

Form **990**  
Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019**

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

**C** Name of organization  
Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc  
% ASTRID KING  
Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite  
CLSB 5th Floor 3 Blackfan Circle

City or town, state or province, country, and ZIP or foreign postal code  
Boston, MA 02115

**D** Employer identification number  
30-0773387

**E** Telephone number  
(617) 432-7786

**G** Gross receipts \$ 204,640,019

**F** Name and address of principal officer  
DONALD E INGBER  
CLSB5TH FL 3 BLACKFAN CIRCLE  
BOSTON, MA 02115

**H(a)** Is this a group return for subordinates?  Yes  No

**H(b)** Are all subordinates included?  Yes  No

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

**H(c)** Group exemption number ▶

**I** Tax-exempt status  501(c)(3)  501(c) ( ) ◀(insert no)  4947(a)(1) or  527

**J** Website: ▶ [http //wyss harvard edu](http://wyss.harvard.edu)

**K** Form of organization  Corporation  Trust  Association  Other ▶

**L** Year of formation 2013

**M** State of legal domicile MA

## Part I Summary

**1** Briefly describe the organization's mission or most significant activities  
FORMED AS A SUPPORTING ORGANIZATION OF PRESIDENT AND FELLOWS OF HARVARD COLLEGE TO CONDUCT, SUPPORT AND DEVELOP RESEARCH AND INVENTIONS IN THE LIFE SCIENCES AND ENGINEERING

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

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	15
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	8
<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	0
<b>6</b> Total number of volunteers (estimate if necessary)	0
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	0
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	42,367,318	199,681,251
<b>9</b> Program service revenue (Part VIII, line 2g)	821	400
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,686,183	2,357,371
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	465,975	2,598,903
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	44,520,297	204,637,925
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	9,764,091	7,210,060
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	75,642,703	74,896,961
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	85,406,794	82,107,021
<b>19</b> Revenue less expenses Subtract line 18 from line 12	-40,886,497	122,530,904
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	75,821,837	197,654,044
<b>21</b> Total liabilities (Part X, line 26)	3,620,158	2,599,739
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	72,201,679	195,054,305

## Part II Signature Block

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

**Sign Here**

Signature of officer: \*\*\*\*\*  
Date: 2020-07-14

AYIS ANTONIOU ADMIN DIRECTOR  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: \_\_\_\_\_  
Preparer's signature: \_\_\_\_\_  
Date: 2020-07-13  
Check  if self-employed  
PTIN: P01441612

Firm's name: ▶ PRICEWATERHOUSECOOPERS LLP  
Firm's EIN: ▶ \_\_\_\_\_

Firm's address: ▶ 101 SEAPORT BOULEVARD  
BOSTON, MA 02210  
Phone no: (617) 530-5000

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

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

**4a** (Code ) (Expenses \$ 67,631,122 including grants of \$ 7,210,060 ) (Revenue \$ 400 )  
See Additional Data

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 67,631,122

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Contains 22 numbered questions regarding organizational requirements and reporting.

**Part IV Checklist of Required Schedules (continued)**

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

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

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	0
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	

<b>2a</b> 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 . . . . .		<b>2a</b>	0		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<b>2b</b>			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .		<b>3a</b>			No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O . . . . .</i>		<b>3b</b>			
<b>4a</b> 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)? . . . . .		<b>4a</b>			No
<b>b</b> If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		<b>5a</b>			No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>5b</b>			No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .		<b>5c</b>			
<b>6a</b> 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? . . . . .		<b>6a</b>			No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		<b>6b</b>			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<b>a</b> 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? . . . . .		<b>7a</b>			No
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		<b>7b</b>			
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		<b>7c</b>			No
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		<b>7d</b>			
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>7e</b>			No
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		<b>7f</b>			No
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		<b>7g</b>			
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .		<b>7h</b>			
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .					
<b>8</b>					
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .		<b>9a</b>			
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .		<b>9b</b>			
<b>10 Section 501(c)(7) organizations.</b> Enter					
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .		<b>10a</b>			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		<b>10b</b>			
<b>11 Section 501(c)(12) organizations.</b> Enter					
<b>a</b> Gross income from members or shareholders . . . . .		<b>11a</b>			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .		<b>11b</b>			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?					
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year		<b>12b</b>			
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O		<b>13a</b>			
<b>b</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 . . . . .		<b>13b</b>			
<b>c</b> Enter the amount of reserves on hand . . . . .		<b>13c</b>			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		<b>14a</b>			No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . . .</i>		<b>14b</b>			
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .		<b>15</b>			No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .		<b>16</b>			No

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (15); 1b Enter the number of voting members included in line 1a, above, who are independent (8); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (Yes); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (Yes); b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (MA); 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records (ASTRID KING 3 BLACKFAN CIRCLE CLSB 513 Boston, MA 02115 (617) 432-7786)

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT BLAND DIRECTOR	0 5 0 0	X						0	0	0
(2) GEORGE DALEY DIRECTOR	0 5 59 5	X						0	824,013	34,956
(3) FRANCIS DOYLE DIRECTOR	0 5 59 5	X						0	607,662	63,584
(4) SANDRA FENWICK DIRECTOR	0 5 0 0	X						0	0	0
(5) ALAN GARBER DIRECTOR	0 5 59 5	X						0	730,520	195,698
(6) NORBERT HAAS DIRECTOR	0 5 0 0	X						0	0	0
(7) KATHERINE LAPP DIRECTOR	0 5 59 5	X						0	737,282	44,255
(8) KENNETH LUTCHEN DIRECTOR	0 5 0 0	X						0	0	0
(9) RICHARD MCCULLOUGH DIRECTOR	0 5 59 5	X						0	458,219	59,172
(10) HOWARD STEVENSON DIRECTOR	0 5 0 0	X						0	0	0
(11) HANSJORG WYSS DIRECTOR	0 5 0 0	X						0	0	0
(12) SRIKANT M DATAR DIRECTOR	0 5 59 5	X						0	580,468	62,007
(13) ROBERT F HIGGINS DIRECTOR	0 5 59 5	X						0	30,954	10,794
(14) MOLLY MCUSIC DIRECTOR	0 5 0 0	X						0	0	0
(15) PHILIP REILLY DIRECTOR	0 5 0 0	X						0	0	0
(16) DONALD INGBER PRESIDENT	46 0 0 0			X				0	558,168	59,341
(17) JULIE FABER CLERK	0 5 59 5			X				0	292,626	34,956

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANGELIKA FRETZEN TECHNOLOGY TRANSLATION DIR	60 0 0 0			X				0	0	0
(19) AYIS ANTONIOU TREASURER/ADMIN DIRECTOR	60 0 0 0			X				0	561,594	44,401
(20) MICHAEL SUPER LEAD SENIOR STAFF SCIENTIST	60 0 0 0					X		0	224,862	57,156
(21) WILLIAM BLAKE BUSINESS DEVELOPMENT LEAD	60 0 0 0					X		0	223,530	31,007
(22) ROBERT CUNNINGHAM PLATFORM DEVELOPMENT DIRECTOR	60 0 0 0					X		0	212,746	54,231
(23) JAMES NIEMI LEAD SENIOR STAFF ENGINEER	60 0 0 0					X		0	212,013	55,535
(24) EDWARD DOHERTY SENIOR LEAD STAFF SCIENTIST	60 0 0 0					X		0	202,154	52,560
(25) MARY TOLIKAS FORMER OPERATIONS DIRECTOR	60 0 0 0						X	0	402,491	58,774
<b>1b Sub-Total</b>								0	6,859,302	918,427
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								0	6,859,302	918,427

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
FRANK BOBE, 38 GRAND HILL DRIVE DOVER, MA 020301704	TECH CONSULTING	234,655
SEAPORT HOTEL AND WORLD TRADE CENTE, 200 SEAPORT BOULEVARD BOSTON, MA 02210	ANNUAL EVENT SERVICE	194,375
PARK SQUARE EXECUTIVE SEARCH LLC, 125 SUMMER STREET FLOOR 18 BOSTON, MA 02110	EXEC SEARCH SERVICE	161,745
ABLE ENGINEERING SERVICES, PO BOX 39000 SAN FRANCISCO, CA 94139	ENGINEERING SERVICE	149,921
ALLSOURCE PPS, PO BOX 29048 GLENDALE, CA 912099048	HUMAN RESOURCE SRVCS	133,728

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **5**

Part VIII Statement of Revenue

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

Table with 5 main columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g and 1h Total.

Table for Program Service Revenue with columns for Business Code and revenue amounts. Rows include 2a MISCELLANEOUS, 2b-2e, and 2f.

Main revenue table with 5 main columns. Rows include 3 Investment income, 4 Income from investment of tax-exempt bond proceeds, 5 Royalties, 6a-6d Rental income, 7a-7d Net gain or loss, 8a-8c Fundraising events, 9a-9c Gaming activities, 10a-10c Sales of inventory, 11a-11d Miscellaneous Revenue, and 12 Total revenue.

