


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014, and ending 06-30-2015

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

SYRACUSE UNIVERSITY

% JEAN B GALLIPEAU

Doing business as

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

SKYTOP OFFICE BLDG SKYTOP RD

Room/suite

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

SYRACUSE, NY 132445300

F Name and address of principal officer

KENT SYVERUD

CROUSE HINDS HALL

SYRACUSE,NY 13244

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

☐ Yes☒ No

H(b) Are all subordinates included?

☐ Yes☐ No

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

H(c) Group exemption number

I Tax-exempt status

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

J Website:

WWW.SYR.EDU

K Form of organization

☒ Corporation☐ Trust☐ Association☐ Other ☐

L Year of formation

1870

M State of legal domicile

NY

Part I	Summary																																										
Activities & Governance	<div><div>1</div><div>Briefly describe the organization’s mission or most significant activities</div><div>Syracuse University (SU) is a non-profit university devoted to education, teaching, and research</div></div>																																										
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																																										
Revenue	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>53</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>46</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2014 (Part V, line 2a)</td><td>17,560</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>1,488</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>15,384,642</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td></td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	53	4	Number of independent voting members of the governing body (Part VI, line 1b)	46	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	17,560	6	Total number of volunteers (estimate if necessary)	1,488	7a	Total unrelated business revenue from Part VIII, column (C), line 12	15,384,642	7b	Net unrelated business taxable income from Form 990-T, line 34																									
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Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including 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

JEAN B GALLIPEAU COMPTROLLER

Type or print name and title

Print/Type preparer's name

TARA D'AGOSTINO

Preparer's signature

TARA D'AGOSTINO

Firm's name

☐ KPMG LLP

Firm's address

☐ 60 South Street

Boston, MA 02111

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization's mission

SYRACUSE UNIVERSITY (SU) IS A NON-PROFIT UNIVERSITY DEVOTED TO EDUCATION, TEACHING, AND RESEARCH

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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

☐ Yes ☒ No

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If "Yes," describe these changes on Schedule O

☐ Yes ☒ No

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 \$ 629,366,652 including grants of \$ 294,278,901) (Revenue \$ 795,719,606)

INSTRUCTION AND DEPARTMENTAL RESEARCH EXPENDITURES IN THIS AREA INCLUDE SALARIES AND BENEFITS FOR FACULTY, SCHOLARSHIPS AND GRANTS TO STUDENTS, AND SUPPORT FOR FACILITIES AND EQUIPMENT, CONDUCTED FOR THE BENEFIT OF APPROXIMATELY 15,200 UNDERGRADUATE AND 6,300 GRADUATE AND LAW STUDENTS ENROLLED AT SYRACUSE UNIVERSITY

4b

(Code) (Expenses \$ 75,896,667 including grants of \$) (Revenue \$ 75,896,667)

SPONSORED RESEARCH AND OTHER RELATED ACTIVITIES EXPENDITURES IN THIS AREA ARE FOR RESEARCH AND SIMILAR ACTIVITY FUNDED BY GRANTS FROM THE PUBLIC, PRIVATE, AND NON-PROFIT SECTORS

4c

(Code) (Expenses \$ 172,094,514 including grants of \$ 6,473,012) (Revenue \$ 216,313,691)

AUXILIARY SERVICES EXPENDITURES IN THIS AREA ARE FOR THE INFRASTRUCTURE THAT SUPPORTS SYRACUSE UNIVERSITY'S MISSION INCLUDING HOUSING, DINING, AND BOOKS, INSTRUCTIONAL MATERIALS AND OTHER GOODS AND SERVICES

4d

Other program services (Describe in Schedule O)





















(Expenses \$ 247,508,540 including grants of \$) (Revenue \$ 25,914,362)

4e

Total program service expenses

1,124,866,373

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9 Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16 Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	2,205	
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	17,560	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	Yes
b If "Yes," enter the name of the foreign country <u>CI, CH, FR, IT, SP, TU, UK</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year		7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8	
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b	
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12		10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders		11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b	
c Enter the amount of reserves on hand		13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>		14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	53	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	46	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
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	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	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	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
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?	16b	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AK , AZ , CA , CO , FL , KY , ME , MD , MA , MI , NH , SC , WA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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	JEAN B GALLIPEAU SKYTOP OFFICE BUILDING SYRACUSE, NY 13244 (315) 443-3765

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

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

Form **990** (2014)

Part VII

(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			

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	16,782,640	0	1,901,496

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: 730

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

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
BAIN COMPANY INC, 131 DARTMOUTH STREET BOSTON, MA 02116	CONSULTANTS	6,196,837
THE SYSTEMS GROUP LLC, 1345 AVENUE OF THE AMERICAS NEW YORK, NY 101050302	ENGINEERS	5,256,831
BARCLAY DAMON LLP, 300 SOUTH STATE STREET SYRACUSE, NY 13202	ATTORNEYS	2,307,143
BOND SCHOENECK KING PLLC, ONE LINCOLN CENTER SYRACUSE, NY 132021324	ATTORNEYS	1,935,461
ASHLEY MCGRAW ARCHITECTS PC, 215 WYOMING STREET SYRACUSE, NY 132042928	ARCHITECTS	1,216,265

