SaghiSzabo	50									
Staff	0			•			~	184,368	0	44,728

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

					<u> </u>			1	1	
					C)					
(A)	(B)	Position (do not check more than one box, unless person is both an					one	(D)	(E)	(F)
Name and Title	Average						n an	Reportable	Reportable	Estimated
	hours per week (list any	officer and a director/trustee)						compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Higt emp	Former	the	organizations	compensation
	related organizations	/idu	tr	ĕ	em	lest	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	to al tr	onal		Рo	e con		(VV 2/ 1000 WIIOO)		and related
	line)	uste	tru		ee) 				organizations
		Ф	stee			Highest compensated employee				
						ă				
Richard W Carlson	50									
Department Director	0				~			253,704	0	54,455
George Cody	50									
Department Director	0				~			228,375	0	53,387
John S Mulchaey	50									
Department Director	0				~			221,038	0	41,073
Joseph Berry	50									
Department Director	0				~			195,476	0	50,853
Seung Rhee	50									
Department Director	0				~			176,137	0	32,963
Yixian Zheng	50									
Department Director	0				~			170,201	0	28,555
Russell Hemley	50									
Staff	0				~		~	269,275	0	60,872
Christopher B Field	50									
Staff	0				~		~	264,794	0	62,114
Wolf Frommer	50									
Staff	0				~		~	264,794	0	58,831
Patrick J McCarthy	50									
Staff	0					~		293,279	0	51,903
Carl R Sherman	50									
Staff	0					~		253,767	0	56,022
Kenneth G Caldeira	50									
Staff	0					~		248,389	0	52,022
Mark Phillips	50									
Staff	0					~		215,789	0	60,666
Erik H Hauri	50									
Staff	0					~		215,000	0	49,352

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	yees	s, ar	nd F	lighes	st C	ompensated E	mployees (co	ntiņue	ed)			
					•	C)									
	(A)	(B)	/-l	-4 -1-		ition	. 41		(D)	(E)		((F)		
	Name and title	Average					e than o is both		Reportable	Reportable			nated		
		hours per					or/trust		compensation	compensation fr	om		unt of		
		week (list any	2 5		0	Z	9 エ	Ţ	from	related			her	_	
		hours for related	div	stit	Officer	Key employee	ng igh	Former	the organization	organizations (W-2/1099-MIS	c)		ensation the	n	
		organizations	idua ect	utio	er	ဣ	est o	ब्	(W-2/1099-MISC)	(VV 2/1000 IVIIO	⁵ ,		nization	1	
		below dotted	al tr	nal		ю	eom		ĺ				related		
		line)	Individual trustee or director	Institutional trustee) e	pen					organ	ization	S	
			ď	stee			Highest compensated employee								
							8								
	ry P Asner	50													
Staff		0					~	~	209,910		0		4	4,155	
	h G Gall	50											_		
Staff		0					-	~	208,575		0		4	7,880	
	M Michalak	50						ر. ا					_		
Staff		0					~	~	203,638		0		2	5,995	
	n Dinneny	50											_		
Staff		0					-	~	179,446		0		3	5,869	
	d Cohen	50						١,							
Staff		0					-	~	161,897		0		3	0,012	
	Sub-total								F 4F0 02F				1.00	20/0	
C	Total from continuation sheets to Part	VII Sootio	 n ^	•	•		•		5,459,025		0		1,00	3,969	
d	T 1 1 / 1 1 P 4 P 14 A			•	•		•		5,459,025		0		1 00	3,969	
2	Total number of individuals (including but	not limited					obove	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		ara than \$100		of	1,00	3,909	
	reportable compensation from the organi			iose	ıısı	.eu i	above	e) w	no received m	ore man \$100	,000	OI			
	repertable compensation from the eigen	Zation	03										Yes	No	
3	Did the organization list any former of	ficer, direc	tor. c	r tr	uste	ee.	kev e	emp	lovee, or high	est compens	ated		163	140	
•	employee on line 1a? If "Yes," complete s							, , ,			,	3	~		
4	For any individual listed on line 1a, is the							n a	nd other comp	ensation from	the				
•	organization and related organizations														
	individual							., 				4	~		
5	Did any person listed on line 1a receive of	r accrue co	mnei	nsat	ion	froi	m anv	ıın	related organiz	ation or indiv	dual	_			
3	for services rendered to the organization'											5		~	
Section	on B. Independent Contractors											J			
1	Complete this table for your five highest	compensate	ed inc	dene	-nd	ent	contr	acti	ors that receive	d more than	\$100	nnn of			
•	compensation from the organization. Rep													ax	
	year.						u	· ,			. G. g.		•		
	(A)								(B)			(C)			
	Name and business add	ress							Description of s	ervices	C	Compens	ation		
Morga	ın Lewis Bockius LLP, PO Box 8500 S 6050, I	Philadelphia	. PA 1	1917	8			Le	gal				41	4,966	
	r Cutler Pickering Hale Dorr, PO Box 7247 87					70			gal					9,789	
	LLP, Dept 0522, P O Box 120001, Dallas, TX								Accounting				235,275		
	Construction, P O Box 288, Lothian, MD 207								Engineering				209,187		
	ystems, 550 Tyndall Street, No 2, Los Altos,								ormation Syster	n				5,000	
2	Total number of independent contractor		ng bu	ıt n	ot I	imit	ed to								
	received more than \$100,000 of compens	•	_						0						