**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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,983,551	5,983,551		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	1,041,243	1,041,243		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	185,266	185,266		
<b>4</b> Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees	0			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
<b>7</b> Other salaries and wages	0			
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
<b>9</b> Other employee benefits	0			
<b>10</b> Payroll taxes	0			
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management	0			
<b>b</b> Legal	0			
<b>c</b> Accounting	62,000		62,000	
<b>d</b> Lobbying	0			
<b>e</b> Professional fundraising services. See Part IV, line 17	0			
<b>f</b> Investment management fees	0			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,353,878	1,072,931	280,947	
<b>12</b> Advertising and promotion	0			
<b>13</b> Office expenses	474,730	272,707	202,023	
<b>14</b> Information technology	722,679	556,036	166,643	
<b>15</b> Royalties	0			
<b>16</b> Occupancy	15,690,328	12,957,157	2,733,171	
<b>17</b> Travel	482,480	455,870	26,610	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
<b>19</b> Conferences, conventions, and meetings	586,246	577,070	9,176	
<b>20</b> Interest	14,673		14,673	
<b>21</b> Payments to affiliates	0			
<b>22</b> Depreciation, depletion, and amortization	4,642,009	4,380,250	261,759	
<b>23</b> Insurance	149,568		149,568	
<b>24</b> 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.)				
<b>a</b> PERSONNEL CHARGE BACK	36,647,337	29,763,138	6,884,199	0
<b>b</b> LAB SUPPLIES AND SERVICES	9,969,210	9,969,210	0	0
<b>c</b> PAYMENT TO RELATED ORG	3,728,648	115,552	3,613,096	0
<b>d</b> TAX AND FEES	58,166	19,627	38,539	0
<b>e</b> All other expenses	315,009	281,514	33,495	
<b>25</b> Total functional expenses. Add lines 1 through 24e	82,107,021	67,631,122	14,475,899	0
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	0	<b>1</b>	0
	<b>2</b> Savings and temporary cash investments . . . . .	0	<b>2</b>	0
	<b>3</b> Pledges and grants receivable, net . . . . .	652,947	<b>3</b>	98,278,681
	<b>4</b> Accounts receivable, net . . . . .	6,370,775	<b>4</b>	4,330,754
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use . . . . .	0	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	939,199	<b>9</b>	1,500,182
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	<b>10a</b> 49,893,892		
	<b>b</b> Less accumulated depreciation	<b>10b</b> 35,594,430	16,128,752	<b>10c</b> 14,299,462
	<b>11</b> Investments—publicly traded securities . . . . .	37,701,422	<b>11</b>	38,023,144
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .	0	<b>12</b>	0
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .	0	<b>13</b>	0
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets See Part IV, line 11 . . . . .	14,028,742	<b>15</b>	41,221,821
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	75,821,837	<b>16</b>	197,654,044	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	781,603	<b>17</b>	831,333
	<b>18</b> Grants payable . . . . .	0	<b>18</b>	0
	<b>19</b> Deferred revenue . . . . .	0	<b>19</b>	0
	<b>20</b> Tax-exempt bond liabilities . . . . .	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .	0	<b>21</b>	0
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	0
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D . . . . .	2,838,555	<b>25</b>	1,768,406
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	3,620,158	<b>26</b>	2,599,739
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	24,455,400	<b>27</b>	23,283,533
	<b>28</b> Temporarily restricted net assets . . . . .	19,746,279	<b>28</b>	143,770,772
	<b>29</b> Permanently restricted net assets	28,000,000	<b>29</b>	28,000,000
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	72,201,679	<b>33</b>	195,054,305	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	75,821,837	<b>34</b>	197,654,044	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	204,637,925
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	82,107,021
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	122,530,904
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	72,201,679
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	321,722
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	195,054,305

**Part XII Financial Statements and Reporting**

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

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

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 30-0773387

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

Form 990 (2018)

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**Form 990, Part III, Line 4a:**

RESEARCH AND TECHNOLOGY DEVELOPMENT ON BIOLOGICALLY INSPIRED ENGINEERING FOCUSED ON BIOLOGICAL CONTROL, LIVING MATERIAL, AND BIOLOGY THE INSTITUTE CONDUCTS ITS RESEARCH AND DEVELOPMENT ACTIVITIES USING FOCUS AREAS TO CREATE NEW BIOINSPIRED MATERIALS AND DEVICES, AND TO TRANSLATE THEM INTO PRODUCTS THE EIGHT FOCUS AREAS ARE ADAPTIVE MATERIAL TECHNOLOGIES, BIOINSPIRED SOFT ROBOTICS, IMMUNO-MATERIALS, LIVING CELLULAR DEVICES, BIOINSPIRED THERAPEUTICS AND DIAGNOSTICS, MOLECULAR ROBOTICS, 3D ORGAN ENGINEERING, AND SYNTHETIC BIOLOGY

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**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**

Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

**Employer identification number**

30-0773387

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

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A) PRESIDENT & FELLOWS OF HARVARD COLLEGE	042103580	2	Yes		115,552	0
<b>Total</b>	<b>1</b>				115,552	

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	35,749,473	38,926,502	48,564,818	42,367,318	199,681,251	365,289,362
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>4 Total.</b> Add lines 1 through 3	35,749,473	38,926,502	48,564,818	42,367,318	199,681,251	365,289,362
<b>5</b> 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)						123,451,592
<b>6 Public support.</b> Subtract line 5 from line 4						241,837,770

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b> Amounts from line 4	35,749,473	38,926,502	48,564,818	42,367,318	199,681,251	365,289,362
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,695,566	1,448,843	1,617,430	2,137,685	4,943,897	11,843,421
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						0
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	136,558	119,264	30,595	821	400	287,638
<b>11 Total support.</b> Add lines 7 through 10						377,420,421

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

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

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	64.077 %
<b>15</b> Public support percentage for 2017 Schedule A, Part II, line 14	<b>15</b>	95.944 %

**16a 33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**17a 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b>	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						
<b>3</b>	Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b>	<b>Total.</b> Add lines 1 through 5						
<b>7a</b>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b>	Add lines 7a and 7b						
<b>8</b>	<b>Public support.</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b>	Amounts from line 6						
<b>10a</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b>	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b>	Add lines 10a and 10b						
<b>11</b>	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b>	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b>	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b>	Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b>	Investment income percentage for <b>2018</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b>	Investment income percentage from <b>2017</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**b 33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		No
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		No
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		No
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		No
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	Yes	
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		No
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		No
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		No
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		No
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		No
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		No
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	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?		
<b>2</b>	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b>	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
		<b>1</b>	
		<b>2</b>	
		<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> )		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b>	Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>b</b>	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b>	Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b>	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>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
		<b>2a</b>	
		<b>2b</b>	
		<b>3a</b>	
		<b>3b</b>	

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	
<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
<b>2</b>	Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by .035	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C - Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b>	Enter 85% of line 1	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
<b>9</b> Distributable amount for 2018 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2018</b>	<b>(iii) Distributable Amount for 2018</b>
<b>1</b> Distributable amount for 2018 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
<b>3</b> Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013. . . . .			
<b>b</b> From 2014. . . . .			
<b>c</b> From 2015. . . . .			
<b>d</b> From 2016. . . . .			
<b>e</b> From 2017. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2018 distributable amount			
<b>i</b> Carryover from 2013 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2018 from Section D, line 7			
\$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
<b>6</b> Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
<b>7 Excess distributions carryover to 2019.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b> Excess from 2014. . . . .			
<b>b</b> Excess from 2015. . . . .			
<b>c</b> Excess from 2016. . . . .			
<b>d</b> Excess from 2017. . . . .			
<b>e</b> Excess from 2018. . . . .			

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

<b>Facts And Circumstances Test</b>
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**990 Schedule A, Supplemental Information**

Return Reference	Explanation
PART II, SECTION B, LINE 10	Wyss Institute received other income related to collaborating institution fees, conference fees and other miscellaneous income PART IV, SECTION A, LINE 6 WYSS INSTITUTE PROVIDES RESEARCH SUPPORT TO ACADEMIC AND NONPROFIT MEDICAL INSTITUTIONS IN FURTHERANCE OF ITS EXEMPT PURPOSE OF SUPPORTING PRESIDENT AND FELLOWS OF HARVARD COLLEGE

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**  
**▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**  
**▶ Attach to Form 990.**  
**▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

**Name of the organization**  
Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

**Employer identification number**  
30-0773387

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year		
<b>5</b> Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>6</b> Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

Preservation of land for public use (e g , recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year	
<b>a</b> Total number of conservation easements	<b>2a</b>	
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>	
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>	
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	<b>2d</b>	

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

**4** Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

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

**6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

**8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

**1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

**(i)** Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

**(ii)** Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

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

**a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- |  | Amount |
|--|--------|
| <b>c</b> Beginning balance             |        |
| <b>d</b> Additions during the year     |        |
| <b>e</b> Distributions during the year |        |
| <b>f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  Yes  No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . .

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	37,942,802	36,013,556	34,905,257	37,227,664	36,557,971
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses	2,284,161	3,403,672	2,674,662	-724,030	2,011,268
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	1,454,203	1,474,426	1,566,363	1,598,377	1,341,575
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	38,772,760	37,942,802	36,013,556	34,905,257	37,227,664

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
  - b** Permanent endowment ▶ 72 200 %
  - c** Temporarily restricted endowment ▶ 27 800 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- |  | Yes | No |
|--|-----|----|
| <b>(i)</b> unrelated organizations . . . . .   | No  |    |
| <b>(ii)</b> related organizations . . . . .  | Yes |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | Yes |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements	19,865,374		14,601,001	5,264,373
<b>d</b> Equipment . . . . .	30,028,518		20,993,429	9,035,089
<b>e</b> Other . . . . .				
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				14,299,462

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12 )		

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

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

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

(a) Description	(b) Book value
(1) HARV UNI CONTRIB RECEIVABLE	31,500,000
(2) DUE FROM HARVARD UNIVERSITY	9,721,821
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15 )	41,221,821

**Part X Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
DEFERRED RENT	908,583
OTHER LIABILITIES	745,584
POOLED LOANS	114,239
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 )	1,768,406

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .		<b>5</b>	

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 30-0773387

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

## Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE ENDOWMENT FUNDS IN THE HANSJORG WYSS INSTITUTE FOR BIOLOGICALLY INSPIRED ENGINEERING AT HARVARD UNIVERSITY ARE USED TO FURTHER SCIENTIFIC RESEARCH PROGRAMS AND BRING TOP INVESTIGATORS INTO A COLLABORATIVE EFFORT IN ACCORDANCE WITH ITS MISSION THE WYSS INSTITUTE ENDOWMENT PROVIDES FUNDING FOR SEVEN ENDOWED CHAIRS

**SCHEDULE F  
(Form 990)**  
  
Department of the Treasury  
Internal Revenue Service

# Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

Name of the organization  
Hansjorg Wyss Institute for Biologically  
Inspired Engineering at harvard univ inc

**Employer identification number**  
30-0773387

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

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
<b>3a</b> Sub-total					329,600
<b>b</b> Total from continuation sheets to Part I					
<b>c Totals</b> (add lines 3a and 3b)					329,600

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	RESEARCH COLLABORATION	62,378	CHECK			
		North America	RESEARCH COLLABORATION	122,888	CHECK			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . . ▶ 1



**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, don't file with Form 990)*  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)*  Yes  No

**Part V Supplemental Information**

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

**990 Schedule F, Supplemental Information**

Return Reference	Explanation
FORM 990, SCHEDULE F, PART I, LINE 2	ALL DISBURSEMENTS MADE BY WYSS INSTITUTE IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE REVIEWED AND APPROVED BY AUTHORIZED EMPLOYEES HARVARD UNIVERSITY AND WYSS INSTITUTE ARE RESPONSIBLE FOR THE PROGRAMMATIC AND FINANCIAL MONITORING OF THEIR SPONSORED RESEARCH AWARDS SUBRECIPIENTS, PRINCIPAL INVESTIGATORS, AND PROJECT STAFF PERFORM ONGOING REVIEWS OF PROJECT ACTIVITIES IN ADDITION, ON AN ANNUAL BASIS, HARVARD UNIVERSITY AND WYSS INSTITUTE'S RESEARCH ADMINISTRATORS REVIEW ALL ACTIVE SUBCONTRACTS AND INQUIRE FURTHER INTO THOSE THAT ARE DEEMED TO REQUIRE CLOSER SCRUTINY HARVARD UNIVERSITY AND WYSS INSTITUTE IMPLEMENT ADDITIONAL MONITORING ACTIONS TO ENSURE COMPLIANCE WITH SUBAGREEMENT PERFORMANCE, FINANCIAL TERMS AND CONDITIONS, AND WITH ALL APPLICABLE FEDERAL RULES AND REGULATIONS