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 **163**

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514				
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a								
	b	Membership dues	1b								
	c	Fundraising events	1c	594,652							
	d	Related organizations	1d								
	e	Government grants (contributions)	1e	6,431,826							
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	59,183,770							
	g	Noncash contributions included in lines 1a-1f \$		13,259,329							
	h	Total. Add lines 1a-1f			66,210,248						
Program Service Revenue			Business Code								
	2a	INSTRUCTION/DEPARTMENT RESEARCH	611600	795,719,606	795,719,606						
	b	SPONSORED RESEARCH	611600	75,896,667	75,896,667						
	c	AUXILIARY-RELATED ACTIVITIES	611710	210,369,809	210,369,809						
	d	AUXILIARY-UNRELATED ACTIVITIES	541900	5,943,882		5,943,882					
	e	SHERATON SU HOTEL/CONF CTR	721110	13,395,048	3,178,320	10,216,728					
	f	All other program service revenue		12,519,314	12,519,314						
	g	Total. Add lines 2a-2f			1,113,844,326						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		19,799,245		4,721	19,794,524				
	4	Income from investment of tax-exempt bond proceeds . . .		23,021			23,021				
	5	Royalties		548,012			548,012				
	6a	(i) Real									
		(ii) Personal									
		Gross rents									
		Less rental expenses									
	b	Rental income or (loss)		465,393			465,393				
	c	Net rental income or (loss)									
	7a	(i) Securities									
		(ii) Other									
		Gross amount from sales of assets other than inventory									
		Less cost or other basis and sales expenses									
	b	Gain or (loss)		69,246,291			69,246,291				
	c	Net gain or (loss)									
	8a	Gross income from fundraising events (not including \$ 594,652 of contributions reported on line 1c) See Part IV, line 18 . . .									
		Less direct expenses									
		Net income or (loss) from fundraising events . . .									
	9a	Gross income from gaming activities See Part IV, line 19		0							
		Less direct expenses									
		Net income or (loss) from gaming activities . . .									
	10a	Gross sales of inventory, less returns and allowances		0							
		Less cost of goods sold									
		Net income or (loss) from sales of inventory . . .									
	Miscellaneous Revenue		Business Code								
	11a	LOSS FROM PARTNERSHIP/ S CORP	525990	-797,095		-797,095					
	b	TRAVEL TOURS	541900	16,406		16,406					
	c										
	d	All other revenue									
	e	Total. Add lines 11a-11d			-780,689						
	12	Total revenue. See Instructions			1,269,059,737	1,097,683,716	15,384,642	89,781,131			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	20,300	20,300		
2	Grants and other assistance to domestic individuals See Part IV, line 22	288,906,780	288,906,780		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	11,824,833	11,824,833		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	10,954,898	2,451,771	6,957,525	1,545,602
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	1,652,047	1,652,047		
7	Other salaries and wages	390,450,732	377,082,991	6,581,593	6,786,148
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30,873,376	29,752,995	574,022	546,359
9	Other employee benefits	78,673,246	73,752,051	3,019,489	1,901,706
10	Payroll taxes	27,357,908	25,855,229	937,448	565,231
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	10,001,815	2,487,041	7,479,931	34,843
c	Accounting	582,070		582,070	
d	Lobbying	204,000	204,000		
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	2,768,573		2,768,573	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	26,403,450	22,311,066	3,729,021	363,363
12	Advertising and promotion	2,960,426	2,816,316	14,987	129,123
13	Office expenses	36,236,714	34,161,841	1,355,545	719,328
14	Information technology	10,316,262	9,809,679	233,991	272,592
15	Royalties	347,994	347,994		
16	Occupancy	39,098,384	37,484,762	1,200,297	413,325
17	Travel	37,944,645	36,515,919	337,793	1,090,933
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	4,022,728	3,856,207	285	166,236
20	Interest	16,321,848	16,321,848		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	68,604,252	66,405,042	1,548,960	650,250
23	Insurance	1,333,838	1,333,838		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	COGS-AUXILIARIES	19,905,415	19,905,415		
b	EQUIPMENT NOT CAPITALIZED	10,774,210	10,774,210		
c	RENTALS-OTHER	7,960,081	7,898,483	15,106	46,492
d	UNRELATED BUS INCOME TAX	197,218		197,218	
e	All other expenses	42,090,167	40,933,715	1,014,999	141,453
25	Total functional expenses. Add lines 1 through 24e	1,178,788,210	1,124,866,373	38,548,853	15,372,984
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		13,645,117	1	11,831,204
	2	Savings and temporary cash investments		127,466,437	2	128,837,059
	3	Pledges and grants receivable, net		80,784,229	3	79,678,648
	4	Accounts receivable, net		33,403,976	4	49,278,603
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		11,890,680	8	12,628,932
	9	Prepaid expenses and deferred charges		15,978,474	9	17,758,993
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a2,026,776,664			
	b	Less: accumulated depreciation	10b954,561,725	1,029,522,842	10c	1,072,214,939
	11	Investments—publicly traded securities		567,294,280	11	602,454,002
	12	Investments—other securities. See Part IV, line 11.		736,340,188	12	658,686,335
	13	Investments—program-related. See Part IV, line 11.		34,124,755	13	35,212,426
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11.		6,540,513	15	51,662
	16	Total assets. Add lines 1 through 15 (must equal line 34).		2,656,991,491	16	2,668,632,803
Liabilities	17	Accounts payable and accrued expenses		231,922,167	17	242,020,515
	18	Grants payable		0	18	0
	19	Deferred revenue		33,835,118	19	39,731,954
	20	Tax-exempt bond liabilities		448,183,831	20	438,225,435
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		1,761,910	21	1,740,435
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		11,922,410	23	11,173,222
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D.		92,708,369	25	93,537,717
	26	Total liabilities. Add lines 17 through 25.		820,333,805	26	826,429,278
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		1,218,806,743	27	1,227,195,190
	28	Temporarily restricted net assets		217,968,080	28	202,586,366
	29	Permanently restricted net assets		399,882,863	29	412,421,969
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,836,657,686	33	1,842,203,525
	34	Total liabilities and net assets/fund balances		2,656,991,491	34	2,668,632,803