Part VIII Statement of Revenue

T GIT	LVIII	Check if Schedule C		a resi	oonse or note to	any line in this	Part VIII		П
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	3	1a	0				
ara Iour	b	Membership dues .		1b	0				
s, (Am	С	Fundraising events .		1c	0				
Gift Iar	d	Related organizations	3	1d	0				
JS, imi	е	Government grants (con		1e	29,161,141				
rtior er S	f	All other contributions, g							
햙		and similar amounts not inc		1f	7,950,687				
ont od C	g	Noncash contributions include			88,248				
	h	Total. Add lines 1a-1	†		Business Code	37,111,828			
une	0-					4.045.004	4.045.004		
eve	2a	Magellan Telescope P			541700	4,215,394	4,215,394	0	0
Program Service Revenue	b	GMT Challenge Progra			541700	765,843	765,843	0	0
Ξ	C	Australian Astronomy			541700	372,000	372,000	0	0
Š	d	High Resolution Mapp		atn S	541700	298,200	298,200	0	0
Jran	e f	Yonsei Austonomy Pr All other program ser			561700	229,500 435,513	229,500 435,513	0	0
Š	g	Total. Add lines 2a–2				6,316,450	430,013	<u> </u>	U
_	3	Investment income	(includina	divide	ends, interest.	0,310,430		T	
		and other similar amo			•	6,677,739	o	-7,597	6,685,336
	4	Income from investmen	•	npt bo	ond proceeds ►	0	0	0	0
	5			•	·	825,946	825,946	0	0
		•	(i) Real		(ii) Personal		·		
	6a	Gross rents	1,21	9,664	0				
	b	Less: rental expenses	1,35	1,259	0				
	С	Rental income or (loss)	-13	1,595	0				
	d	Net rental income or	loss) .		▶	-131,595	-131,595	0	0
	7a		(i) Securit	ies	(ii) Other				
	b	assets other than inventory Less: cost or other basis	336,46	1,590	0				
		and sales expenses .	314,79	6,910	0				
	С	Gain or (loss)	21,66	4,680	0				
	d	Net gain or (loss) .			▶	21,664,680	0	91,077	21,573,603
Other Revenue	8a	,	ed on line 1	· a	0				
Ö	C	Less: direct expenses Net income or (loss) f				0		0	0
	1	Gross income from ga		ties.	events . P	0		0	0
	b	Less: direct expenses Net income or (loss) f			0	0	0	0	0
	_	Gross sales of in returns and allowance	ventory,	less	0				
	b	Less: cost of goods s			0				
	С	Net income or (loss) f Miscellaneous R		ot inve	entory ► Business Code	0	0	0	0
	110					022.074	022.074		
	11a b	Gains on Swap transa Realized loss on curre		otion	900099 900099	823,961	823,961	0	0
	C	Realized loss on ST be		LIUI	900099	-164,891	-164,891 -379 199	0	0
	d		ona iuna		700077	-379,199 201,698	-379,199 201,698	0	0
	e	Total. Add lines 11a-			•	481,569	201,070	0	0
	12	Total revenue. See in			-	72,946,617	7,492,370	83,480	28,258,939
				•		12,770,017	1,72,310	00,400	Eorm 990 (2015)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service (C) **(D)** Fundraising Management and general expenses 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 . . . 1,583,186 1,583,186 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3,663,085 3.663.085 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 . . . 0 0 Benefits paid to or for members 0 0 5 Compensation of current officers, directors, trustees, and key employees 3,276,855 759,613 242,529 2,274,713 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 Other salaries and wages 34,111,156 31,169,724 2,365,834 575,598 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 5,081,150 4,650,433 341,014 89,703 Other employee benefits 9 6,246,305 3,953,469 2,245,068 47.768 10 Payroll taxes 2,272,280 1,968,010 254,947 49,323 11 Fees for services (non-employees): Management Legal 0 973,107 973,107 0 235,700 0 235,700 0 Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 1,476,716 447,790 1,010,301 18,625 12 Advertising and promotion 13 Office expenses 1,166,998 765,031 329,528 72,439 14 Information technology 1,282,046 856,447 425,599 0 15 Royalties Occupancy 16 3,770,053 3.348.781 391.813 29,459 17 2,411,269 2,127,754 214,385 69,130 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 1,103,634 671,221 298,207 134,206 20 4.397.605 0 4,397,605 0 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 10.602,416 10.228.444 362,964 11,008 23 615,738 357,482 257,183 1,073 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.) Contract & subawards 9,445,017 9,195,226 84,317 165,474 Research education expense 5,941,770 5,895,254 3,896 42,620 С Bond admin & Other maintenance expense 73,122 O 73,122 0 Exchange rate (gain) loss 43.942 0 40.879 -3.063 All other expenses 1,542,836 425,124 1,110,144 7,568 Total functional expenses. Add lines 1 through 24e 25 101,312,923 82,009,717 17,785,407 1,517,799 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 following SOP 98-2 (ASC 958-720) if

Part X Balance Sheet

	art X	Check if Schedule O contains a response or	r note	to any line in this D	Part X		
		Check ii Ochedule O contains a response of	HOLE	to arry mile in this P	(A)	•	(B)
_					Beginning of year		End of year
	1	Cash-non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			65,555,581	2	55,325,132
	3	Pledges and grants receivable, net			13,882,071	3	11,032,444
	4	Accounts receivable, net			177,666	4	186,580
	5	Loans and other receivables from current and trustees, key employees, and highest of	ompen	sated employees.			
					0	5	1,381,086
s	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volur organizations (see instructions). Complete Part II of Sche	0	6	0		
Assets	7	Notes and loans receivable, net			1,676,004	7	0 1,030,899
Ass	8	Inventories for sale or use			1,878,004	8	1,030,899
•	9	Prepaid expenses and deferred charges			22,966,940		57,705,567
	10a	Land, buildings, and equipment: cost or			22,900,940	9	57,705,567
	·ou	other basis. Complete Part VI of Schedule D	10a	270,483,57	7		
	b	Less: accumulated depreciation	10b	136,660,54		100	133,823,031
	11	·			532,846,589		
	12	Investments—other securities. See Part IV, line			450,181,245		431,922,972
	13	Investments—program-related. See Part IV, line			430,161,245	13	443,637,463
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal to the control of			1,225,278,694	16	1,136,045,174
_	17	Accounts payable and accrued expenses			10,098,155		8,150,825
	18	Grants payable			10,070,133	18	0,130,823
	19	Deferred revenue	27,431,440		28,929,144		
	20	Tax-exempt bond liabilities			65,105,000		65,105,000
	21	Escrow or custodial account liability. Complete			05,105,000	21	05,105,000
S	22	Loans and other payables to current and for			0		0
Liabilities	22	trustees, key employees, highest comper					
þ		disqualified persons. Complete Part II of Schedu			0	22	0
Lia	23	Secured mortgages and notes payable to unrela			0	23	0
	24	Unsecured notes and loans payable to unrelated		•	0	24	0
	25	Other liabilities (including federal income tax,					•
	20	parties, and other liabilities not included on lines			75,923,865		77,674,751
		of Schedule D			73,723,003	25	77,074,701
	26	Total liabilities. Add lines 17 through 25			178,558,460	26	179,859,720
ses	-	Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 an), chec				,6607/120
anc	27	Unrestricted net assets			310,287,147	27	288,925,810
3al	28	Temporarily restricted net assets			681,328,124		612,103,681
Þ	29	Permanently restricted net assets			55,104,963		55,155,963
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 9) complete lines 30 through 34.					
ts (30	Capital stock or trust principal, or current funds				30	
se	31	Paid-in or capital surplus, or land, building, or ed				31	
As	32	Retained earnings, endowment, accumulated in				32	
let	33	Total net assets or fund balances			1,046,720,234	33	956,185,454
_	34	Total liabilities and net assets/fund balances .			1,225,278,694	34	1,136,045,174
							Form 990 (2015)