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 30-0773387

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Send agents to seminar		97,516
Europe (Including Iceland and Greenland)			Program Services	Research collaboration	62,378

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Send agents to seminar		15,684
Sub-Saharan Africa			Send agents to seminar		12,691

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Send agents to seminar		7,571
North America			Send agents to seminar		6,983

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Grantmaking	federal subaward	122,888
Russia and the Newly Independent States			Send agents to seminar		3,317

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Send agents to seminar		572

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I  
(Form 990)**

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

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

Department of the  
Treasury  
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ **Attach to Form 990.**  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization  
Hansjorg Wyss Institute for Biologically  
Inspired Engineering at harvard univ inc

Employer identification number  
30-0773387

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

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

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 21

**3** Enter total number of other organizations listed in the line 1 table . . . . . ▶ 2

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) GRADUATE STUDENT TUITION AND STIPENDS	118	1,041,243			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
FORM 990, SCHEDULE I, PART I, LINE 2	ALL DISBURSEMENTS MADE BY WYSS INSTITUTE IN FURTHERANCE OF ITS EXEMPT PROGRAMS ARE REVIEWED AND APPROVED BY AUTHORIZED EMPLOYEES HARVARD UNIVERSITY AND WYSS INSTITUTE ARE RESPONSIBLE FOR THE PROGRAMMATIC AND FINANCIAL MONITORING OF THEIR SPONSORED RESEARCH AWARDS SUBRECIPIENTS, PRINCIPAL INVESTIGATORS, AND PROJECT STAFF PERFORM ONGOING REVIEWS OF PROJECT ACTIVITIES IN ADDITION, ON AN ANNUAL BASIS, HARVARD UNIVERSITY AND WYSS INSTITUTE'S RESEARCH ADMINISTRATORS REVIEW ALL ACTIVE SUBCONTRACTS AND INQUIRE FURTHER INTO THOSE THAT ARE DEEMED TO REQUIRE CLOSER SCRUTINY HARVARD UNIVERSITY AND WYSS INSTITUTE IMPLEMENT ADDITIONAL MONITORING ACTIONS TO ENSURE COMPLIANCE WITH SUBAGREEMENT PERFORMANCE, FINANCIAL TERMS AND CONDITIONS, AND WITH ALL APPLICABLE FEDERAL RULES AND REGULATIONS

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 30-0773387

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Beth Israel Deaconess Medical Center 330 Brookline Avenue Boston, MA 02215	04-2103881	501(c)(3)	170,945				FED SPONSORED AWARDS
Trustees of Boston University 881 Commonwealth Avenue Boston, MA 02115	04-2103547	501(c)(3)	357,007				FED SPONSORED AWARDS & RESEARCH COLLAB

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The Brigham and Women's Hospital Inc 75 Francis Street BOSTON, MA 02115	04-2312909	501(c)(3)	496,861				FED SPONSORED AWARDS & RESEARCH COLLAB
CFD Research Corporation 701 McMillian Way Huntsville, AL 35806	63-0944385		66,379				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Children's Hospital Corporation 300 Longwood Avenue Boston, MA 02115	04-2774441	501(c)(3)	1,858,125				FED SPONSORED AWARDS & RESEARCH COLLAB
Cold Spring Harbor Laboratory PO Box 100 Cold Spring Harbor, NY 11724	11-2013303	501(c)(3)	145,084				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The Trustees Of Columbia University of NY 615 West 131st Street New York, NY 10027	13-5598093	501(c)(3)	28,405				FED SPONSORED AWARDS
Cornell University 341 Pine Street Road Ithaca, NY 14850	15-0532082	501(c)(3)	54,979				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Dana-Farber Cancer Institute Inc 450 Brookline Ave BP418 Boston, MA 02215	04-2263040	501(C)(3)	604,500				FED SPONSORED AWARDS & RESEARCH COLLAB
J Craig Venter Institute 9704 Medical Center Dr Rockville, MD 20850	52-1842938	501(c)(3)	856,993				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The Massachusetts General Hospital 54 Fruit Street Boston, MA 02114	04-1564655	501(c)(3)	619,127				FED SPONSORED AWARDS & RESEARCH COLLAB
Massachusetts Institute of Technology 77 Massachusetts Ave Cambridge, MA 02139	04-2103594	501(c)(3)	175,151				FED SPONSORED AWARDS & RESEARCH COLLAB

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Massachusetts Eye and Ear Infirmary 243 Charles St Boston, MA 02114	04-2103591	501(c)(3)	30,000				Research
The Trustees of Princeton University 701 Carnegie Center Princeton, NJ 08540	21-0634501	501(c)(3)	62,660				NONFED SPONSORED

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Rehabilitation Institute of Chicago 355 East Erie St Chicago, IL 60611	36-2256036	501(c)(3)	6,896				FED SPONSORED AWARDS
Spaulding Rehabilitation Hospital 300 First Avenue Boston, MA 02129	04-2551124	501(c)(3)	17,148				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The Research Foundation for the State Univ of NY PO Box 9 Albany, NY 12201	14-1368361	501(c)(3)	101,902				FED SPONSORED AWARDS
Temple University 1805 North Broad Philadelphia, PA 19122	23-1365971	501(c)(3)	54,692				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Trustees of Tufts College 169 Holland Street Somerville, MA 02144	04-2103634	501(c)(3)	97,734				FED SPONSORED AWARDS
University of Louisville Research Fdn UOFL Controllers Off Louisville, KY 40292	61-1029626	501(c)(3)	17,516				Research

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
University of Massachusetts 333 South Street Shrewsbury, MA 01545	04-3167352	115	16,375				NONFED SPONSORED
University of Pittsburgh 116 Atwood street Pittsburgh, PA 15260	25-0965591	501(c)(3)	130,173				FED SPONSORED AWARDS

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
KNect365 US Inc (DBA-XCONOMY) PO Box 3685 Boston, MA 02241	13-3179256		6,400				Sponsorship

**Schedule J**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

## Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No 1545-0047

# 2018

**Open to Public Inspection**

Name of the organization  
Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

**Employer identification number**  
30-0773387

**Part I Questions Regarding Compensation**

		Yes	No		
<p><b>1a</b> 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</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input type="checkbox"/> Tax indemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input checked="" type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p><b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	<b>1b</b>	Yes			
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	<b>2</b>	Yes			
<p><b>3</b> 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</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee  <input checked="" type="checkbox"/> Independent compensation consultant  <input type="checkbox"/> Form 990 of other organizations                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract  <input type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p><b>4</b> 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</p> <p><b>a</b> Receive a severance payment or change-of-control payment?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	<b>4a</b>		No		
	<b>4b</b>		No		
	<b>4c</b>		No		
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p> <p><b>5</b> 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</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III</p>	<b>5a</b>		No		
	<b>5b</b>		No		
<p><b>6</b> 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</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III</p>	<b>6a</b>		No		
	<b>6b</b>		No		
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	<b>7</b>		No		
<p><b>8</b> 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</p>	<b>8</b>		No		
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	<b>9</b>				



**Part III Supplemental Information**

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

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, SCHEDULE J, PART I, LINE 1A	THE HANSJORG WYSS INSTITUTE FOR BIOLOGICALLY INSPIRED ENGINEERING AT HARVARD UNIVERSITY, INC (WYSS INSTITUTE) TRAVEL POLICY ALLOWS FOR FIRST CLASS TRAVEL FOR WYSS INSTITUTE BUSINESS PURPOSES ON AN EXCEPTION BASIS IN LIMITED CIRCUMSTANCES. IN ACCORDANCE WITH THIS POLICY, ONE OFFICER TRAVELED FIRST CLASS DURING THE YEAR. TRAVEL EXPENSES ARE INCURRED FOR WYSS INSTITUTE BUSINESS PURPOSES AND ARE NOT TREATED AS TAXABLE COMPENSATION.

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, SCHEDULE J, PART II	OFFICERS AND DIRECTORS ARE NOT COMPENSATED IN THEIR CAPACITY AS OFFICERS AND DIRECTORS THE INDIVIDUALS LISTED HERE WERE EMPLOYEES OF PRESIDENT AND FELLOWS OF HARVARD COLLEGE, AND ARE COMPENSATED BY HARVARD UNIVERSITY AS LISTED IN PART II



**Additional Data**

**Software ID:**

**Software Version:**

**EIN:** 30-0773387

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
GEORGE DALEY DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	803,650	0	20,363	34,815	141	858,969	0
FRANCIS DOYLE DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	441,172	10,000	156,490	34,815	28,769	671,246	0
ALAN GARBER DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	698,066	30,000	2,454	34,815	160,883	926,218	0
KATHERINE LAPP DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	686,370	30,000	20,912	34,815	9,440	781,537	0
RICHARD MCCULLOUGH DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	428,801	10,000	19,418	34,815	24,357	517,391	0
DONALD INGBER PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	449,378	105,749	3,041	34,815	24,526	617,509	0
JULIE FABER CLERK	(i)	0	0	0	0	0	0	0
	(ii)	262,659	11,000	18,967	34,815	141	327,582	0
AYIS ANTONIOU TREASURER/ADMIN DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	357,781	75,131	128,682	34,815	9,586	605,995	0
MICHAEL SUPER LEAD SENIOR STAFF SCIENTIST	(i)	0	0	0	0	0	0	0
	(ii)	193,986	30,600	276	29,108	28,048	282,018	0
WILLIAM BLAKE BUSINESS DEVELOPMENT LEAD	(i)	0	0	0	0	0	0	0
	(ii)	203,066	20,400	64	27,578	3,429	254,537	0
ROBERT CUNNINGHAM PLATFORM DEVELOPMENT DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	189,510	23,000	236	27,151	27,080	266,977	0
JAMES NIEMI LEAD SENIOR STAFF ENGINEER	(i)	0	0	0	0	0	0	0
	(ii)	183,427	28,500	86	27,245	28,290	267,548	0
EDWARD DOHERTY SENIOR LEAD STAFF SCIENTIST	(i)	0	0	0	0	0	0	0
	(ii)	174,392	27,540	222	25,554	27,006	254,714	0
MARY TOLIKAS FORMER OPERATIONS DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	269,346	75,131	58,014	34,815	23,959	461,265	0
SRIKANT M DATAR DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	452,087	65,000	63,381	34,815	27,192	642,475	0