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,269,059,737
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,178,788,210
3	Revenue less expenses Subtract line 2 from line 1	3	90,271,527
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,836,657,686
5	Net unrealized gains (losses) on investments	5	-82,911,330
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,814,358
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,842,203,525

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:

Software Version:

EIN: 15-0532081

Name: SYRACUSE UNIVERSITY

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOANNE F ALPER TRUSTEE	5 0 0 0	X						0	0	0
(1) MARTIN N BANDIER TRUSTEE	1 0 0 0	X						0	0	0
(2) STEVEN W BARNES TRUSTEE	5 0 0 0	X						0	0	0
(3) JAMES V BREUER TRUSTEE	5 0 0 0	X						0	0	0
(4) JOHN H CHAPPLE TRUSTEE	5 0 0 0	X						0	0	0
(5) ANGEL COLLADO-SCHWARZ TRUSTEE	1 0 0 0	X						0	0	0
(6) LAUREN B CRAMER TRUSTEE	1 0 0 0	X						0	0	0
(7) DANIEL A D'ANIELLO TRUSTEE	1 0 0 0	X						0	0	0
(8) DARLENE T DEREMER TRUSTEE	5 0 0 0	X						0	0	0
(9) ROBERT E DINEEN JR TRUSTEE	5 0 0 0	X						0	0	0
(10) NICHOLAS M DONOFRIO TRUSTEE	1 0 0 0	X						0	0	0
(11) DAVID G EDELSTEIN TRUSTEE	5 0 0 0	X						0	0	0
(12) STEVEN L EINHORN TRUSTEE	1 0 0 0	X						0	0	0
(13) DAVID B FALK TRUSTEE	1 0 0 0	X						0	0	0
(14) WINSTON C FISHER TRUSTEE	5 0 0 0	X						0	0	0
(15) DAVID M FLAUM TRUSTEE	1 0 0 0	X						0	0	0
(16) STUART FRANKEL TRUSTEE	1 0 0 0	X						0	0	0
(17) KENNETH E GOODMAN TRUSTEE	10 0 0 0	X						0	0	0
(18) MELANIE GRAY TRUSTEE	5 0 0 0	X						0	0	0
(19) JOSHUA H HEINTZ TRUSTEE	1 0 0 0	X						0	0	0
(20) PETER A HORVITZ TRUSTEE	1 0 0 0	X						0	0	0
(21) SHARON HAINES JACQUET TRUSTEE	10 0 0 0	X						0	0	0
(22) LAWRENECE S KRAMER TRUSTEE	1 0 0 0	X						0	0	0
(23) JAMES D KUHN TRUSTEE	10 0 0 0	X						0	0	0
(24) CHRISTINE E LARSEN TRUSTEE	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(26) ROBERT R LIGHT TRUSTEE	1 0 0 0	X						0	0	0
(1) ARTHUR S LIU TRUSTEE	1 0 0 0	X						0	0	0
(2) DONALD T MACNAUGHTON TRUSTEE	1 0 0 0	X						0	0	0
(3) PATRICIA H MAUTINO TRUSTEE	1 0 0 0	X						0	0	0
(4) THEODORE A MCKEE TRUSTEE	1 0 0 0	X						0	0	0
(5) JAMES A MONK TRUSTEE	1 0 0 0	X						0	0	0
(6) JUDITH C MOWER TRUSTEE	5 0 0 0	X						0	0	0
(7) SAMUEL G NAPPI TRUSTEE	1 0 0 0	X						0	0	0
(8) MARK A NEPORENT TRUSTEE	1 0 0 0	X						0	0	0
(9) JOAN A NICHOLSON TRUSTEE	5 0 0 0	X						0	0	0
(10) DERYCK A PALMER TRUSTEE	1 0 0 0	X						0	0	0
(11) REINALDO PASCUAL TRUSTEE	1 0 0 0	X						0	0	0
(12) EDWARD J PETTINELLA TRUSTEE	1 0 0 0	X						0	0	0
(13) HOWARD G PHANSTIEL TRUSTEE	10 0 0 0	X						0	0	0
(14) ELLIOTT I PORTNOY TRUSTEE	1 0 0 0	X						0	0	0
(15) H JOHN RILEY JR TRUSTEE	5 0 0 0	X						0	0	0
(16) ANN M STEVENSON TRUSTEE	1 0 0 0	X						0	0	0
(17) LAURIE B TAISHOFF TRUSTEE	1 0 0 0	X						0	0	0
(18) ROBERT P TAISHOFF TRUSTEE	1 0 0 0	X						0	0	0
(19) RICHARD L THOMPSON TRUSTEE	20 0 0 0	X						0	0	0
(20) MICHAEL G THONIS TRUSTEE	5 0 0 0	X						0	0	0
(21) KATHLEEN A WALTERS TRUSTEE	1 0 0 0	X						0	0	0
(22) DIANE M WEATHERS TRUSTEE	1 0 0 0	X						0	0	0
(23) THOMAS C WILMOT SR TRUSTEE	1 0 0 0	X						0	0	0
(24) MICHAEL D WOHL TRUSTEE	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(51) ABDALLAH H YABROUDI TRUSTEE	1 0 0 0	X						0	0	0
(1) SAMUEL J ZAMARRIPA TRUSTEE	1 0 0 0	X						0	0	0
(2) KENT SYVERUD CHANCELLOR AND PRESIDENT	60 0 0 0	X		X				743,001	0	171,224
(3) SHERBURNE ABBOTT VP-SUSTAINABILITY INITIATIVES	60 0 0 0			X				259,573	0	33,275
(4) KAREN L ALSTON SENIOR VP HUMAN CAPITAL DEV	60 0 0 0			X				279,944	0	41,093
(5) DEBORAH ARMSTRONG VP DEVELOPMENT	60 0 0 0			X				221,636	0	30,636
(6) NICOLE L BROWN VP COMMUNICATIONS & CMO	60 0 0 0			X				202,130	0	21,496
(7) ANTHONY CALLISTO JR SVP SAFETY AND CLO	60 0 0 0			X				149,707	0	96,058
(8) LISA DOLAK SVP & UNIV SECRETARY/PROFESSOR	60 0 0 0			X				187,113	0	52,487
(9) DANIEL J FRENCH INTERIM SVP & GENERAL COUNSEL	60 0 0 0			X				144,000	0	0
(10) JEAN B GALLIPEAU COMPTROLLER	60 0 0 0			X				169,059	0	22,399
(11) ANDREW GORDON SVP AND CHRO	60 0 0 0			X				0	0	0
(12) DARYL J GROSS VP AND SPECIAL ASSISTANT	60 0 0 0			X				833,620	0	60,741
(13) J MICHAEL HAYNIE VICE CHANCELLOR - IVMF	60 0 0 0			X				326,424	0	33,964
(14) MARILYN R HIGGINS VP COMMUNITY ENGAGE ECO DEV	60 0 0 0			X				218,823	0	31,951
(15) REBECCA REED KANTROWITZ SR VP & DEAN STUDENT AFFAIRS	60 0 0 0			X				195,499	0	41,031
(16) RUTH E KAPLAN VP FOR EXTERNAL AFFAIRS	60 0 0 0			X				273,413	0	26,022
(17) GINA LEE-GLAUSER VP FOR RESEARCH	60 0 0 0			X				239,767	0	41,438
(18) ELIZABETH LIDDY INTERIM V CHANCELLOR PROVOST	60 0 0 0			X				342,585	0	34,123
(19) LOUIS G MARCOCCIA EXECUTIVE VP AND CFO	60 0 0 0			X				622,461	0	131,702
(20) LARRY MARTIN VP PROGRAM DEVELOPMENT	60 0 0 0			X				158,528	0	23,902
(21) DICKENS MATHIEU SR VP & GENERAL COUNSEL	60 0 0 0			X				918,174	0	38,441
(22) CHARLES P MERRIHEW VP FOR ENGAGEMENT INITIATIVES	60 0 0 0			X				311,409	0	42,405
(23) ELIZABETH O'ROURKE SVP PRINCIPAL GIFTS/INT ADV	60 0 0 0			X				277,554	0	41,095
(24) KEVIN C QUINN SENIOR VP FOR PUBLIC AFFAIRS	60 0 0 0			X				275,556	0	47,302