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Part	XI Reconciliation of Net Assets			-			
	Check if Schedule O contains a response or note to any line in this Part XI				~		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		72,94	6,617		
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1	3		-28,36	6,306		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	,046,72	0,234		
5	Net unrealized gains (losses) on investments	5		-59,83	8,538		
6	Donated services and use of facilities	6			0		
7	Investment expenses	7		-1,65	4,371		
8	Prior period adjustments	8		-5	4,947		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-62	0,618		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		956,18	5,454		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain	in				
	Schedule O.						
2a				ı	~		
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled o	or				
	reviewed on a separate basis, consolidated basis, or both:						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		. 2b	· ·			
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a				
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov						
	of the audit, review, or compilation of its financial statements and selection of an independent account						
	If the organization changed either its oversight process or selection process during the tax year, ex	olain	ın				
_	Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set to Single Audit Act and ONAR Circular A 1222	orth					
	the Single Audit Act and OMB Circular A-133?		. 3a	· •			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	iuits.	3b				
			Fo	orm 990	(2015)		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Reason for Public Charity Status (All organizations must complete this part.) See instructions.	Name	of the organization					Employer identification	n number
The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A chospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A hospital or accordance organization perated in conjunction with a hospital described in section 170(b)(1)(A)(iii). A not organization construction organization described in section 170(b)(1)(A)(iv). Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A community trust described in section 170(b)(1)(A)(v). Complete Part II.) A community trust described in section 170(b)(1)(A)(v). Complete Part II.) A community trust described in section 170(b)(1)(A)(v). Complete Part II.) A community trust described in section 170(b)(1)(A)(v). Complete Part II.) A norganization and an activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33'/96 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after Juns 30, 1975. See section 509(a)(2). Complete Part III.) A norganization organized and operated exclusively to test for public safety. See section 509(a)(2). A norganization organized and operated exclusively to test for public safety. See section 509(a)(2). A norganization organization describes the section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11 tal through 11d that describes the type of supporting organization and complete large 11. A norganization								
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(iii). (Attach Schedule E (Form 990 or 990 rego-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(vi), and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part III.) A community trust described in section 170(b)(1)(A)(v). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives: (1) more than 33'/5% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33'/5% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization and operated exclusively to test for public safety. See section 509(a)(2). An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organizated and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization (see instructions) for public safety. See section 509(a)(2). See section 509(a)(2). See section 509(a)(3). Check the box if hines 11a through 11d that describes the type of supporting organization and complete lines		· , ,						
2	The c			,		-	•	
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: A medical research organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii). Complete Part II.) A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A norganization that normally receives (1) more than 331/% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization and operated exclusively to test for public safety. See section 509(a)(2). Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type II. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization organization operated, supporting organization and complete lines 11e, 11f, and 11g. Type II. A supporting organization supervised or controlled by its supported organization(s), bylaving control or management of the supporting organization operated in connection with its supported	1							
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii), Enter the hospital's name, city, and state: A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organizated and operated exclusively to the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and completes 11a, 11a, and 11g.								
hospital's name, city, and state: 5		·	•					/···
S	4			onjunction with a nosp	oitai desc	ribea in s	section 170(b)(1)(A)	(III). Enter the
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v)). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in the community of the support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization addrend unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4). A norganization organized and operated exclusively to test for public safety. See section 509(a)(4). A norganization organization and complete Part IV. Sections 609(a)(2). (Complete Part IV. 509(a)(2). (See section 509(a)(3). (Check the box in lines 114 through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. a	5	An organization operated for	the benefit of a	college or university	owned o	r operate	ed by a government	al unit described in
An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(2). See section for one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Dype II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization wested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. The III of the organization of sup	6		•	montal unit described	lin aaati	170/h)	(4)(A)(₃)	
described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community organization and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization fair June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.			•					the general public
An organization that normally receives: (1) more than 331/s% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/s% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10	•	described in section 170(b)(1)(A)(vi). (Complet	te Part II.)	-	i a gover	Timental unit of from	Title general public
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 501 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10	8							
support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10	9							
acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization (w) Amount of other support (see instructions)								
10								x) iroiii busiilesses
11	10	_ , , ,		•		•	•	
one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. a			-		-			out the nurnoses of
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b	••	one or more publicly supporte	d organizations d	lescribed in section 5	09(a)(1) o	r section	509(a)(2). See sect	ion 509(a)(3). Check
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b	а	Type I. A supporting organization	zation operated,	supervised, or control	led by its	supporte	ed organization(s), ty	pically by giving
control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c		the supported organization(s) the power to re	egularly appoint or ele	•		• • • •	
organization(s). You must complete Part IV, Sections A and C. c	b	☐ Type II . A supporting organ	ization supervise	d or controlled in con	nection w	ith its su	pported organization	n(s), by having
its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d					ie same p	ersons tl	nat control or manag	ge the supported
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e	С							y integrated with,
requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e	d	☐ Type III non-functionally ir	itegrated . A sup	porting organization o	perated i	n connec	tion with its support	ed organization(s)
functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations								an attentiveness
g Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above (see instructions)) Yes No (A) (B)	е							I, Type III
(ii) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1-9 above (see instructions)) (iv) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vii) Amount of other support (see instructions)	f	Enter the number of supported	organizations .					
(described on lines 1–9 above (see instructions)) Ves No	g	Provide the following information	n about the supp	orted organization(s).				
(A) (B)		(i) Name of supported organization	(ii) EIN	(described on lines 1–9	listed in you	ır governing	support (see	other support (see
(B)					Yes	No		
	(A)							
(C)	(B)							
	(C)							
(D)	(D)							
(E)	(E)							
	Total							

Part								
	(Complete only if you checked the box on line 5, 7, or 8 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.)							
Secti	on A. Public Support	quamy arran		, р				
	dar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 20 1 1	(2) 2012	(0) 20:0	(4) 2011	(0) 20 10	(4)	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.							
	on B. Total Support				ı	1		
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc	•	•			12	504()(0)	
13	First five years. If the Form 990 is for the organization, check this box and stop he	_	n's first, secon		·=			
Secti	on C. Computation of Public Suppor							
14	Public support percentage for 2015 (line 6	6, column (f) d	ivided by line 1	1, column (f))		14	%	
15 16a	Public support percentage from 2014 Sch 331/3% support test—2015. If the organization qua	zation did not	check the box	on line 13, and	d line 14 is 33¹			
b	331/3% support test—2014. If the organ check this box and stop here. The organ	nization did no	ot check a box	on line 13 or	16a, and line		or more,	
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts- acts-and-circu	and-circumsta	nces" test, che st. The organiz	eck this box ar ation qualifies	nd stop here. as a publicly s	Explain in	
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part VI how the organization m supported organization	ion meets the eets the	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th he organizatio	nis box and s	top here.	
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the organization fails to qualify	under the te	sts listed bei	ow, piease co	mpiete Part	11.)	
	on A. Public Support						
	dar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
^	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
•	organization's benefit and either paid						
	to or expended on its behalf						
-	·						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
_							
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		<u></u>				
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	(-,-		(1)	(2)	(2)	()
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	· ·						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	J					. , , ,
	organization, check this box and stop he	re					▶ 🗆
Secti	on C. Computation of Public Suppor	t Percentag	е				_
15	Public support percentage for 2015 (line 8	3, column (f) di	ivided by line 1	3, column (f))		15	%
16	Public support percentage from 2014 Sch					16	%
Secti	on D. Computation of Investment In-	come Perce	ntage				
17	Investment income percentage for 2015 (line 10c, colun	nn (f) divided b	y line 13, colur	mn (f))	17	%
18	Investment income percentage from 2014	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests-2015. If the organ						%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2014. If the organiz	_	-	-		_	_
~	line 18 is not more than 33 ¹ / ₃ %, check this l						
20	Private foundation. If the organization di		-	-			_

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	100	140
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
5a	purposes. Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	4c		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
С	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If</i> "Yes," <i>provide detail in</i> Part VI.			
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	6		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
L	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on 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		
Secti	on 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		
Secti	on 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 i	nstru	ction	 s):
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			•
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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 those activities constituted substantially all of its activities.			
	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. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	ly-in	tegrated Type III support	ing organization (see

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish e						
2	Amounts paid to perform activity that directly furthers exe	rted					
	organizations, in excess of income from activity						
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations				
	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
<u>6</u>	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.						
		h tha avancination is was					
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	n the organization is res	porisive				
9	Distributable amount for 2015 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
	and a different different specific and a specific a	<i>(</i> 2)	(ii)	(iii)			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015			
1	Distributable amount for 2015 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2015						
	(reasonable cause required-see instructions)						
	Excess distributions carryover, if any, to 2015:						
a							
<u>b</u>							
d	From 2013						
e	From 2013						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
— b	Applied to 2015 distributable amount						
i	Carryover from 2010 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2015 from Section						
	D, line 7: \$						
a	Applied to underdistributions of prior years						
b	Applied to 2015 distributable amount						
C	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2015, if						
	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
О	6 Remaining underdistributions for 2015. Subtract lines 3h						
	and 4b from line 1 (if amount greater than zero, see instructions).						
7	Excess distributions carryover to 2016. Add lines 3j						
•	and 4c.						
8	Breakdown of line 7:						
a							
b							
С	Excess from 2013						
d	Excess from 2014						
е	Excess from 2015						