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018****Open to Public Inspection**

Department of the Treasury

Name of the organization

Hansjorg Wyss Institute for Biologically Inspired Engineering at harvard univ inc

Employer identification number

30-0773387

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 1	THE HANSJORG WYSS INSTITUTE FOR BIOLOGICALLY INSPIRED ENGINEERING AT HARVARD UNIVERSITY, INC (WYSS INSTITUTE) IS ORGANIZED AND OPERATED EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES THE CORPORATION HAS BEEN FORMED AS A SUPPORTING ORGANIZATION OF PRESIDENT AND FELLOWS OF HARVARD COLLEGE (HARVARD UNIVERSITY OR HARVARD) TO CONDUCT, SUPPORT AND DEVELOP RESEARCH AND INVENTIONS IN THE LIFE SCIENCES AND ENGINEERING AND TO ENGAGE IN ANY OTHER LAWFUL ACTIVITY PERMITTED TO AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND CHAPTER 180 OF THE MASSACHUSETTS GENERAL LAWS

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART V, LINE 2A	THE WYSS INSTITUTE HAS NO EMPLOYEES THE WYSS INSTITUTE REIMBURSES HARVARD UNIVERSITY FOR HARVARD PERSONNEL ASSIGNED TO THE WYSS INSTITUTE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINE 2	ALAN GARBER IS PROVOST AND OFFICER OF HARVARD UNIVERSITY KATHERINE LAPP IS EXECUTIVE VICE PRESIDENT AND OFFICER OF HARVARD UNIVERSITY INDIVIDUALS LISTED ON PART VII WHO RECEIVED COMPENSATION FROM A RELATED ORGANIZATION ARE EMPLOYEES OF HARVARD UNIVERSITY HANSJORG WYS S AND DONALD INGBER HAVE A BUSINESS RELATIONSHIP

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, LINE 7A AND 7B	THE MEMBER OF THE WYSS INSTITUTE IS THE INDIVIDUAL SERVING FROM TIME TO TIME AS THE PROVOST OF PRESIDENT AND FELLOWS OF HARVARD COLLEGE, SERVING EX OFFICIO, UNTIL HIS OR HER SUCCESSOR HAS BEEN INSTALLED IN ADDITION TO THE RIGHT TO APPOINT SPECIFIED DIRECTORS, THE MEMBER HAS SUCH OTHER POWERS AND RIGHTS AS ARE VESTED IN THE MEMBER BY LAW, THE ARTICLES OF ORGANIZATION OR THE BYLAWS THE MEMBER SHALL HAVE SUCH OTHER POWERS AND RIGHTS AS THE DIRECTORS MAY DESIGNATE

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990 PART VI, LINE 11B	THE WYSS INSTITUTE'S TAX RETURN WAS PREPARED BY MANAGEMENT IN CONNECTION WITH AN INDEPENDENT ACCOUNTING FIRM, AND IS REVIEWED BY THE AUDIT COMMITTEE. A FINAL COPY OF FORM 990 WAS PROVIDED TO EACH VOTING MEMBER OF THE BOARD PRIOR TO FILING WITH THE IRS.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, LINES 15A AND 15B	OFFICERS AND DIRECTORS OF THE WYSS INSTITUTE ARE NOT COMPENSATED IN THEIR CAPACITY AS OFFI CERS AND DIRECTORS THE COMPENSATION OF KEY HARVARD PERSONNEL PERFORMING SERVICES ON BEHAL F OF THE WYSS INSTITUTE IS EVALUATED PERIODICALLY USING AN INDEPENDENT COMPENSATION FIRM, INCLUDING EXTERNAL COMPARABILITY MARKET DATA THE COMPENSATION COMMITTEE OF THE BOARD OF D IRECTORS REVIEWS ANNUALLY THE COMPENSATION OF SUCH PERSONNEL AND MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS FOR FINAL REVIEW AND APPROVAL

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, LINES 19	THE WYSS INSTITUTE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Hansjorg Wyss Institute for Biologically  
Inspired Engineering at harvard univ inc

**Employer identification number**

30-0773387

**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

See Additional Data Table

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

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

See Additional Data Table

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

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

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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

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

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

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

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



**Part VII**   **Supplemental Information**

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

<b>Return Reference</b>	<b>Explanation</b>

**Additional Data**

**Software ID:**

**Software Version:**

**EIN:** 30-0773387

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
PO BOX 32273 MWAI KIBAKI RD DAR ES SALAAM TZ	RESEARCH	TZ			HPF	Yes	
64 BRATTLE ST CAMBRIDGE, MA 02138 04-2665867	PERFORMING AR	MA	501(C)(3)	10	HPF	Yes	
AVENIDA PAULISTA 1337 CJ 171 SAO PAULO 01311-200 BR	EDUCATION	BR			HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 23-7014581	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
PRIVATE BAG BO 320 GABORONE BC	RESEARCH	BC			HPF	Yes	
62 RUE FRANCOIS 1 ER PARIS FR	RESEARCH SUPP	FR			HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 04-3044742	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
800 BOYLSTON ST BOSTON, MA 02199 04-3478889	RESEARCH SUPP	MA	501(C)(3)	12, TYPE I	HPF	Yes	
401 PARK DR BOSTON, MA 02215 52-2446955	EDUCATION AND	MA	501(C)(3)	12, TYPE I	HPF	Yes	
141 PORTLAND ST 9TH FL CAMBRIDGE, MA 02139 46-0807740	EDUCATION	MA	501(C)(3)	12, TYPE I	NA	Yes	
745 BOYLSTON ST 7TH FL BOSTON, MA 02116 04-2702030	RESEARCH	MA	501(C)(3)	12,TYPE III	HPF	Yes	
CARLOS PELLEGRINI 1163 PISO 12 CO BUENOS AIRES C1009ABW AR	RESEARCH SUPP	AR			HPF	Yes	
AVENIDA DAG HAMMARSKJOLD 3269 SANTIAGO CI	FACULTY AND S	CI			HPF	Yes	
HMS DEAN OF FAC OF MED BOSTON, MA 02115 04-3293162	RESEARCH SUPP	MA	501(C)(3)	12, TYPE I	HPF	Yes	
SOLDIERS FIELD RD BOSTON, MA 02163 04-3395140	EXECUTIVE EDU	MA	501(C)(3)	12, TYPE I	HPF	Yes	
20 GUEST STREET STE 700 BRIGHTON, MA 02135 04-3177990	PUBLISHING	MA	501(C)(3)	12, TYPE I	HPF	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 03-0425512	ELECTRICITY P	MA	501(C)(3)	12, TYPE I	HPF	Yes	
114 MOUNT AUBURN ST 5TH FL CAMBRIDGE, MA 02138 45-4535664	GLOBAL SUPPOR	MA	501(C)(3)	12, TYPE I	HPF	Yes	
3EME ETAGE IMMEUBLE SLIM BLOCK 1 TUNIS 1053 TS	RESEARCH	TS			HGRSS	Yes	
9SE 9TH FL 29 SENAPATI BAPAT MA MUMBAI, MAHARASHTRA 400028 IN	RESEARCH	IN			HGRSS	Yes	

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
33 YAVETZ STREET TELAVIV 6525832 IS	RESEARCH	IS			HGRSS	Yes	
22 BREE ST CAPE TOWN 8000 SF	RESEARCH	SF			HGRSS	Yes	
VERNON HOUSE 22 SICILIAN AVE LONDON WC1A-2QS UK	RESEARCH	UK			HGRSS	Yes	
7 WARE ST CAMBRIDGE, MA 02138 04-6112308	PUBLISHING	MA	501(C)(3)	12,TYPE III	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 23-7361259	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 04-3070522	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
25 SHATTUCK ST BOSTON, MA 02115 04-2213292	MEDICAL EDUCA	MA	501(C)(3)	12, TYPE I	NA	Yes	
25 SHATTUCK ST BOSTON, MA 02115 31-1745145	RESEARCH SUPP	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 04-3070519	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 22-3138409	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 04-3373410	TITLE HOLDING	MA	501(C)(25)		HPF	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 04-2649303	REAL ESTATE B	MA	501(C)(3)	12, TYPE I	HPF	Yes	
VANSERG HALL 25 FRANCIS AVE CAMBRIDGE, MA 02138 04-2062394	EDUCATION	MA	501(C)(3)	12, TYPE I	NA	Yes	
1350 MASS AVE CAMBRIDGE, MA 02138 22-3032677	RESEARCH	MA	501(C)(3)	12, TYPE I	HPF	Yes	
160 LONGWOOD AVE BOSTON, MA 02115 04-3476764	ENERGY SERVIC	MA	501(C)(3)	12, TYPE I	NA	Yes	
100 BIGELOW ST HOLYOKE, MA 01040 27-3014805	RESEARCH	MA	501(C)(3)	12, TYPE I	NA	Yes	
100 BIGELOW ST HOLYOKE, MA 01040 45-2257442	RESEARCH	MA	501(C)(3)	12, TYPE I	NA	Yes	
600 ATLANTIC AVENUE BOSTON, MA 02210 04-2997367	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 04-2103580	EDUCATION AND	MA	501(C)(3)	2	NA		No
MURR CTR 65 NORTH HARVARD ST BOSTON, MA 02163 51-0189788	ATHLETICS	CT	501(C)(3)	12, TYPE I	HPF	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
600 ATLANTIC AVENUE BOSTON, MA 02210 04-3263656	INVESTMENT MA	MA	501(C)(3)	12, TYPE I	HPF	Yes	
SOLDIERS FIELD RD BOSTON, MA 02163 57-1152691	STUDENT SUPPO	MA	501(C)(3)	12, TYPE I	HPF	Yes	
330 BROOKLINE AVE BOSTON, MA 02215 04-3326928	MEDICAL EDUCA	MA	501(C)(3)	12, TYPE I	NA	Yes	
701 CARNEGIE CENTER SUITE 445 PRINCETON, NJ 08540 22-3751732	LIBRARY DEPOS	NJ	501(C)(3)	12, TYPE I	NA	Yes	
1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 53-0199180	EDUCATION	DC	501(C)(3)	12, TYPE II	HPF	Yes	