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(76) SAMUEL J SCOZZAFAVA JR INTERIM CIO & VP IT SERVICES	60 0 0 0			X				180,525	0	72,530
(1) CHRISTOPHER M SEDORE SR VP FOR ENROLLMENT MGMT	60 0 0 0			X				325,943	0	66,868
(2) DAVID C SMITH ACTING SECRETARY - BOT	60 0 0 0			X				80,000	0	0
(3) DAVID J SMITH TREASURER	60 0 0 0			X				223,848	0	47,606
(4) ERIC F SPINA VICE CHANCELLOR AND PROVOST	60 0 0 0			X				577,085	0	80,265
(5) MATTHEW TER MOLEN SVP & CHIEF ADV OFFICER	60 0 0 0			X				0	0	0
(6) MARY ANN TYSZKO VP STRATEGIC BUS DEV & INNO	60 0 0 0			X				267,078	0	38,113
(7) JAMIE CYR DIRECTOR - AUXILIARY SERVICES	60 0 0 0				X			182,981	0	87,813
(8) GEORGE M LANGFORD DEAN - ARTS AND SCIENCES	60 0 0 0				X			399,108	0	27,261
(9) KARIN RUHLANDT DEAN - ARTS AND SCIENCES	60 0 0 0				X			186,446	0	43,328
(10) RYAN WILLIAMS ASSOC VP FOR ENROLLMENT MGMT	60 0 0 0				X			234,696	0	37,875
(11) JAMES A BOEHEIM JR BASKETBALL HEAD COACH	60 0 0 0					X		1,957,449	0	86,221
(12) SCOTT SHAFER FOOTBALL HEAD COACH	60 0 0 0					X		1,472,499	0	50,447
(13) JAMES B STEINBERG DEAN - MAXWELL SCHOOL	60 0 0 0					X		505,327	0	43,919
(14) MELVIN T STITH PROFESSOR	60 0 0 0					X		461,382	0	35,449
(15) KENNETH KAVAJECZ DEAN - WHITMAN SCHOOL	60 0 0 0					X		461,466	0	34,982
(16) NANCY CANTOR CHANCELLOR AND PRESIDENT	0 0 0 0						X	823,959	0	796
(17) REBECCA L FOOTE COMPTROLLER	60 0 0 0						X	194,145	0	21,156
(18) DONALD A SALEH VP FOR ENROLLMENT MGMT	60 0 0 0						X	388,771	0	18,398
(19) THOMAS J WALSH EXEC VP FOR INST'L ADVANCEMENT	60 0 0 0						X	509,956	0	45,684