Part VI	Ill, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

CARN	GIE INSTITUTION OF WASHINGTON			53-0196523
Par				ounts.
	Complete if the organization answered		_	
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year) .			
4 5	Aggregate value at end of year	or advisors in writing that the assets h	eld in done	ur advised
3	funds are the organization's property, subject to t	S .		
6	Did the organization inform all grantees, donors,			
Ū	only for charitable purposes and not for the bene			
			-	
Part				
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the	e organization (check all that apply).		
	Preservation of land for public use (e.g., recreation	ation or education) 🗌 Preservation o	f a historica	lly important land area
	☐ Protection of natural habitat	☐ Preservation o	f a certified	historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution	on in the for	
	easement on the last day of the tax year.			Held at the End of the Tax Year
а				
b	Total acreage restricted by conservation easemer			
c d	Number of conservation easements on a certified Number of conservation easements included in	` ,		
u			2d	
3	Number of conservation easements modified, trai			the organization during the
_	tax year ►			o. ga <u>-</u> a ag
4	Number of states where property subject to cons	ervation easement is located ►		
5	Does the organization have a written policy re	egarding the periodic monitoring, ins	pection, ha	andling of
	violations, and enforcement of the conservation e	asements it holds?		\cdot \cdot \cdot \Box Yes \Box No
6	Staff and volunteer hours devoted to monitoring, inspe-	cting, handling of violations, and enforcing	conservation	easements during the year
	>			
7	Amount of expenses incurred in monitoring, inspect	ing, handling of violations, and enforcing	conservation	n easements during the year
•	►\$	- 0/-1) -1		D(I=)(4)(D)(i)
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	e 2(a) above satisfy the requirements of		
9	In Part XIII, describe how the organization reports			· · · □ Yes □ No
Э	balance sheet, and include, if applicable, the text			
	organization's accounting for conservation easem	•	iariolai otate	mionio inal accompce inc
Part			Other Sin	nilar Assets.
	Complete if the organization answered			
1a	If the organization elected, as permitted under S	FAS 116 (ASC 958), not to report in its	revenue st	atement and balance sheet
	works of art, historical treasures, or other similar	•		
	public service, provide, in Part XIII, the text of the	footnote to its financial statements that	t describes	these items.
b	If the organization elected, as permitted under			
	works of art, historical treasures, or other similar	•	ducation, or	research in furtherance of
	public service, provide the following amounts rela			. Δ
	(i) Revenue included on Form 990, Part VIII, line (ii) Assets included in Form 990, Part X	1		> \$
2	(II) Assets included in Form 990, Part X If the organization received or held works of ar	t historical treasures or other similar		financial gain provide the
_	following amounts required to be reported under			imanciai gaiii, provide the
а	Revenue included on Form 990, Part VIII, line 1			▶ \$
a b	Assets included in Form 990, Part X			► \$

Schedul	e D (Form 990) 2015					Page 2
Part		Collections of	Art. Historical	Treasures or	Other Similar A	
3	Using the organization's acquisition, a collection items (check all that apply):					
а	☐ Public exhibition		d □ Loar	or exchange p	programs	
b	Scholarly research		e Othe			
С	☐ Preservation for future generations	;				
4	Provide a description of the organizat		and explain how	hey further the	organization's exe	empt purpose in Par
	XIII.		•	•	J	
5	During the year, did the organization assets to be sold to raise funds rather					
Part			·			
	Complete if the organization 990, Part X, line 21.		on Form 990,	Part IV, line 9,	, or reported an a	mount on Form
1a	Is the organization an agent, trustee,	custodian or oth	er intermediary f	or contribution	s or other assets i	not
	included on Form 990, Part X?					. ☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following t	able:		
		•	J			Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line 21, for ϵ	escrow or custo	odial account liabili	ty? 🗌 Yes 🗌 No
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	n has been pro	ovided on Part XIII	🗆
Par					_	
	Complete if the organization					. 1
		(a) Current year	(b) Prior year	(c) Two years ba		
1a	Beginning of year balance	819,540,019	809,951,370			
b	Contributions	130,750	148,221	13,	500 11,6	25 11,000
С	Net investment earnings, gains, and					
	losses	-29,062,673	50,809,234			
d	Grants or scholarships Other expenditures for facilities and	3,026,553	2,429,969	2,647,	656 2,845,0	2,469,819
е	programs	44.050.740	24 404 440	27.400	,,,,	44.074.445
f	Administrative expenses	41,059,613 2,368,313	34,184,148			
g	End of year balance	744,153,617	4,754,689 819,540,019			· · · ·
2	Provide the estimated percentage of the					030,300,603
a	Board designated or quasi-endowmer	-		g, colaitiit (<i>a))</i> 11	cia as.	
b		7.4 %	70			
C	Temporarily restricted endowment ▶	76.7 %				
	The percentages on lines 2a, 2b, and 2		00%.			
3a	Are there endowment funds not in the			at are held and	d administered for t	the
	organization by:					Yes No
	(i) unrelated organizations					. 3a(i) 🗸
	(ii) related organizations					. 3a(ii) 🗸
b	If "Yes" on line 3a(ii), are the related or	rganizations listed	as required on S	chedule R? .		. 3b
4	Describe in Part XIII the intended uses					
Part	VI Land, Buildings, and Equip	ment.				
	Complete if the organization	answered "Yes"	on Form 990,	Part IV, line 1	1a. See Form 990), Part X, line 10.
	Description of property	(a) Cost or oth		or other basis other)	(c) Accumulated depreciation	(d) Book value
1a	Land		0	817,117		817,117
b	Buildings		0	92,356,904	35,846,759	56,510,145

0

0

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

174,890,589

2,418,967

c Leasehold improvements

74,076,802

2,418,967

133,823,031

0

0

. ▶

100,813,787

Schedule D (Form 990) 2015

Part VII	Investments-Other Securities				
	Complete if the organization answ	wered "Yes" on For	m 990, Part IV, li	ne 11b. See Form	n 990, Part X, line 12.
	(a) Description of security or category (including name of security)	1	(b) Book value	` '	thod of valuation: I-of-year market value
(1) Financial	derivatives			0 End-of-Year Marke	et Value
(2) Closely-h	eld equity interests		413,69	6 Cost	
(3) Other Re	al asset/natural resources		148,598,66	8 End-of-Year Marke	et Value
	tive investments		294,625,09	9 End-of-Year Marke	et Value
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
) must equal Form 990, Part X, col. (B) line 12.)	.1	443,637,46	3	
Part VIII	Investments—Program Related		000 Dort IV I	no 110 Coo Form	000 Dort V line 10
	Complete if the organization answers	wered Yes on For			
	(a) Description of investment		(b) Book value		thod of valuation: I-of-year market value
(4)					•
<u>(1)</u> (2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answ	wered "Yes" on For	m 990, Part IV, li	ne 11d. See Form	990, Part X, line 15.
	(a	a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	nn (b) must equal Form 990, Part X, co	ol (P) lino 15)			
Part X	Other Liabilities.	oi. (B) iine 15.)		<u>.</u> ▶	
PartA	Complete if the organization ans	wered "Ves" on Fo	m 000 Part IV li	na 11a or 11f Sa	e Form 990 Part Y
	line 25.	wered res offroi	iii 990, Fait IV, ii	ne rie or rii. Se	e i oiiii 990, Fait A,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	* * * * * * * * * * * * * * * * * * * *	(5) 2001. Talab	0		
	postretirement benefit cost	27.67	<u> </u>		
	bond payable		00,000		
(4)	bond payable	30,00	00,000		
(5)					
(6)					
(7)					
(8)					
(9)					
) must equal Form 990, Part X, col. (B) line 25.)	77.67	74,751		
	uncertain tax positions. In Part XIII, provi			on's financial stateme	ents that reports the
	liability for uncertain tax positions under				