**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) 365 Church Street Limited Partnership 4711 Yonge Street Suite 1400 Toronto M2N 7E4 CA	Investments	CA	NA	C Corporation				Yes	
(1) Adelaide-Peter Developments 4711 Yonge Street Suite 1400 Toronto M2N 7E4 CA 98-0684328	Investments	CA	NA	C Corporation				Yes	
(2) Agricola Brinzal Limitada Avenida Santa Maria 6350 Piso 3 Vitacura CI	Investments	CI	NA	C Corporation				Yes	
(3) Agricola Duramen Limitada Avenida Santa Maria 6350 Piso 3 Vitacura CI	Investments	CI	NA	C Corporation				Yes	
(4) Agricola E Inversiones Pampa Alegre SA Avenida Santa Maria 6350 Piso 3 Vitacura CI	Investments	CI	NA	C Corporation				Yes	
(5) Agricola El Cardonal Limitada Lo Fontecilla No 2014 Suite 834 Las Condes CI 98-1204153	Investments	CI	NA	C Corporation				Yes	
(6) Agricola Fundo Bucalemu Limitada Del Inca 4446 Office 1007 Las Condes CI 98-0639220	Investments	CI	NA	C Corporation				Yes	
(7) Agricola Los Rios SpA Avenida Santa Maria 6350 Oficina 3 Vitacura CI 98-1209592	Investments	CI	NA	C Corporation				Yes	
(8) Agricola Rapel Limitada Ave Isidora Goyenechea No 2939 1 Las Condes CI 98-0639218	Investments	CI	NA	C Corporation				Yes	
(9) Agricola Retiro Limitada Del Inca 4446 Office 1007 Las Condes CI	Investments	CI	NA	C Corporation				Yes	
(10) Agricola Ribera Limitada Del Inca 4446 Office 1007 Las Condes CI	Investments	CI	NA	C Corporation				Yes	
(11) Agroflorestal Verde Sul SA Rodovia RS-473 km 22 Rincao so Sa District Matarazzo Pedro Osorio 96360-000 BR	Investments	BR	NA	C Corporation				Yes	
(12) Aquila Inc c/o Walkers SPV Ltd PO Box 908GT George Town CJ 98-0532782	Investments	CJ	NA	C Corporation				Yes	
(13) AR II REIT Inc 11990 San Vicente BoulevardSuite 20 Los Angeles, CA 90049 82-1624121	Investments	DE	NA	C Corporation				Yes	
(14) AR Legacy REIT Inc 11990 San Vicente BoulevardSuite 20 Los Angeles, CA 90049 81-5332102	Investments	DE	NA	C Corporation				Yes	

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(16) Ara Inc c/o Walkers SPV Ltd PO Box 908GT George Town CJ 98-0543813	Investments	CJ	NA	C Corporation				Yes	
(1) ASH R One LLC 230 Park Avenue 12th Floor New York, NY 10169 30-0949766	Investments	DE	NA	C Corporation				Yes	
(2) Asia Alpha Secretaries Limited Commence Chambers PO Box 2208 Roa Tortola VI	Investments	VI	NA	C Corporation				Yes	
(3) Asia Landmark Special Fund Ltd c/o Ogier Fiduciary Services Cayma Camana Bay KY1-9007 CJ	Investments	CJ	NA	C Corporation				Yes	
(4) Atlantic Avenue Realty Ltd C/O Maples Calder Corp Services George Town CJ 98-0533323	Investments	CJ	NA	C Corporation				Yes	
(5) Atlantic Bridge REIT Inc C/O Bain Capital Real Estate LP200 Boston, MA 02116 81-0810982	Investments	DE	NA	C Corporation				Yes	
(6) Atlantic Cayman Limited C/O Maples and Calder PO Box 309 George Town KY1-1104 CJ 98-1219940	Investments	CJ	NA	C Corporation				Yes	
(7) Atlantic DV Holdings Ltd C/O Maples and Calder PO Box 309 George Town KY1-1104 CJ 98-1196247	Investments	CJ	NA	C Corporation				Yes	
(8) Atlantic Europe Investments GP Limited C/O Burness LLP 50 Lothian RoadFes Edinburgh EH39WJ UK	Investments	UK	NA	C Corporation				Yes	
(9) Atlantic Europe Investments LP C/O Burness LLP 50 Lothian RoadFes Edinburgh EH39WJ UK 98-0670648	Investments	UK	NA	C Corporation				Yes	
(10) Atlantic FM Ltd C/O Maples and Calder PO Box 309 George Town KY1-1104 CJ 98-1249059	Investments	CJ	NA	C Corporation				Yes	
(11) Atlantic King Blocker Limited IFS Court Bank St Twenty-Eight Ebene 72201 MP 98-1461264	Investments	MP	NA	C Corporation				Yes	
(12) Atlantic NBS Limited C/O Crestbridge Corp Services Ltd St Helier JE1 0BD JE 98-1220176	Investments	JE	NA	C Corporation				Yes	
(13) Atlantic NREP II Ltd C/O Maples and Calder Services Ltd George Town KY1-1104 CJ 98-1273705	Investments	CJ	NA	C Corporation				Yes	
(14) Atlantic P3 Program REIT Inc 4380 LaJolla Village DriveSuite 230 San Diego, CA 92122 47-2704934	Investments	DE	NA	C Corporation				Yes	

**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(31) Atlantic P3 TRS LLC 4380 LaJolla Village Drive Suite 230 San Diego, CA 92122 81-1202899	Investments	DE	NA	C Corporation				Yes	
(1) Atlantic Regent REIT Inc 11990 San Vicente Boulevard Suite 20 Los Angeles, CA 90049 32-0464661	Investments	DE	NA	C Corporation				Yes	
(2) Atlantic Self Storage II REIT LLC C/O Bain Capital Real Estate LP200 Boston, MA 02116 83-1037881	Investments	DE	NA	C Corporation				Yes	
(3) Atlantic Southeast Industrial II REIT L C/O Bain Capital Real Estate LP200 Boston, MA 02116 83-1037950	Investments	DE	NA	C Corporation				Yes	
(4) Atlantic Toronto 365 Church Street Gener 355 Burrard Street Ste 1900 Vancouver V6C 2G8 CA	Investments	CA	NA	C Corporation				Yes	
(5) Atlantic Toronto A-P General Partner Inc 355 Burrard Street Ste 1900 Vancouver V6C 2G8 CA 98-0668180	Investments	CA	NA	C Corporation				Yes	
(6) Atlantic Toronto Grenville General Partn 355 Burrard Street Ste 1900 Vancouver V6C 2G8 CA	Investments	CA	NA	C Corporation				Yes	
(7) Atlantic Toronto Holdings Inc 355 Burrard Street Ste 1900 Vancouver V6C 2G8 CA 98-0668178	Investments	CA	NA	C Corporation				Yes	
(8) Atlantic Urban Retail Inc C/O Bain Capital Real Estate LP200 Boston, MA 02116 32-6261983	Investments	DE	NA	C Corporation				Yes	
(9) Atlantic WLS II REIT LLC C/O Bain Capital Real Estate LP200 Boston, MA 02116 83-1037881	Investments	DE	NA	C Corporation				Yes	
(10) Bain Capital Special Situations Europe (Ugland House South Church St PO Grand Cayman KY1-1104 CJ 98-1422541	Investments	CJ	NA	C Corporation				Yes	
(11) BainBridge CC Urbana Apartments REIT In 12765 West Forest Hill Blvd Suite 13 Wellington, FL 33414 47-1171921	Investments	DE	NA	C Corporation				Yes	
(12) BCC Cambridge (Cayman GP Loans) LP Maples Corp Services Ltd PO Box 30 Grand Cayman KY1-1104 CJ 98-1495663	Investments	CJ	NA	C Corporation				Yes	
(13) BCC Cambridge (Cayman GP Revolvers) LP Maples Corp Services Ltd PO Box 30 Grand Cayman KY1-1104 CJ 98-1495639	Investments	CJ	NA	C Corporation				Yes	
(14) BCC Cambridge (GP Loans) SARL 6D Route De Treves Senningerberg L-2633 LU 98-1422127	Investments	LU	NA	C Corporation				Yes	

**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(46) BCC Cambridge (GP Revolvers) SARL 6D Route De Treves Senningerberg L-2633 LU 98-1422143	Investments	LU	NA	C Corporation				Yes	
(1) Black Kite Pty Ltd C/O DLA Philips Fox Level 38 201 Sydney NSW 2000 AS	Investments	AS	NA	C Corporation				Yes	
(2) Black Kite Trust C/O DLA Philips Fox Level 38 201 Sydney NSW 2000 AS 98-6063158	Investments	AS	NA	C Corporation				Yes	
(3) BLC Fund B LP PO Box 309 Ugland House George Town KY1-1104 CJ 98-1251361	Investments	CJ	NA	C Corporation				Yes	
(4) BLC II Fund B LP PO Box 309 Ugland House Grand Cayman KY1-1104 CJ 98-1386349	Investments	CJ	NA	C Corporation				Yes	
(5) Blue Atlantic Investors II Inc 353 North Clark Street Suite 730 Chicago, IL 60654 46-1452116	Investments	DE	NA	C Corporation				Yes	
(6) Blue Atlantic Investors Inc 353 North Clark Street Suite 730 Chicago, IL 60654 45-1022813	Investments	MD	NA	C Corporation				Yes	
(7) Blue Atlantic Shuttle II LLC 353 North Clark Street Suite 730 Chicago, IL 60654 36-4851337	Investments	DE	NA	C Corporation				Yes	
(8) Bramshill Tactical Fixed Income Fund Ltd Cayman Corp Centre 27 Hospital Roa Grand Cayman KY1-9008 CJ	Investments	CJ	NA	Trust				Yes	
(9) Brodiaea Inc 444 Higuera Street Suite 202 San Luis Obispo, CA 93401 90-0862085	Investments	DE	NA	Trust				Yes	
(10) Cambridge Square Institutional Fund LP Elian Fiduciary Services Cayman L Grand Cayman KY1-9007 CJ 98-1370452	Investments	CJ	NA	C Corporation				Yes	
(11) Cantuta Ltd c/o Maples Corporate Services Ltd KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(12) Caracara Ltd C/O Maples and Calder PO Box 309 Grand Cayman KY1-1104 CJ 98-1098610	Investments	CJ	NA	C Corporation				Yes	
(13) Caracol Agropecuaria Ltda Av Carlos Gomes 1200 Sala 502 Au Centro Rio Grande do Sul CEP 90480 BR 98-0642730	Investments	BR	NA	C Corporation				Yes	
(14) CC VII Holdings LLC IFS Court Bank Street Twenty Eigh Ebene 72201 MP 98-1261217	Investments	MP	NA	C Corporation				Yes	