SCHEDULE A
(Form 990 or 990EZ)

Department of the
Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization SYRACUSE UNIVERSITY	Employer identification number 15-0532081
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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 11, 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)

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 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)

10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations _____

g


Provide the following information about the supported organization(s)

(i)Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	82,099,337	68,936,064	66,692,292	80,592,540	66,210,248	364,530,481
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	82,099,337	68,936,064	66,692,292	80,592,540	66,210,248	364,530,481
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,087,704
6 Public support. Subtract line 5 from line 4						361,442,777

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	82,099,337	68,936,064	66,692,292	80,592,540	66,210,248	364,530,481
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,339,337	14,304,979	18,921,104	20,244,652	21,583,527	98,393,599
9 Net income from unrelated business activities, whether or not the business is regularly carried on	134,264				51,068	185,332
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	123,428	153,234	139,004	230,254	247,572	893,492
11 Total support. Add lines 7 through 10						464,002,904
12 Gross receipts from related activities, etc. (see instructions)					12	5,015,049,941
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14 77 897 %
15	Public support percentage for 2013 Schedule A, Part II, line 14	15 77 700 %
16a	33 1/3% support test—2014. 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	<input type="checkbox"/>
b	33 1/3% support test—2013. 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	<input type="checkbox"/>
17a	10%-facts-and-circumstances test—2014. 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	<input type="checkbox"/>
b	10%-facts-and-circumstances test—2013. 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	<input type="checkbox"/>
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	<input type="checkbox"/>

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2013 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2014. 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—2013. 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 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009.			
b From 2010.			
c From 2011.			
d From 2012.			
e From 2013.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010.			
b From 2011.			
c From 2012.			
d From 2013.			
e From 2014.			

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

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization SYRACUSE UNIVERSITY	Employer identification number 15-0532081
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

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

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?	Yes		6,180
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		326,264
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		375
j	Total. Add lines 1c through 1i.			332,819
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Return Reference	Explanation
LOBBYING ACTIVITIES	LOBBYING THE OFFICE OF GOVERNMENT AND COMMUNITY RELATIONS (GCR) IS THE UNIVERSITY'S DESIGNATED POINT OF CONTACT FOR GOVERNMENT OFFICIALS AND THEIR STAFF. GCR ENSURES ALL CONTACT WITH PUBLIC OFFICIALS IS COMPLIANT WITH LOBBYING RULES AND REGULATIONS AT ALL LEVELS OF FEDERAL, STATE AND LOCAL GOVERNMENT. THEY ARE THE DESIGNATED POINT OF CONTACT FOR GOVERNMENT OFFICIALS, AND ARE RESPONSIBLE FOR COORDINATING AN EFFECTIVE GOVERNMENT RELATIONS PROGRAM. COMMUNICATION CAN BE IN THE FORM OF PHONE CALLS, IN PERSON MEETINGS OR FORMAL LETTERS. STAFFING WITHIN THE OFFICE OF GCR INCLUDES MANAGEMENT, STAFF AND VOLUNTEERS AS NEEDED. PART II-B, LINE 1I ANNUAL STUDENT LOBBY DAY IN ALBANY, NY \$ 375 ----- TOTAL PART II-B LINE 1I \$ 375

[illegible]

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization SYRACUSE UNIVERSITY	Employer identification number 15-0532081
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Part I

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

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

Part II

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

1

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

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

2

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

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

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, 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" to 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 in Form 990, Part VIII, line 1

▶ \$ 216,407

(ii) Assets included in Form 990, Part X

▶ \$ 48,560,957

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 in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2014

Part III

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

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

☒

Public exhibition

d

☒

Loan or exchange programs

b

☒

Scholarly research

e

☒

Other CLASSROOM TEACHING

c

☒

Preservation for future generations
- 4
- Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5
- During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
- ☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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 |
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a
- Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
- ☒ Yes

☐ No
- b
- If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII
- ☒

Part V

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

		(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	1,156,034,730	1,028,501,282	916,521,664	890,579,165	617,218,033
b	Contributions	14,997,390	25,174,519	65,361,162	63,785,156	216,483,897
c	Net investment earnings, gains, and losses	22,803,786	153,495,023	96,160,366	19,037,950	119,518,112
d	Grants or scholarships	10,778,940	10,311,337	9,930,877	9,935,847	10,832,174
e	Other expenditures for facilities and programs	40,245,749	38,293,649	37,285,368	44,674,815	49,554,166
f	Administrative expenses	2,570,938	2,531,108	2,325,665	2,269,945	2,254,537
g	End of year balance	1,140,240,279	1,156,034,730	1,028,501,282	916,521,664	890,579,165

2

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

a

Board designated or quasi-endowment ▶ 54 700 %

b

Permanent endowment ▶ 32 620 %

c

Temporarily restricted endowment ▶ 12 680 %

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

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

b

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

3b

4

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

Part VI

Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	27,575,643		27,575,643
b	Buildings	1,671,383,192	696,686,287	974,696,905
c	Leasehold improvements			
d	Equipment	101,611,383	80,229,949	21,381,434
e	Other	226,206,446	177,645,489	48,560,957
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,072,214,939