Schedule D (Form 990) 2015 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 12,750,020 2 Amounts included on line 1 but not on Form 990. Part VIII, line 12: Donated services and use of facilities 0 2c 0 -54,947 -59,893,485 2e Subtract line **2e** from line **1** 3 3 72,643,505 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . **4**a 1,654,371 -1.351.259 Add lines 4a and 4b 4c 303,112 Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.) 5 72,946,617 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990. Part IV. line 12a. 102,664,182 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: 2a 0 Prior year adjustments 2b 0 2c 0 1,351,259 2е 1,351,259 3 Subtract line **2e** from line **1** 3 101,312,923 Amounts included on Form 990. Part IX. line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 0 Add lines 4a and 4b n Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) 5 101,312,923 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part V, Line 4 - The organization's endowment funds are intended to support its overall mission of supporting scientific discovery "in the broadest and most liberal manner". Schedule D, Part X, Line 2 - - On July 1, 2007, Carnegie adopted the provisions of FASB Interpretation No. 48, Accounting for Uncertainty in Income Taxes (FIN48). FIN48 required that a tax position be recognized or derecognized based on a 'more-likely-than-not' threshold. This applies to positions taken or expected to be taken in a tax return. The implementation of FIN48 had no impact on the statement of financial position or statement of activities. Carnegie does not believe its financial statements include (or reflect) any uncertain tax positions. Schedule D, Part X, Line 2 - FASB Accounting Standards Codification (ASC) 740-10, Income Taxes, requires that management evaluate tax positions taken by Carnegie and recognize a tax liability (or asset) if Carnegie has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. Carnegie has analyzed the tax positions taken and has

concluded that as of June 30, 2016, there are no uncertain tax positions taken or expected to be taken that would require recognition of a
liability (or asset) or disclosure in the financial statements.
Schedule D, Part XI, Line 2d - Prior year adjustments
Schedule D, Part XI, Line 4b - Rental expenses
Schedule D, Part XII, Line 2d - Rental expenses
Schedule D (Form 990) 201

SCHEDULE E (Form 990 or 990-EZ)

Schools

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

r en				
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,		YES	NO
•	bylaws, other governing instrument, or in a resolution of its governing body?	1	~	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	V	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	~	
	Our non-discrimination policy is available on our website, www.carnegiescience.edu, under Policies and Procedures.	3		
4	Does the organization maintain the following?	4 -		
a b	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially	4a		
С	nondiscriminatory basis?	4b	•	
لہ	with student admissions, programs, and scholarships?	4c 4d	V	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	40		
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		~
b	Admissions policies?	5b		~
С	Employment of faculty or administrative staff?	5c		~
d	Scholarships or other financial assistance?	5d		~
е	Educational policies?	5e		~
f	Use of facilities?	5f		~
g	Athletic programs?	5g		~
h	Other extracurricular activities?	5h		~
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	~	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		~
7	If you answered "Yes" on either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
7	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.	7	~	

Part II	Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).
Schedule E	E, Part I, Line 6 - We receive grants and pass through from several Federal agencies including NSF, DOE, DHS, NASA, USDA,
	, and others. These monies support our scientific research and education.
,	, and a state of the state of t

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

CARNEGIE INSTITUTION OF WASHINGTON 53-0196523

Par		on Activiti	ies Outside	the United States. Comp	plete if the organization ans	wered "Yes" on
1	Form 990, Part IV, line For grantmakers. Does the		maintain reco	ords to substantiate the am	ount of its grants and other	
	assistance, the grantees' eli-	•			3	
	grants or assistance?					✓ Yes □ No
2	For grantmakers. Describe	in Part V t	the organizati	on's procedures for moni-	toring the use of its grant	s and other
_	assistance outside the Unite		ine organizati	on a procedures for mon	toring the ase of its grant	did other
3	Activities per Region. (The fo					
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(4)						
(1)	Central America and the Caribb	0	0	Program Services	IPCC CAMPAIGN	28,117
(2)	East Asia and the Pacific	0	7	Program Services	Planetary System Mtg, Gold	53,704
(3)	East Asia and the Pacific	0	1	Program Services	Anglo-Australia OBS fieldwo	38,743
(4)	East Asia and the Pacific	0	0	Program Services	DCO Executive Committee N	20 407
_ (.,	Last Asia and the Facilic	0	0	Frogram Services	DCO Executive Committee i	28,407
(5)	East Asia and the Pacific	0	0	Program Services	JPGU	10,474
(6)	East Asia and the Pacific	0	0	Program Services	IPCC CAMPAIGN	19,106
(7)	East Asia and the Pacific	0	0	Program Services	MALAYSIA FOREST MAPPII	70,251
(8)	East Asia and the Pacific	0	0	Program Services	CAO CAMPAIGN	40,063
(9)	East Asia and the Pacific	0	0	Program Services	ONE TREE ISLAND RESEAR	38,210
(10)	East Asia and the Pacific	0	0	Program Services	CO2 SYMPOSIUM	15,039
(11)	East Asia and the Pacific	0	0	Program Services	ASSESSMENT RESEARCH	10,331
(4.0)						
(12)	Europe (including Iceland and C	0	12	Program Services	ISSI Workshop, Melt in Mant	100,455
(13)	Europe (including Iceland and C	0	6	Program Services	BENTO Box Prototype, Strai	27,156
(14)	Europe (including Iceland and C	0	0	Program Services	DCO Executive Committee N	67,167
(15)	Europe (including Iceland and C	0	0	Program Services	Goldschmidt Conference	33,841
(16)	Europe (including Iceland and C	0	0	Program Services	Svalbard Expedition, Diamo	14,977
	Sch F, Stmt 1	0	2/			FO/ 044
3a b		U	26			596,041
	sheets to Part I	2	86			6,556,108

c Totals (add lines 3a and 3b)

7,152,149

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of (a) Name of (f) Manner of (g) Amount of (d) Purpose of (b) IRS code (e) Amount of (c) Region (h) Description valuation (book, FMV, appraisal, other) organization cash non-cash section and EIN grant cash grant of non-cash assistance disbursement assistance (if applicable) (1) (2) (3) (4) (5) (6) **(7)** (8) (9) (10) (11) (12)(13)(14) (15) (16) Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2015 Page **4**

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; 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		

✓ No

☐ Yes

Schedule F (Form 990) 2015 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 (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F, Part I, Line 2 - As a research institution, Carnegie provides fellows with the opportunity to pursue independent research and the
training to acquire the additional skills and expertise needed to become a successful scientist. Carnegie monitors the fellowship experience
to achieve both objectives. Fellows pursue their research program relatively independently but have full access to Carnegie facilities and
staff members and typically perform their experiments and scientific work on-site and in collaboration with other Carnegie facilities and staff
members and typically perform their experiments and scientific work on-site and in collaboration with other Carnegie vehicle for monitoring
and supporting the work of the fellow. Carnegie's various administrative and research policies apply to fellows. In Carnegie's structure,
department directors are responsible for assuring that fellows follow these procedures and carry out the research supported through
externally or internally-funded fellowships. The fellows listed below are stationed at the Carnegie facility in Las Campanas, Chile.
externally of internally runded renowsings. The tenows isseed below are standard at the carriegic facility in East campaints, crime.