**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(61) CENTRO HARVARD DAVID ROCKEFELLER PARA ES EDIF BLMORI ORIZABA 101-102 COL MEXICO CITY DF MX	FACULTY AND STUDE	MX	NA	C Corporation				Yes	
(1) CHARITABLE LEAD TRUSTS (44)	CHARITABLE TRUST	MA	NA	C Corporation				Yes	
(2) CHARITABLE REMAINDER TRUSTS (792)	CHARITABLE TRUST	MA	NA	C Corporation				Yes	
(3) Cheval SP Participacoes Ltda Rua do Forum S/N Sala A Centro CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(4) Clag (Chile) SpA Lo Fontecilla 201 Office 834 Las Condes CI 98-0650099	Investments	CI	NA	C Corporation				Yes	
(5) Composition Capital Europe Fund CV Strawinskylaan 1749 World Trade Ce Amsterdam 1077 XX NL 98-0459793	Investments	NL	NA	C Corporation				Yes	
(6) Composition Capital Europe II Feeder CV Strawinskylaan 1749 World Trade Ce Amsterdam 1077 XX NL 98-0569903	Investments	NL	NA	C Corporation				Yes	
(7) Composition Feeder GmbH Borsenstrasse 2-4 Frankfurt am Main 60313 GM	Investments	GM	NA	C Corporation				Yes	
(8) Copayapu SpA 2939 Avenida Isidora Goyenechea 11 Las Condes CI 98-1112517	Investments	CI	NA	C Corporation				Yes	
(9) Coral Living V REIT LLC C/O Bain Capital Real Estate LP200 Boston, MA 02116 82-5178416	Investments	DE	NA	C Corporation				Yes	
(10) CSH Program REIT II Inc 1275 Pennsylvania Avenue North West Washington, DC 20004 30-0783361	Investments	DE	NA	C Corporation				Yes	
(11) CSH Program REIT III Inc 1275 Pennsylvania Avenue North West Washington, DC 20004 47-0981643	Investments	DE	NA	C Corporation				Yes	
(12) CSH Program REIT IV Inc 1275 Pennsylvania Avenue North West Washington, DC 20004 81-4646057	Investments	DE	NA	C Corporation				Yes	
(13) CSH TRS Holding III LLC 1275 Pennsylvania Avenue North West Washington, DC 20004 32-0410113	Investments	DE	NA	C Corporation				Yes	
(14) CSH TRS Holding IV LLC 1275 Pennsylvania Avenue North West Washington, DC 20004 35-2508708	Investments	DE	NA	C Corporation				Yes	

**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

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								Yes	No
(76) CSH TRS Holding V LLC 1275 Pennsylvania Avenue North West Washington, DC 20004 81-5203398	Investments	DE	NA	C Corporation				Yes	
(1) Dairy Farms Partnership 113 Rutherford Rd Pukekohe E POB Pukekohe NZ 98-0594944	Investments	NZ	NA	C Corporation				Yes	
(2) DG Participants Ltd c/o Maples Corp Svcs PO Box 30 George Town KY1-1104 CJ 98-1167777	Investments	CJ	NA	C Corporation				Yes	
(3) EAE Atlantic II Inc C/O AE Real Estate Holdings LLC106 New York, NY 10018 80-0954229	Investments	DE	NA	C Corporation				Yes	
(4) EAE Atlantic III Inc C/O AE Real Estate Holdings LLC106 New York, NY 10018 30-0835462	Investments	DE	NA	C Corporation				Yes	
(5) EAE Atlantic IV Inc C/O AE Real Estate Holdings LLC106 New York, NY 10018 36-4797540	Investments	DE	NA	C Corporation				Yes	
(6) EAE Atlantic TRS LLC C/O AE Real Estate Holdings LLC106 New York, NY 10018 38-3978612	Investments	DE	NA	C Corporation				Yes	
(7) Eastern Rosella Trust Level 25 20 Bond Street Sydney NSW 2000 AS 98-1131698	Investments	AS	NA	C Corporation				Yes	
(8) Eco Cebaco SA Calle 52 Y Elvira Mendez PO Box 08 PM	Investments	PM	NA	C Corporation				Yes	
(9) Ecuador Timber LP Maples Corporate Services Ltd PO B Grand Cayman KY1-1104 CJ 98-0458318	Investments	CJ	NA	C Corporation				Yes	
(10) El Maria SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(11) Emerald Catastrophe Fund Ltd c/o Nephila Capital Ltd Victoria P Hamilton HM 10 BD 98-1194784	Investments	BD	NA	C Corporation				Yes	
(12) Empresa Ecologica Del Orinoco SAS Cra 9 No 77 - 67 Ofc 804 Bogota CO	Investments	CO	NA	C Corporation				Yes	
(13) Empresas Verdes Argentina SA Suipacha 1111 18th Floor Ciudad A C1008 AR	Investments	AR	NA	C Corporation				Yes	
(14) Estancia Celina SA Suipacha 1111 Piso 18 Buenos Aires C1008AAW AR	Investments	AR	NA	C Corporation				Yes	

**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

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								Yes	No
(91) Evolution Credit Partners I (Cayman) L 125 High Street High Street Tower2 Boston, MA 02210 98-1418348	Investments	CJ	NA	Trust				Yes	
(1) Evolution Credit Partners I SLP LLC C/O CO Services Cayman Ltd PO Box Grand Cayman KY1-1001 CJ 98-1427934	Investments	CJ	NA	C Corporation				Yes	
(2) Exportadora Clag Chile SpA Del Inca 4446 Office 1007 Las Condes CI	Investments	CI	NA	C Corporation				Yes	
(3) Flamenco SpA 2939 Avenida Isidora Goyenechea 11 Las Condes CI 98-1120387	Investments	CI	NA	C Corporation				Yes	
(4) Florestas do Sul Agroflorestal Ltda Av Carlos Gomes 1200 Sala 502 Au Centro 90480-001 BR 98-0493906	Investments	BR	NA	C Corporation				Yes	
(5) Forestal Bosquepalm Cia Ltda Avenida Patria E4-69 y Amazonas Ed Quito EC	Investments	EC	NA	C Corporation				Yes	
(6) Forestal Foresvergal Cia Ltda Avenida Patria E4-69 y Amazonas Ed Quito EC	Investments	EC	NA	C Corporation				Yes	
(7) Fortaleza Agroindustrial Ltda Fazenda Fortaleza s/n - Zona Rural Santa Filomena CEP 64945 BR	Investments	BR	NA	C Corporation				Yes	
(8) Francolin PO Box 309 Ugland House KY1-1104 CJ 98-1006384	Investments	CJ	NA	C Corporation				Yes	
(9) FRIENDS OF HARVARD HONG KONG TRUST 114 MOUNT AUBURN ST 5TH FL CAMBRIDGE, MA 02138 47-7237666	TRUST FOR CONTRIB	HK	NA	C Corporation				Yes	
(10) FSP-Marlboro Lessee LLC 178 South Main Street Suite 375 Alparetta, GA 30009 38-3976284	Investments	DE	NA	C Corporation				Yes	
(11) Galileia Agroindustrial Ltda Fazenda Galileia s/n - Zona Rural- Grande Do Ribeiro BR	Investments	BR	NA	C Corporation				Yes	
(12) Gateway Real Estate Fund III - TE LP Cricket Square Hutchins Drive PO Grand Cayman KY1-1111 CJ 98-0669480	Investments	CJ	NA	C Corporation				Yes	
(13) Gavea Investment Fund II B LP PO Box 309 George Town KY1-1104 CJ 98-0537951	Investments	CJ	NA	C Corporation				Yes	
(14) Gavea Jus Brazilian Government Liability PO Box 309 Ugland House George Town KY1-1104 CJ 98-0702067	Investments	CJ	NA	C Corporation				Yes	

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(106) GAXL (HMPEC) Ltd c/o Clarendon House 2 Church Stree Hamilton HM 11 BD 98-1309328	Investments	BD	NA	C Corporation				Yes	
(1) GBE Development I Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(2) GBE Development II Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(3) GBE Development III Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(4) GBE Development IV Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(5) GBE Development V Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(6) GBE Development VI Ltd Ugland House South Church Street George Town KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(7) GBE Fazendas Ltda Av das Americas 700 Bl 5 Salas Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(8) GBE Holdings Ltd Maples Corporate Services Ltd PO B George Town KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(9) GBE Investments Limited Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(10) GBE Participacoes Imobiliarias Ltda Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	
(11) GBE Projetos Agricolas II Ltda Av das Americas 700 Bl 5 Salas Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(12) GBE Properties I Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(13) GBE Properties II Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(14) GBE Properties III Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	

**Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust**

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								Yes	No
(121) GBE Properties IV Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(1) GBE Properties V Ltd Maples Corporate Services Ltd PO B George Town CJ	Investments	CJ	NA	C Corporation				Yes	
(2) GBE Properties VI Ltd Ugland House South Church Street George Town KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(3) GBE Properties VII Ltd Suite 3212 53 Market Street Caman Grand Cayman KY1-1203 CJ	Investments	CJ	NA	C Corporation				Yes	
(4) GBE Propriedades e Empreendimentos Imobi Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(5) GBE Propriedades e Empreendimentos Imobi Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(6) GBE Propriedades e Empreendimentos Imobi Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	
(7) GBE Propriedades e Empreendimentos Imobi Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(8) GBE Propriedades e Empreendimentos Imobi Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(9) GBE Propriedades e Empreendimentos Imobi Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(10) GBE Propriedades Holdings Bahia Ltda Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	
(11) GBE Propriedades Holdings Guadalupe Ltda Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	
(12) GBE Propriedades Holdings Maranhao Ltda Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	
(13) GBE Propriedades Holdings Tocantins Ltda Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	
(14) GBE Propriedades Participacoes Piaui Ltd Avenue of Americas No 700 Office CEP 22640-100 BR	Investments	BR	NA	C Corporation				Yes	