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	880,794,291
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-82,911,330
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-301,814,552
e	Add lines 2a through 2d	2e	-384,725,882
3	Subtract line 2e from line 1	3	1,265,520,173
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,768,573
b	Other (Describe in Part XIII)	4b	770,991
c	Add lines 4a and 4b	4c	3,539,564
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	1,269,059,737

Part XII

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

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

1	Total expenses and losses per audited financial statements	1	876,249,740
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	3,028,969
e	Add lines 2a through 2d	2e	3,028,969
3	Subtract line 2e from line 1	3	873,220,771
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,768,573
b	Other (Describe in Part XIII)	4b	302,798,866
c	Add lines 4a and 4b	4c	305,567,439
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	1,178,788,210

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
ORGANIZATION'S COLLECTIONS, PART III, LINE 4	SYRACUSE UNIVERSITY HAS A DIVERSE COLLECTION OF ART, HISTORICAL TREASURES AND OTHER SIMILAR ASSETS, INCLUDING FINE ART AND ETHNOGRAPHIC OBJECTS, LEGAL BOOKS, ARCHIVAL RECORDS, LIBRARY COLLECTIONS AND SPECIAL COLLECTIONS THE PRIMARY PURPOSE OF THE UNIVERSITY'S COLLECTIONS IS TO COLLECT AND PRESERVE THE CULTURAL AND HISTORICAL RECORD FOR GENERATIONS OF STUDENTS AND SCHOLARS SU ART GALLERIES - THE ART COLLECTION IS COMPRISED OF A DIVERSE, ENCYCLOPEDIC GROUP OF FINE ART AND ETHNOGRAPHIC OBJECTS BY INTERNATIONAL MAKERS AND REPRESENTS STYLES AND TIME PERIODS FROM PRE-HISTORY TO THE PRESENT THE ART COLLECTION PROVIDES A MEANINGFUL EDUCATIONAL EXPERIENCE AND ENCOUNTER WITH THE VISUAL ARTS FOR STUDENTS, FACULTY, STAFF AND THE PUBLIC LAW LIBRARY - THE LAW BOOK COLLECTION IS COMPRISED OF A DIVERSE AND HISTORIC GROUP OF LAW BOOKS THE LAW LIBRARY PROVIDES ACCESS TO INFORMATION IN ORDER TO ASSIST IN DISCOVERING, OBTAINING AND UNDERSTANDING THE COMPLEX RESEARCH TOOLS OF THE LEGAL PROFESSION ARCHIVES - THE SYRACUSE UNIVERSITY ARCHIVES IS AN INFORMATION AND RESEARCH CENTER FOR FACULTY, STAFF, STUDENTS AND OTHERS INTERESTED IN THE HISTORY OF THE UNIVERSITY IT IS DEDICATED TO PRESERVING RECORDS THAT DOCUMENT THE HISTORY, ORGANIZATION POLICIES, ACTIVITIES, AND PEOPLE OF THE UNIVERSITY, AND MAKING THOSE RECORDS AVAILABLE TO RESEARCHERS AND OTHER INTERESTED PARTIES THE ARCHIVES ACCEPTS MATERIALS FROM SCHOOLS, COLLEGES AND DEPARTMENTS, ALUMNI, THE GENERAL PUBLIC AND THE UNIVERSITY'S CLUBS AND ORGANIZATIONS THE ARCHIVES DOES, ON OCCASION, SOLICIT MATERIAL FROM FACULTY AND OTHERS THAT WILL ENHANCE THE OVERALL RESEARCH VALUE OF THE COLLECTION TO BE ELIGIBLE FOR INCLUSION, THE RECORDS MUST HAVE SOME CONNECTION TO THE UNIVERSITY ARCHIVAL RECORDS INCLUDE BUT ARE NOT LIMITED TO THE RECORDS OF THE CHANCELLOR AND THE BOARD OF TRUSTEES, MINUTES, CORRESPONDENCE AND REPORTS OF SCHOOLS, COLLEGES AND DEPARTMENTS, PAPERS OF FACULTY, STAFF AND ALUMNI, CURRICULUM INFORMATION INCLUDING ON-LINE CLASSES, PUBLICATIONS, PHOTOGRAPHS, SLIDES, VIDEOTAPES AND MOTION PICTURE FILMS, THESES AND DISSERTATIONS, NEWSPAPER CLIPPINGS, AND MEMORABILIA LIBRARY - THE IDEA OF THE LIBRARY - A REFUGE FOR HUMAN KNOWLEDGE - IS TIMELESS SYRACUSE UNIVERSITY LIBRARY'S COLLECTIONS SPAN 4,000 YEARS AND RANGE FROM SUMERIAN CUNEIFORM TABLETS TO 21ST CENTURY DIGITAL DATA SETS EVEN WHILE THE TYPES AND FORMS OF KNOWLEDGE CHANGE, THE LIBRARY STRIVES TO KEEP PACE, NEVER LOSING SIGHT OF ITS PURPOSE TO COLLECT AND PRESERVE THE CULTURAL RECORD FOR GENERATIONS OF STUDENTS AND SCHOLARS SPECIAL COLLECTIONS - THE SPECIAL COLLECTIONS RESEARCH CENTER MAINTAINS AND PROVIDES ACCESS TO DISTINGUISHED COLLECTIONS OF RARE BOOKS, MANUSCRIPTS, AND OTHER ARCHIVAL MATERIALS SYRACUSE UNIVERSITY STUDENTS, FACULTY, STAFF, AND OTHER SCHOLARS HAVE AVAILABLE TO THEM MORE THAN 100,000 PRINTED WORKS AND 2,000 ARCHIVAL COLLECTIONS, INCLUDING IMPORTANT EDITIONS, MANUSCRIPTS, DOCUMENTS, LETTERS, DIARIES, DRAWINGS, PHOTOGRAPHS AND MEMORABILIA