Form: **Schedule F (2015)** EIN: **53-0196523**

Page: 1

Accounts and Activities Outside the United States

Part I, Line 3

		Offices	Employees	Total
Region Activities Services	Europe (including Iceland and Greenland) Program Services DCO CECAM Meeting	0	0	12,682
Region Activities Services	Europe (including Iceland and Greenland) Program Services 12,682.13	0	0	22,434
Region Activities Services	Europe (including Iceland and Greenland) Program Services SAINSBURY LAB COMMITTEE MEETING	0	0	19,753
Region Activities Services	Europe (including Iceland and Greenland) Program Services GERMAN ACADEMY ELECTION - IWPMB	0	0	19,820
Region Activities Services	Europe (including Iceland and Greenland) Program Services IPCC CAMPAIGN	0	0	59,307
Region Activities Services	Europe (including Iceland and Greenland) Program Services Collaboration Conferences	0	0	65,163
Region Activities Services	North America (including Canada and Mexico, but not the United States) Program Services International Diamond School	0	1	10,059
Region Activities Services	South America Program Services LCO Fldwk, Install Prototype Seismometer, TBF Expedition	0	10	112,944
Region Activities Services	South America Program Services Magellan Observatory Research	0	0	10,749
Region Activities Services	South America Program Services Scientific observation runs	0	0	168,019
Region Activities Services	South America Program Services Collaboration Conferences	0	0	26,138
Region Activities Services	South America Program Services Telescope engineering and maintenance	0	0	16,216
Region Activities Services	South America Program Services Telescope operations for research	2	75	5,864,603
Region Activities Services	South America Program Services Observatory Research	0	0	148,221
	Total:	2	86	6,556,108

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

2015
Open to Public Inspection

Employer identification number

CARNEGIE INSTITUTION OF WASHING	TON						53-0196523
Part I General Information of	on Grants and	Assistance				•	
Does the organization maintain the selection criteria used to av			_			r the grants or assistar	
2 Describe in Part IV the organiza	ation's procedu	res for monitoring	the use of grant fu	ınds in the United	l States.		
Part II Grants and Other Ass 990, Part IV, line 21, fo							
1 (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
(1) Sch I, Stmt 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 5		•		line 1 table			12

Part III can be duplicated if additi			(0.4)		(0.5)
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Fellowship	51	1,756,411	0		
t IV Supplemental Information. Prov	vide the information re	equired in Part I, lin	e 2, Part III, column	(b), and any other additi	onal information.
edule I, Part I, Line 2 - As a research institution,	Carnegie provides fellov	vs with the opportunity	to pursue independer	nt research and the training to	acquire the additional skills and
ertise needed to become a successful scientist.	Carnegie monitors the fe	ellowship experience to	achieve both objectiv	es. Fellows pursue their rese	earch program relatively
pendently but have full access to Carnegie faci	lities and staff members	and typically perform t	heir experiments and	scientific work on-site and in	collaboration with other Carnegie
ntists. Fellows in the biological sciences apply	to Carnegie mainly to lea	rn the research technic	ques and research are	as of a particular Carnegie st	aff scientist, that is, to work in tha
cipal investigator's (PI) lab. Labs routinely enga	ge a number of different	people, including a PI,	technicians, postdoct	oral scientists, and researche	ers. The PI monitors the work of the
w on an ongoing basis, critiques the fellows' re	search, makes suggestic	ons for avenues to expl	ore, and provides ong	oing mentoring. Fellows in th	e physical sciences typically
aborate with a senior staff member on research	projects. This provides a	n ongoing vehicle for	monitoring and suppor	rting the work of the fellow. F	ellows are asked to present and
end their research to other scientists both at Car	negie and at other institu	utions. This process he	elps to monitor a fellow	vs' scientific progress and pe	rmits adjustments as necessary.
negie's various administrative and research poli	cies apply to fellows. In	Carnegie's structure, d	epartment directors ar	e responsible for assuring th	at fellows follow these procedure:
carry out the research supported through exter	nally or internally-funded	d fellowships.			

Purpose of grant

Form: **Schedule I (2015)** EIN: **53-0196523**

-		Recipient EIN	Amt. of cash	Amt. of non-
			grant	cash asst
Name and address	STANFORD UNIVERSITY	94-1156365	389,263	(
	PO BOX 873503			
	SAN FRANCISCO, CA 94144-4253			
IRC code section Method of valuation	501(c)3			
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA	95-6006143	195,772	(
Name and address	10920 WILSHIRE BLVD STE 107	95-6006143	195,772	(
	LOS ANGELES, CA 90024-6503			
IRC code section	501(c)3			
Method of valuation	, ,			
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	CALIFORNIA INSTITUTE OF TECHNOLOGY	95-1643307	104,039	(
	1200 E CALIFORNIA BLVD			
	PASADENA, CA 91125			
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.	Participant cupport: academic partnership to train young eciontists			
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	NORTWESTERN UNIVERSITY	36-2167817	98,317	(
	633 CLARK ST RM G547			
IRC code section	EVANSTON, IL 60208-1112 501(c)3			
Method of valuation	301(0)3			
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	UNIVERSITY OF ILLINOIS	37-6000511	148,929	(
	1901 SOUTH FIRST ST A		,	
	CHAMPAIGN, IL 61820-7406			
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	YALE UNIVERSITY	06-0646973	70,928	(
	PO BOX 208239			
	NEW HAVEN, CT 06520-8239			
IRC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst. Purpose of grant	Participant support; academic partnership to train young scientists			
		00 0005000	100 510	
Name and address	UNIVERSITY OF ALABAMA AT BIRMINGHAM	63-6005396	100,546	(
	UNIVERSITY STATION BIRMINGHAM, AL 35294			
IRC code section	501(c)3			
Method of valuation	\(-,-			
Desc. of Non-Cash Asst.				

Participant support; academic partnership to train young scientists

Schedule I, Part IV, Statem	ent 1	CARNEGIE INSTI	TUTION OF WASH	NGTON
Name and address	SUNY AT BUFFALO	14-1368361	60,965	0
	PO BOX 9			
	ALBANY, NY 12201-0009			
RC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst.	Double in contract and contract			
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	WASHINGTON UNIVERSITY IN ST LOUIS	43-0653611	48,965	0
	700 ROSEDALE AVE			
	ST LOUIS, MO 63112-1408			
RC code section	501(c)3			
Method of valuation				
Desc. of Non-Cash Asst. Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	UNIVERSITY OF HAWAII	99-6000354	35,314	0
	2440 CAMPUS RD			
RC code section	HONOLULU, HI 96822			
Method of valuation	501(c)3			
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			
		07.0000505	47.000	
Name and address	UNIVERSITY OF UTAH	87-6000525	47,363	Ü
	201 S PRESIDENTS CIR NO 406 SALT LAKE CITY, UT 84112-9020			
RC code section	501(c)3			
Method of valuation	301(0)3			
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			
Name and address	WASHINGTON STATE UNIVERSITY	91-6001108	26,835	0
taile and address	PO BOX 641025	31-0001100	20,000	O
	PULLMAN, WA 99164-1025			
RC code section	501(c)3			
Method of valuation	· /			
Desc. of Non-Cash Asst.				
Purpose of grant	Participant support; academic partnership to train young scientists			

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

2015 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

CARN	IEGIE INSTITUTION OF WASHINGTON 53-01965	23		
Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	 ☐ First-class or charter travel ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef) 			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	v	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	,	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		~
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		~
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a		~
b	Any related organization?	5b		~
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		V
b	Any related organization?	6b		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		,
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		~
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			

Regulations section 53.4958-6(c)?