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(136) Gerrity Atlantic Retail Partners Inc 973 Lomas Santa Fe Drive Solana Beach, CA 92075 27-4802513	Investments	DE	NA	C Corporation				Yes	
(1) Gerrity Retail Fund 2 Inc 973 Lomas Santa Fe Drive Solana Beach, CA 92075 46-4417545	Investments	DE	NA	C Corporation				Yes	
(2) Granary Normandien (Proprietary) Limited 18 Fricker Road Illovo Johannesburg 2196 SF 98-0610461	Investments	SF	NA	C Corporation				Yes	
(3) Green Rosella Trust Level 25 20 Bond Street Sydney NSW 2000 AS 98-1126908	Investments	AS	NA	C Corporation				Yes	
(4) Greengold Agrirrom SRL 24 Constantin Noica Street Room 2 Sibiu RO 98-1091760	Investments	RO	NA	C Corporation				Yes	
(5) Greengold European Capital SA 15 Boulevard F W Raffaisen L-2411 LU	Investments	LU	NA	C Corporation				Yes	
(6) Greengold Future Trees SRL 14 Bihorului Street Block 21 Apt Sibiu RO 98-1206286	Investments	RO	NA	C Corporation				Yes	
(7) GreenGold Value Forests Lithuania UAB Jogailos G9 Vilnius LT-01116 LH 98-1117259	Investments	LH	NA	C Corporation				Yes	
(8) Guanare AARL Mones Roses 6937 Montevideo 11000 UY 98-0641951	Investments	UY	NA	C Corporation				Yes	
(9) Guanare SA Juncal 1327 Floor 22 Montevideo 11000 UY	Investments	UY	NA	C Corporation				Yes	
(10) Harbour Offshore Fund IV LP PO Box 309 Ugland House Grand Cayman KY1-1104 CJ 98-1414548	Investments	CJ	NA	C Corporation				Yes	
(11) HARVARD ARASTIRMA VE EGITIM MERKEZI ISTA KORU SOKAK ZORLU CTR APT 2/D INSTANBUL 34340 TU	RESEARCH SUPPORT/	TU	NA	C Corporation				Yes	
(12) HARVARD BUSINESS SCHOOL PUBLISHING ASIA 80 RAFFLES PL 25-01 UOB PLAZA SN	SALES SUPPORT	SN	NA	C Corporation				Yes	
(13) HARVARD BUSINESS SCHOOL PUBLISHING AUSTR C/O PWC ONE INTERNATIONAL TOWERS WATERMANS QUAY NSW 2000 AS	SALES SUPPORT	AS	NA	C Corporation				Yes	
(14) HARVARD BUSINESS SCHOOL PUBLISHING DE ME BOSQUE DE CIRUELOS 180 PP101 BOSQUES DE LAS LOMAS DEL MIGUEL HI MX	SALES SUPPORT	MX	NA	C Corporation				Yes	

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								Yes	No
(151) HARVARD BUSINESS SCHOOL PUBLISHING EUROP 23 SICILIAN AVE London UK	SALES SUPPORT	UK	NA	C Corporation				Yes	
(1) HARVARD BUSINESS SCHOOL PUBLISHING FRANC 23 RUE DU ROULE PARIS FR	SALES SUPPORT	FR	NA	C Corporation				Yes	
(2) HARVARD BUSINESS SCHOOL PUBLISHING INDIA PIRAMAL TOWER 7TH FL PENINSULA C MUMBAI 400013 IN	PUBLISHING SUPPOR	IN	NA	C Corporation				Yes	
(3) HARVARD CENTER SHANGHAI CO LTD 5TH FL INTL FIN CTR 8 CENT AVE SHANGHAI 200120 CH	RESEARCH SUPPORT/	CH	NA	C Corporation				Yes	
(4) Harvard Private Capital Properties II I 600 Atlantic Avenue Boston, MA 02210 04-3140558	Investments	DE	NA	C Corporation				Yes	
(5) Harvard Private Capital Properties III 600 Atlantic Avenue Boston, MA 02210 76-0254935	Investments	DE	NA	C Corporation				Yes	
(6) HARVARD UNIVERSITY PRESS OF NEW YORK HU PRESS 79 GARDEN ST CAMBRIDGE, MA 02138 13-3784301	PUBLISHING	NY	NA	C Corporation				Yes	
(7) HARVARD UNIVERSITY PRESS LTD VERNON HOUSE 23 SICILIAN AVE London UK	BOOK DISTRIBUTION	UK	NA	C Corporation				Yes	
(8) HB Cayman Limited PO Box 309 GT BWI CJ CJ	Investments	CJ	NA	C Corporation				Yes	
(9) HG GULF FZ LLC MAKTOUM ACADMED CTR 2 FL DUBAI AE	EDUCATION AND RES	AE	NA	C Corporation				Yes	
(10) HIP Bermuda Reinsurance I Limited 141 Front Street 3rd Floor Hamilton HM11 BD	Investments	BD	NA	C Corporation				Yes	
(11) HITE MLP Advantage Caymans Ltd Cayman Corp Centre 27 Hospital Roa Grand Cayman KY1-9008 CJ	Investments	CJ	NA	C Corporation				Yes	
(12) HMC Beefeater Inc 1209 Orange Street Wilmington, DE 19801 82-0888543	Investments	DE	NA	C Corporation				Yes	
(13) HMC Juweel Investors LP Maples Corporate Services Ltd PO B George Town KY1-1104 CJ 98-1196788	Investments	CJ	NA	C Corporation				Yes	
(14) Hound Partners Long Fund Ltd Elian Fiduciary Services Cayman L Grand Cayman KY1-9007 CJ	Investments	CJ	NA	C Corporation				Yes	

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								Yes	No
(166) Huequi SpA c/o Aninat Schwencke Cia Av Lo CI	Investments	CI	NA	C Corporation				Yes	
(1) Hunter Patton Ltd c/o Maples Corp Svcs PO Box 30 George Town KY1-1104 CJ 98-1395917	Investments	CJ	NA	C Corporation				Yes	
(2) HZ Co-Investments Limited PO Box 309 Ugland House Grand Cayman KY1-1104 CJ 98-1465106	Investments	CJ	NA	C Corporation				Yes	
(3) Ichu Ltd c/o Maples Corporate Services Ltd KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(4) ILS Property & Casualty Feeder Fund II C/O Credit Suisse Asset Mgmt LLC On New York, NY 100103629	Investments	CJ	NA	C Corporation				Yes	
(5) Insolo Agroindustrial SA Av Dr Cardoso De Melo 1340-11 Andar Sao Paulo CJ 111 BR	Investments	BR	NA	C Corporation				Yes	
(6) Inversiones Catedral SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(7) Inversiones Hefei SAC Av Pardo Y Aliaga 695 Dpto 11 Urb San Isidoro PE 98-1111292	Investments	PE	NA	C Corporation				Yes	
(8) Inversiones Lefkada SAC Av Pardo Y Aliaga 695 Dpto 11 Urb San Isidoro PE 98-1110859	Investments	PE	NA	C Corporation				Yes	
(9) Inversiones Mosqueta SAC Av Pardo Y Aliaga 695 Dpto 11 Urb San Isidoro PE 98-1110734	Investments	PE	NA	C Corporation				Yes	
(10) Inversiones Pirona SAC Av Pardo Y Aliaga 695 Dpto 11 Urb San Isidoro PE 98-1111636	Investments	PE	NA	C Corporation				Yes	
(11) Inversiones Santa Rita SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(12) Inversiones Tres Cumbres Ltda Roger de Flor 2736 dp 8 Comuna Las Condes CI 98-0446986	Investments	CI	NA	C Corporation				Yes	
(13) IPE Agroindustrial Ltda Fazenda IPE s/n - Zona Rural-Baixa Grande Do Ribeiro BR	Investments	BR	NA	C Corporation				Yes	
(14) Jade Retail Inc PO Box 309 Ugland House KY1-1104 CJ 98-1401548	Investments	CJ	NA	C Corporation				Yes	

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								Yes	No
(181) Jus BG I - Feeder LP PO Box 309 Ugland House George Town KY1-1104 CJ 98-1018586	Investments	CJ	NA	C Corporation				Yes	
(1) La Jacaranda SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(2) La Mora SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(3) La Zarza SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(4) Las Acacias SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(5) Las Misiones SA Suipacha 1111 Piso 18 Buenos Aires C1008AAW AR	Investments	AR	NA	C Corporation				Yes	
(6) LaSalle Asia Opportunity Cayman I Ltd Walker House 87 Mary Street George Town CJ 98-0447511	Investments	CJ	NA	C Corporation				Yes	
(7) Lifetime Centrecourt Grenville Limited P 22 St Clair Avenue East Suite 101 Toronto M4T 2S3 CA 98-0684331	Investments	CA	NA	C Corporation				Yes	
(8) Lindene Ltd Maples Corporate Services Ltd PO B George Town KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(9) Longfellow Atlantic REIT II Inc 260 Franklin Street Suite 1520 Boston, MA 02110 81-2156530	Investments	DE	NA	C Corporation				Yes	
(10) Longfellow Atlantic REIT Inc 260 Franklin Street Suite 1520 Boston, MA 02110 46-4628691	Investments	DE	NA	C Corporation				Yes	
(11) Longfellow Atlantic TRS LLC 260 Franklin Street Suite 1520 Boston, MA 02110 37-1791658	Investments	DE	NA	C Corporation				Yes	
(12) Longstocking Investment Corporation 600 Atlantic Avenue Boston, MA 02210 52-2116455	Investments	MA	NA	C Corporation				Yes	
(13) Longterm Forest Partners Cia Ltda Avenida Patria E4-69 y Amazonas Ed Quito EC	Investments	EC	NA	C Corporation				Yes	
(14) Los Arrayanes SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	

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								Yes	No
(196) Los Laureles SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(1) Luxco Lending Fund II Sarl 6D Route De Treves Senningerberg L-2633 LU	Investments	LU	NA	C Corporation				Yes	
(2) LuxCo Lending Fund SARL 6D Route De Treves Senningerberg L-2633 LU 98-1422156	Investments	LU	NA	C Corporation				Yes	
(3) Maguari Ltd C/O Maples and Calder PO Box 309 Grand Cayman KY1-1104 CJ 98-1097957	Investments	CJ	NA	C Corporation				Yes	
(4) Masdevallia Ltd C/O Maples and Calder PO Box 309 Grand Cayman KY1-1104 CJ 98-1083311	Investments	CJ	NA	C Corporation				Yes	
(5) MCRB Real Estate Investment Trust Inc 1503 LBJ Freeway Suite 300 Dallas, TX 75234 46-1195422	Investments	DE	NA	C Corporation				Yes	
(6) MCRB Tenant Holdco LLC 1503 LBJ Freeway Suite 300 Dallas, TX 75234 46-1195591	Investments	DE	NA	C Corporation				Yes	
(7) MDH Atlantic Development REIT II Inc 3715 Northside Parkway NWBuilding 4 Atlanta, GA 30327 82-2117419	Investments	DE	NA	C Corporation				Yes	
(8) MDH Atlantic REIT II Inc 3715 Northside Parkway NWBuilding 4 Atlanta, GA 30327 82-1589729	Investments	DE	NA	C Corporation				Yes	
(9) MDH Atlantic REIT Inc 3715 Northside Parkway NWBuilding 4 Atlanta, GA 30327 46-5247314	Investments	DE	NA	C Corporation				Yes	
(10) Mirabilis SA Calle Las begonias No 475 Dpto 7 San Isidoro PE	Investments	PE	NA	C Corporation				Yes	
(11) Nazare Agroindustrial Ltda Fazenda Nazare s/n - Zona Rural-Sa Filomena BR	Investments	BR	NA	C Corporation				Yes	
(12) NCH Investors Fund (HU) Corp C/O Maples and Calder PO Box 309 KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(13) Nicarao I Ltd Maples Corporate Services Ltd PO B Grand Cayman KY1-1104 CJ 98-0643167	Investments	CJ	NA	C Corporation				Yes	
(14) Nicarao II Ltd Maples Corporate Services Ltd PO B Grand Cayman KY1-1104 CJ 98-0643169	Investments	CJ	NA	C Corporation				Yes	