ESCROW ACCOUNT LIABILITY, PART IV, LINE 2B	THE UNIVERSITY MAINTAINS A LIMITED NUMBER OF AGENCY FUNDS, WHICH IT HOLDS AS CUSTODIAN OR FISCAL AGENT FOR STUDENT ORGANIZATIONS AND/OR OUTSIDE ORGANIZATIONS AS AN ACCOMMODATION TO THE ORGANIZATION THE ORGANIZATIONS ARE THEN ALLOWED TO UTILIZE THE UNIVERSITY'S FINANCIAL SYSTEMS AND RESOURCES TO PROCESS TRANSACTIONS AGAINST THESE FUNDS
ENDOWMENT FUNDS CONTRIBUTIONS, PART V, LINE 4	THE UNIVERSITY ENDOWMENT CONSISTS OF APPROXIMATELY 2,000 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES, INCLUDING BOTH DONOR RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE UNIVERSITY TO FUNCTION AS ENDOWMENTS SPENDING FROM THE UNIVERSITY'S ENDOWMENTS IS DONOR RESTRICTED TO VARIOUS PURPOSES A MAJORITY OF THE FUNDS PROVIDE SCHOLARSHIPS AND FINANCIAL ASSISTANCE TO UNDERGRADUATE, GRADUATE AND LAW SCHOOL STUDENTS SOME OF THE OTHER USES OF THE FUNDS INCLUDE, BUT ARE NOT LIMITED TO, SUPPORT FOR FELLOWSHIPS, THE CREATION AND FUNDING OF DEPARTMENT CHAIRS AND PROFESSORSHIPS, SUPPORT FOR VARIOUS UNIVERSITY CENTERS, AND SUPPORT FOR THE UNIVERSITY'S TEACHING AND RESEARCH ACTIVITIES THE UNIVERSITY'S SPENDING POLICY, WHICH UTILIZES AN ANNUAL DISTRIBUTION PER UNIT MULTIPLIED BY THE PERCENTAGE APPROVED BY THE TRUSTEE AND INVESTMENT AND ENDOWMENT COMMITTEE, IS DESIGNED TO PROVIDE THE UNIVERSITY A STABLE LEVEL OF FINANCIAL SUPPORT AND TO PRESERVE THE ENDOWMENTS REAL VALUE
FIN 48 (ASC 740) FOOTNOTE, PART X, LINE 2	THE UNIVERSITY IS A TAX-EXEMPT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS GENERALLY EXEMPT FROM INCOME TAXES PURSUANT TO SECTION 501(A) OF THE INTERNAL REVENUE CODE SYRACUSE UNIVERSITY HOTEL AND CONFERENCE CENTER LLC, WHOLLY OWNED BY THE UNIVERSITY, IS REPORTED IN THE UNIVERSITY'S INCOME TAX FILINGS DRUMLINS, INC AND BLUE HIGHWAY INC ARE TAXABLE SUBSIDIARIES OF THE UNIVERSITY, FILING THEIR OWN TAX RETURNS THE SYRACUSE UNIVERSITY (USA) LONDON PROGRAM, CREATED FOR THE ADVANCEMENT OF EDUCATION, IS A REGISTERED CHARITY UNDER THE LAWS OF ENGLAND THE SU ISTANBUL PROGRAM (SU ISTANBUL EGITIM DESTEK VE DANISMA HIZMETLERI TICARET LIMITED SIRKETI), CREATED TO PROMOTE THE UNIVERSITY'S EDUCATIONAL ACTIVITIES IN TURKEY, IS A LIMITED LIABILITY COMPANY ESTABLISHED IN ACCORDANCE WITH THE PROVISION OF THE TURKISH COMMERCIAL CODE ITS OPERATIONS ARE GOVERNED BY THE LAWS OF THE REPUBLIC OF TURKEY THE INCOME TAX CONSEQUENCES, IF ANY, FROM THESE ENTITIES ARE REFLECTED IN THE FINANCIAL STATEMENTS, AND DO NOT HAVE A MATERIAL EFFECT, INDIVIDUALLY OR IN THE AGGREGATE, ON THE UNIVERSITY'S FINANCIAL STATEMENTS THE UNIVERSITY BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS
OTHER REVENUE INCLUDED IN FINANCIAL STATEMENTS BUT NOT ON RETURN	PART XI, LINE 2D REVENUES OF SUBSIDIARIES \$ 731,419 POSTRETIREMENT BENEFIT OBLIGATION \$ (1,814,358) FINANCIAL AID \$(300,731,613) ----- TOTAL \$(301,814,552)
OTHER REVENUE INCLUDED ON RETURN BUT NOT IN FINANCIAL STATEMENTS	PART XI, LINE 4B INTERCOMPANY REVENUE ELIMINATION \$2,067,250 RENTAL/FUNDRAISING EXPENSES \$(1,296,259) ----- TOTAL \$ 770,991
OTHER EXPENSES INCLUDED IN FINANCIAL STATEMENTS BUT NOT ON RETURN	PART XII, LINE 2D EXPENSES OF SUBSIDIARIES \$1,732,710 RENTAL/FUNDRAISING EXPENSES \$1,296,259 ----- TOTAL \$3,028,969