9

Schedule J (Form 990) 2015

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Matthew P Scott, President	(i)	550,000	0	0	0	50,679	600,679	0
1	(ii)	0	0	0	0	0	0	0
Timothy P Doyle, Chief	(i)	275,028	0	0	0	46,751	321,779	0
Operating Officer	(ii)	0	0	0	0	0	0	0
Richard W Carlson, Department	(i)	253,704	0	0	0	54,455	308,159	0
Director	(ii)	0	0	0	0	0	0	0
Coorgo Cody Dopartment	(i)	228,375	0	0	0	53,387	281,762	0
Director	(ii)	0	0	0	0	0	0	0
John S Mulchaey Department	(i)	221,038	0	0	0	41,073	262,111	0
Director 5	(ii)	0	0	0	0	0	0	0
Joseph Berry Department	(i)	195,476	0	0	0	50,853	246,329	0
Director 6	(ii)	0	0	0	0	0	0	0
Seung Rhee Department	(i)	176,137	0	0	0	32,963	209,100	0
Director 7	(ii)	0	0	0	0	0	0	0
Vivian 7hong Donartment	(i)	170,201	0	0	0	28,555	198,756	0
Director 8	(ii)	0	0	0	0	0	0	0
Patrick J McCarthy, Staff	(i)	293,279	0	0	0	51,903	345,182	0
9	(ii)	0	0	0	0	0	0	0
Carl R Sherman, Staff	(i)	253,767	0	0	0	56,022	309,789	0
10	(ii)	0	0	0	0	0	0	0
Kenneth G Caldeira, Staff	(i)	220,965	0	27,425	0	52,022	300,412	0
11	(ii)	0	0	0	0	0	0	0
Mark Phillips, Staff	(i)	215,789	0	0	0	60,666	276,455	0
12	(ii)	0	0	0	0	0	0	0
Erik H Hauri, Staff	(i)	215,000	0	0	0	49,352	264,352	0
13	(ii)	0	0	0	0	0	0	0
Gregory P Asner, Staff	(i)	209,910	0	0	0	44,155	254,065	0
14	(ii)	0	0	0	0	0	0	0
Joseph G Gall, Staff	(i)	208,575	0	0	0	47,880	256,455	0
15	(ii)	0	0	0	0	0	0	0
Anna M Michalak, Staff	(i)	183,708	0	19,930	0	25,995	229,633	0
16	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part or any additional information.
Schedule J, Part I, Line 1a - Social club - Carnegie provides its President a membership to a social club used for business related purposes. Housing allowance - Carnegie's policies
include a provision for housing subsidies in high-cost areas for qualifying staff members
morado a provision los nodesing substatos in high cost arous for qualifying stati monibors

SCHEDULE J (Form 990)

Continuation Sheet for Schedule J (Form 990)

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

Inspection

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number 53 0196523

	ĺ	(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	t Compensated E (C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	reported in prior Form 990 or Form 990-EZ
Ramon Dinneny, Staff	(i)	157,546	0	21,900	0	35,869	215,315	
	(ii)	0	0	0	0	0	0	
Ronald Cohen, Staff	(i)	161,897	0	0	0	30,012	191,909	
	(ii)	0	0	0	0	0	0	
Russell Hemley, Staff		269,275	0	0	0	60,872	330,147	
	(i) (ii)	0	0	0	0	0	0	
Christopher B Field, Staff	(i)	264,794	0	0	0	62,114	326,908	
	(ii)	0	0	0	0	0	0	
Wolf Frommer, Staff	(i)	264,794	0	0	0	58,831	323,625	
	(ii)	0	0	0	0	0	0	
Cynthia Allen, Staff	(i)	216,145	0	0	0	44,832	260,977	
	(ii)	0	0	0	0	0	0	
Gotthard SaghiSzabo, Staff	(i)	184,368	0	0	0	44,728	229,096	
	(ii)	0	0	0	0	0	0	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)				 -			
	(i) (ii)				 -			
	(i) (ii)				 		[

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

OMB No. 1545-0047

explanations, and any additional information in Part VI. ► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** CARNEGIE INSTITUTION OF WASHINGTON 53-0196523 Part I **Bond Issues** (i) Pooled financing (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (a) Issuer name (e) Issue price behalf of issuer Maryland Health & Higher Educational Refund prior MHHEFA bonds issued to 30,580,000 52-0936091 574217JB2 02/04/2010 Yes No Yes No Yes No construct & equip new facility. Facilities Authority (MHHEFA) on behalf of Carpogio
California Educational Facilities Authority Refund prior CEFA bonds issued to 52-1705592 130178VS2 03/24/2010 34.525.000 (CEFA) on behalf of Carnegie Institution of finance telescope proj and renovate V C D Part II **Proceeds** C D Α В 0 0 0 0 3 30,505,440 36,365,183 0 5 0 0 0 7 553,594 565,183 8 0 0 9 0 0 10 30.000.000 35,800,000 11 0 0 12 0 0 13 2005 2003 Yes No Yes Yes Nο Yes Nο Were the bonds issued as part of a current refunding issue? V 15 Were the bonds issued as part of an advance refunding issue? V ~ 16 Does the organization maintain adequate books and records to support the final allocation of proceeds? Part III **Private Business Use** В С D Was the organization a partner in a partnership, or a member of an LLC, Yes Nο Yes No Yes Nο Yes No which owned property financed by tax-exempt bonds? v v Are there any lease arrangements that may result in private business use of

Part III Private Business Use (Continued) В C D Α Yes No Yes Yes Nο Yes 3a Are there any management or service contracts that may result in private No No V **b** If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property?........... v V d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government 0 % 0 % % Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization. another section 501(c)(3) organization, or a state or local government ▶ % 0 % 0 % 0 % 0 % Does the bond issue meet the private security or payment test? ~ V **8a** Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? **b** If "Yes" to line 8a, enter the percentage of bond-financed property sold or % % % c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? Part IV Arbitrage Α В С D Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Yes No Yes Yes Nο No Yes No ~ V v If "Yes" to line 2c, provide in Part VI the date the rebate computation was Is the bond issue a variable rate issue? Has the organization or the governmental issuer entered into a qualified V

Schedule K (Form 990) 2015
Page 3

Part IV Arbitrage (Continued)								
		A	E	3		С)
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)? .		V		>				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period? .		~		V				
7 Has the organization established written procedures to monitor the								
requirements of section 148?	✓		~					
Part V Procedures To Undertake Corrective Action		•	1			1	•	
		A		3		С)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation is not available								
under applicable regulations?	✓		V					
Part VI Supplemental Information. Provide additional information for resp	onses to	questions	on Schedu	le K (see i	nstructions	s).		
Schedule K, Part II, Line 7-02/04/2010 30,580,000 Maryland Health & Higher Educational Fac	ilities - This	issue was u	sed to refun	d prior MHH	EFA bonds	of \$30 million	issued in O	ctober.
2002, the proceeds of which were used to construct and equip a new facility for Carnegie's								
Construction began in April 2003 and the facility was occupied in September 2005. The 201								
were used to cover issuance costs.				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Schedule K, Part II, Line 7-03/24/2010 34,525,000 California Educational Facilities Authority	(CEFA) - Th	is issue was	used to refu	nd \$17.5 mi	llion of 1993	Series B Cal	ifornia Educa	ational
Facilities Authority Revenue tax exempt bonds and \$18.3 million of 2006 Series A CEFA Re								
Educational Facilities Authority Revenue tax exempt bonds. 1993 Series A & B bonds were								
Observatories at Pasadena. The telescope project was completed in 2003. The 2010 Series								
cover issuance costs.			, , , , , , , , , , , , , , , , , , , ,					