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								Yes	No
(211) Nicarao Ltd Maples Corporate Services Ltd PO B KY1-1104 CJ 98-0643164	Investments	CJ	NA	C Corporation				Yes	
(1) Nicateca Inc C/O Walkers SPV Limited Walker Hou George Town KY1-1104 CJ 98-0520487	Investments	CJ	NA	C Corporation				Yes	
(2) Nicateca SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(3) Nomina (No 1253) Limited 40 Gracechurch Street 5th Floor London EC3V 0BT UK	Investments	UK	NA	C Corporation				Yes	
(4) Northern Rosella Trust Level 25 20 Bond Street Sydney NSW 2000 AS 98-6081350	Investments	AS	NA	C Corporation				Yes	
(5) OAK-Mosser REIT II Inc 220 Montgomery St 20th Floor San Francisco, CA 94104 82-2028032	Investments	DE	NA	C Corporation				Yes	
(6) OAK-Mosser REIT Inc 220 Montgomery Street 20th Floor San Francisco, CA 94104 81-3362816	Investments	DE	NA	C Corporation				Yes	
(7) Opera SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(8) PAG Asia Alpha Feeder Limited PO Box 472 2nd Floor Harbor Place George Town KY1-1106 CJ	Investments	CJ	NA	C Corporation				Yes	
(9) Parfen SRL Juncal 1392 Montevideo 11000 UY	Investments	UY	NA	C Corporation				Yes	
(10) Pearl Retail Inc C/O Maples and Calder PO Box 309 George Town KY1-1104 CJ 98-1048757	Investments	CJ	NA	C Corporation				Yes	
(11) Pinares AARL Juncal 1327 Floor 22 Montevideo 11000 UY 98-0641950	Investments	UY	NA	Trust				Yes	
(12) POOLED INCOME FUNDS (3)	CHARITABLE TRUST	MA	NA	C Corporation				Yes	
(13) Pradaria Agroflorestal Ltda Avenida Alfonso Pena 3504 Room 7 Campo Grande CEP 79002 BR 98-0642732	Investments	BR	NA	C Corporation				Yes	
(14) Premier A-1 Services LLC 3519 Fee Fee Rd 221 Bridgeton, MO 63044 82-1435302	Investments	DE	NA	C Corporation				Yes	

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								Yes	No
(226) PSI Atlantic Services LLC 530 Oak Court Drive Suite 185 Memphis, TN 38117 82-1423777	Investments	DE	NA	C Corporation				Yes	
(1) Pular SpA c/o Aninat Schwencke Cia Av Lo CI	Investments	CI	NA	C Corporation				Yes	
(2) Regent Office Fund II REIT 11990 San Vicente Boulevard Suite 20 Los Angeles, CA 90049 47-2081357	Investments	MD	NA	C Corporation				Yes	
(3) Represa Properties Ltd Ugland House South Church Street George Town KY1-1104 CJ	Investments	CJ	NA	Trust				Yes	
(4) RETIREMENT PLAN TRUST FOR EMPLOYEES OF H 1033 MASS AVE 3RD FL CAMBRIDGE, MA 02138 04-2636388	RETIREMENT TRUST	MA	NA	C Corporation				Yes	
(5) Rio Mira Participacoes Ltda Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(6) Rosella Hold TC Pty Ltd Level 25 20 Bond Street Sydney NSW 2000 AS 98-1126654	Investments	AS	NA	C Corporation				Yes	
(7) Rosella Ltd Maples Corporate Services Ltd PO B Grand Cayman KY1-1104 CJ 98-1120479	Investments	CJ	NA	C Corporation				Yes	
(8) Rosella Sub TC Pty Ltd Level 25 20 Bond Street Sydney NSW 2000 AS 98-1126678	Investments	AS	NA	C Corporation				Yes	
(9) Scolopax SRL 8 Victoriei Street B1 42 Bis Apt Brasov RO	Investments	RO	NA	C Corporation				Yes	
(10) SLP Ltd PO Box 309 Ugland House Grand Cayman KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(11) Sobralia Ltd C/O Maples and Calder PO Box 309 Grand Cayman KY1-1104 CJ 98-1084076	Investments	CJ	NA	C Corporation				Yes	
(12) Sociedad Explotadora Agricola SpA Ave Isidora Goyenechea No 2939 1 Las Condes CI 98-0632838	Investments	CI	NA	C Corporation				Yes	
(13) Sora Ltd C/O Maples and Calder PO Box 309 Grand Cayman KY1-1104 CJ 98-1098256	Investments	CJ	NA	C Corporation				Yes	
(14) Star Asia Japan Special Situations IV BI 125 Gaither Drive Suite L Mount Laurel, NJ 08054	Investments	CJ	NA	C Corporation				Yes	

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								Yes	No
(241) Stelis Ltd C/O Maples and Calder PO Box 309 Grand Cayman KY1-1104 CJ 98-1083800	Investments	CJ	NA	C Corporation				Yes	
(1) Sustainable Teak Participacoes Ltda Av Castelo Branco 272 Room 3 Sa Caceres 78200-000 BR 98-0639215	Investments	BR	NA	C Corporation				Yes	
(2) Tacora SpA c/o Aninat Schwencke Cia Av Lo CI	Investments	CI	NA	C Corporation				Yes	
(3) Tagua SpA 2939 Avenida Isidora Goyenechea 11 Las Condes CI 98-1120143	Investments	CI	NA	C Corporation				Yes	
(4) TDCA REIT Inc 5130 South Alston Avenue Suite 210 Durham, NC 27713 47-5575876	Investments	DE	NA	C Corporation				Yes	
(5) Terena SA Mones Roses 6937 Montevideo 11000 UY	Investments	UY	NA	C Corporation				Yes	
(6) Terracal Alimentos e Bioenergia - Unid Av das Americas 700 Bl 5 Salas Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(7) Terracal Alimentos e Bioenergia - Unid Fazenda Santo Anonio da Manga S/N BR	Investments	BR	NA	C Corporation				Yes	
(8) Terracal Alimentos e Bioenergia - Unid Fazenda Flexas S/N Zona Rural Sao Romao CEP 39290-000 BR	Investments	BR	NA	C Corporation				Yes	
(9) Terracal Alimentos e Bioenergia - Unid Av das Americas 700 Bl 5 Salas Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(10) Terracal Alimentos e Bioenergia - Unid Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(11) Terracal Alimentos e Bioenergia - Unid Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(12) Terracal Alimentos e Bioenergia - Unid Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(13) Terracal Alimentos e Bioenergia - Unid Rua Do Forum S/N Sala A Centro BR	Investments	BR	NA	C Corporation				Yes	
(14) Terracal Alimentos e Bioenergia - Unid Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	

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								Yes	No
(256) Terracal Alimentos e Bioenergia - Unidada Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(1) Terracal Alimentos e Bioenergia - Unidada Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(2) Terracal Alimentos e Bioenergia - Unidada Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(3) Terracal Alimentos e Bioenergia - Unidada Fazenda Oiteiros S/N Zona Rural CEP 64840-000 BR	Investments	BR	NA	C Corporation				Yes	
(4) Terracal Alimentos e Bioenergia - Unidada Rua Alvaro Mendes N 2346 Sala C BR	Investments	BR	NA	C Corporation				Yes	
(5) Terracal Alimentos e Bioenergia - Unidada Av das Americas 700 Bl 5 Salas Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(6) Terracal Alimentos e Bioenergia Ltda Av das Americas 700 Bl 5 Salas Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(7) Terracal Participacoes Ltda Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(8) Terracal Propriedades Ltda Av das Americas 700 Bloco 5 Sala Barra da Tijuca BR	Investments	BR	NA	C Corporation				Yes	
(9) Tinamou PO Box 309 Uglad House KY1-1104 CJ 98-1014421	Investments	CJ	NA	C Corporation				Yes	
(10) Totoria Ltd c/o Maples Corporate Services Ltd KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(11) Toucanet SA Plaza 2000 16th Floor 50th Street Panama PM	Investments	PM	NA	C Corporation				Yes	
(12) TPRV Capital Fund Ltd C/O Maples Corporate Services Ltd Grand Cayman KY1-1104 CJ	Investments	CJ	NA	C Corporation				Yes	
(13) Tunuyan SA Villa Fintana Del Club Terraza 2 C Managua NU	Investments	NU	NA	C Corporation				Yes	
(14) Uniteca Agroflorestal SA Ave Governador Ponce De Arruda 1 78110-971 BR	Investments	BR	NA	C Corporation				Yes	

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									Yes	No
(271) USRA Atlantic Net Lease Capital Corp C/O US Realty Advisors LLC1370 Av New York, NY 10019 45-2732642	Investments	DE	NA	C Corporation					Yes	
(1) Vista Verde Agroindustrial Ltda Rodovia Transcerrado KM 120 - Room Palmeira Do Piaui BR	Investments	BR	NA	C Corporation					Yes	
(2) West70 Offshore Fund Ltd 190 Elgin Ave George Town Grand Cayman KY1-1204 CJ	Investments	CJ	NA	C Corporation					Yes	
(3) Western Rosella Trust Level 25 20 Bond Street Sydney NSW 2000 AS 98-1126861	Investments	AS	NA	C Corporation					Yes	
(4) Wood Village Sub III GARP LLC 973 Lomas Santa Fe Drive Solana Beach, CA 92075 90-0906261	Investments	DE	NA	C Corporation					Yes	
(5) Wood Village Sub IV GARP LLC 973 Lomas Santa Fe Drive Solana Beach, CA 92075 35-2459520	Investments	DE	NA	C Corporation					Yes	
(6) Yanteles SpA c/o Aninat Schwencke Cia Av Lo CI	Investments	CI	NA	C Corporation					Yes	