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

CADI	NEGIE INSTITUTION O	E WASHINGTON	d.					Zimpioy	or idei		01965			
Par	t Excess Bene	fit Transaction	s (section 50	I (c)(3),	, section	501(c)(4), a	nd 50	1(c)(29) organiza	ations	only)).			
	Complete if the						line 25	a or 25b, or For	m 990	0-EZ,	Part	V, line		
1	(a) Name of disqualified	person	(b) Relationship be	etween organiz		person and	(c) Description of transaction					(d) Corre		
/4\		-	organization										Yes	No
(1) (2)														
(3)														
(4)														
(5)														
(6)														
2	Enter the amount	of tax incurred	by the orga	nizatio	n manag	gers or dis	qualifi	ed persons dui	ring tl	he ye	ar			
	under section 4958										▶ \$	6		
3	Enter the amount o	f tax, if any, on	line 2, above,	reimb	oursed by	the organ	izatior	ı			▶ \$	3		
Par		or From Inter			_							_		
		ie organization eported an am						38a or Form 99	90, Pa	ırt IV,	line 2	6; or	f the	
	organization	eported an am	Turn on Form	990, F	art A, III i	± 5, 6, 01 Z	۷. ————————————————————————————————————				ı			
(a) N	lame of interested person	(b) Relationship	(c) Purpose of		oan to or	(e) Origii		(f) Balance due	(g) In c	default?				ritten
		with organization	tion loan		om the anization?	principal an	nount				by board or committee?			
				<u> </u>	_				\				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
/4\	The aller David	Object On a section	D.0	То	From			(0/ 500	Yes	No 🗸	Yes	No	Yes	No
(1)	Timothy Doyle	Chief Operation			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		30,000	626,533		V	~		~	
(2)	Seung Yon Rhee	Department Di	Mortgage			/6	51,694	754,553						
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
Total							.▶	\$ 1,381,086						
Part		sistance Bene	fiting Interest	ed Pe	ersons.	0 D+IV I	!: O7	,						
	Complete if th	e organization	answered Ye	s on	Form 99	u, Part IV, I	ine ∠/	•						
(a) Name of interested persor		ship between inter and the organization		(c) Amount	of assistance	• (d) Type of assistance	е	(е) Purpo	ose of a	ssistan	ce
(1)		porconi	and the organization											
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)					1		1			1				

	L (Form 990 or 990-EZ) 2015				P	age 2
Part I\	Business Transactions Inv Complete if the organization	volving Interested Persons. n answered "Yes" on Form 990,	Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		aring of zation's nues?
					Yes	No
(1) M	erit Energy Company	Trustee, William Gayden	16,072,577	Contribution to Merit Investments		~
(2)						
(3)						
(4)						
(5)						
(6)						
<u>(7)</u>						
(8)						
(9)						
(10) Part V	Supplemental Information					
Part v	Provide additional informati	on for responses to questions o	on Schedule I. (see	instructions).		
	Trevide additional informati	on to responded to questione o	71. Conodalo 2 (666	inetiaetiene).		

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number 53-0196523

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art			-				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
_	•							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	4						
9	Securities—Publicly traded	~	3	88,248	FMV			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution—Historic structures							
14	Qualified conservation							
14	contribution—Other							
15	Real estate - Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► (
29	Number of Forms 8283 received	by the org	ganization during the tax y	ear for contributions for				
	which the organization completed	Form 8283	s, Part IV, Donee Acknowled	dgement	29			
							Yes	No
30a	During the year, did the organizat							
	28, that it must hold for at least th							
	to be used for exempt purposes f		e nolding period?			30a		
	If "Yes," describe the arrangemen							
31	Does the organization have a contributions?		tance policy that require	=	n-standard	24	~	
32a	Does the organization hire or use					31	•	
JZa		•	-			32a	~	
b	If "Yes," describe in Part II.							
33	If the organization did not report ar	n amount in	column (c) for a type of pro	perty for which column (a) i	s checked,			
	describe in Part II.							

Schedule M (Form 990) (2015) Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Line 32b - The organization uses its custodial bank, State Street, to process and sell stock contributions received from donors.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

Form 990, Part III, Line 4a - planets. Carnegie is a world-renowned center for petrology - study of rocks. It is also a world leader in high-pressure and high-temperature physics making significant contributions to both Earth and material sciences. Carnegie scientists are part of an interdisciplinary effort to investigate how life evolved on this planet and determine its potential for existing elsewhere. With various partners, Carnegie has launched a new multi-disciplinary, international initiative dedicated to achieving a transformational understanding of Earth's deep carbon cycle, including its poorly constrained reservoirs and fluxes, unknown role of deep biology, and unexplored influences of the deep carbon cycle on critical societal concerns related to energy, environment, and climate. Carnegie astronomers, unlike most in their filed, design and build their own instruments to capture the secrets of space. They are tracing the evolution of the universe from the spark of the Big Bang through star and galaxy formation, exploring the structure of the universe, and probing the mysteries of dark matter, dark energy, and the ever-accelerating rate at which the universe is expanding. Carnegie operated telescopes in Las Campanas Chile, at which a large part of the research is conducted, and is part of a consortium that has undertaken to design, construct and operate a telescope known as the Giant Magellan Telescope that, when complete, will be among the world's largest ground based optical/infrared facilities. Carnegie research also includes interdisciplinary teams of astronomers and astrophysicists, geophysicists and geochemists, cosmochemists and planetary scientists. These teams are discovering planets outside our solar system, determining the age and structure of the universe, and studying the causes of earthquakes and volcanoes. Using innovative approaches to research on global ecology, Carnegie scientists are picking apart the complicated interactions of Earth's land, atmosphere, and oceans to understand how global systems operate. With a wide range of powerful tools-from satellites to the instruments of molecular biology-these scientists explore issues such as the global carbon cycle, the role of land and oceanic ecosystems, and much more. These ecologists also play an active role in the public arena, from serving on international panels investigating climate change to promoting satellite imagery for the discovery of environmental hot spots.

Form 990, Part VI, Section B, Line 11b - The entire Board received a copy of the proposed filing by electronic means before it was submitted to the IRS. Any individual Board member who wished to make a comment concerning the filing provided comments to the Chair of the Audit Committee and the President prior to the filing. The Audit Committee reviewed the proposed filing in two steps. First, prior to the filing, the Committee received the form for detailed review and discussed the submission at a meeting of the Audit Committee. The Committee was asked, in particular, to review key governance and policy responses to assure the information accurately describes the Board's governance and fiduciary responsibilities. Any comments from the Committee were provided to the President so that any necessary revisions could be made. Second, within six months after the filing, the Audit Committee will provide the full board with any recommendations for future changes to the Form 990 submission and/or the Institution's policies or procedures.

Form 990, Part VI, Section B, Line 12c - Each year the Board of Trustees and key officers receive a conflict of interest package to complete that includes the Institution's policy, an updated list of organizations through which the Institution invests, and other information. Individuals receiving the package are required to respond by completing a signed, dated form. All conflicts of interest forms are collected by the Assistant Secretary to the Board and provided to Chief Operating Officer. The Chief Operating Officer, consults with the Institution's outside counsel concerning any issues and required follow-up resulting from the review. Required actions are fact specific.

Form 990, Part VI, Section B, Line 15 - The Employee Affairs Committee of the Board of Trustees annually conducts a review of the compensation of Chief Operating Officer. The review includes comparability data prepared by Associate Director of Human Resources. The results of the review are documented in the minutes of the meeting of the Committee. Both were reviewed in 2016. The Executive Committee of the Board of Trustees conducts a review of the compensation of the President and an independent compensation review was conducted by an third party consultant.

Form 990, Part VI, Section C, Line 19 - The governing documents, audited financial statements, and employee conflict of interest policy are available on our website www.carnegiescience.edu. The trustee conflict of interest policy is available upon written request.

Form 990, Part XI, Line 9 - \$620,618 pension related charges other than net periodic postretirement benefit cost of \$620,618 unrecognized net actuarial loss and \$18,000 unrecognized prior service cost for the year ending June 30, 2016.