[illegible]

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization
SYRACUSE UNIVERSITY

Employer identification number

15-0532081

Part I

- 1** Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2** Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3** Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II

- 4** Does the organization maintain the following?
- a** Records indicating the racial composition of the student body, faculty, and administrative staff?
- b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c** Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d** Copies of all material used by the organization or on its behalf to solicit contributions?
- If you answered "No" to any of the above, please explain If you need more space, use Part II

- 5** Does the organization discriminate by race in any way with respect to
- a** Students' rights or privileges?
- b** Admissions policies?
- c** Employment of faculty or administrative staff?
- d** Scholarships or other financial assistance?
- e** Educational policies?
- f** Use of facilities?
- g** Athletic programs?
- h** Other extracurricular activities?
- If you answered "Yes" to any of the above, please explain If you need more space, use Part II

- 6a** Does the organization receive any financial aid or assistance from a governmental agency?
- b** Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either line 6a or line 6b, explain on Part II

- 7** Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	
4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	
5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No
6a	Yes	
6b		No
7	Yes	

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

Return Reference	Explanation
NONDISCRIMINATORY POLICY	LINE 3 SYRACUSE UNIVERSITY'S RACIAL NONDISCRIMINATION POLICY IS DISCLOSED IN ITS COURSE CATALOG AND TUITION AND FEES BOOKLET THE UNIVERSITY'S POLICIES CAN ALSO BE FOUND AT SUPOLICIES.SYR.EDU
FINANCIAL AID OR ASSISTANCE	LINE 6A THE UNIVERSITY RECEIVES FINANCIAL AID AND/OR ASSISTANCE FROM FEDERAL AGENCIES, SUCH AS THOSE PROVIDING PELL GRANTS (\$16,895,105), FEDERAL WORK STUDY PROGRAM (\$2,332,512), PERKINS LOAN FUNDS (\$5,933,866), FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT (\$2,241,734)

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
SYRACUSE UNIVERSITY

Employer identification number
15-0532081

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	7	196			311,924,040
b Total from continuation sheets to Part I	1	9			1,880,364
c Totals (add lines 3a and 3b)	8	205			313,804,404

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

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 ▶

3

Enter total number of other organizations or entities ▶

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) SCHOLARSHIPS	Central America and the Caribbean	1	14,685	TUITION DISC			
(2) SCHOLARSHIPS	East Asia and the Pacific	103	1,134,868	TUITION DISC			
(3) SCHOLARSHIPS	Europe (Including Iceland and Greenland)	1,070	9,930,441	TUITION DISC			
(4) SCHOLARSHIPS	Middle East and North Africa	18	137,420	TUITION DISC			
(5) SCHOLARSHIPS	Russia and the Newly Independent States	1	19,600	TUITION DISC			
(6) SCHOLARSHIPS	South America	30	429,963	TUITION DISC			
(7) SCHOLARSHIPS	South Asia	12	23,750	TUITION DISC			
(8) SCHOLARSHIPS	Sub-Saharan Africa	16	134,106	TUITION DISC			
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not 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
MONITORING THE USE OF GRANT FUNDS OUTSIDE THE U S	PART I, LINE 2 SU PROVIDED MORE THAN \$11.8 MILLION IN INSTITUTIONAL FINANCIAL AID TO STUDENTS IN THE FISCAL YEAR ENDED JUNE 30, 2015. THE AID PROVIDED CONSISTS OF A COMBINATION OF NEED-BASED AND MERIT-BASED GRANTS. MOST SCHOLARSHIPS ARE NEED-BASED. STUDENTS MUST APPLY FOR OR NEED-BASED FINANCIAL AID AWARDS BY COMPLETING THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA). THIS IS A STANDARD FORM USED IN HIGHER EDUCATION FOR THIS PURPOSE. BOTH NEED-BASED AND MERIT-BASED AID PROVIDED TO STUDENTS IS APPLIED BY THE UNIVERSITY DIRECTLY TO THE STUDENT'S ACCOUNT TO ENSURE THAT THE GRANTS ARE USED FOR THEIR INTENDED PURPOSE. FINANCIAL AID IS GENERALLY LIMITED TO THE AMOUNT OF TUITION, BUT CAN ALSO INCLUDE PARTIAL FUNDING FOR THE PROGRAM FEE (HOUSING AND FIELD TRIPS).

990 Schedule F, Supplemental Information

Return Reference	Explanation
BASIS OF ACCOUNTING	PART I, LINE 3, COLUMN F THE BASIS OF ACCOUNTING ON THE FINANCIAL STATEMENTS IS ACCRUAL

990 Schedule F, Supplemental Information

Return Reference	Explanation
NUMBER OF RECIPIENTS	PART III, COLUMN (C) THE NUMBER OF RECIPIENTS WHO RECEIVED SCHOLARSHIPS WAS DERIVED BY QUE RYING THE INDIVIDUAL STUDENT DATABASE IN THE STUDENT RECEIVABLE SYSTEM FOR ACADEMIC TERMS WITHIN THE FISCAL YEAR ENDED JUNE 30, 2015 THE QUERY LOOKED FOR TUITION DISCOUNT (FINANCI AL AID) AND OTHER ASSISTANCE USING THE DEFINITION OF SUCH ITEMS AS REPORTED IN THE UNIVERS ITY'S AUDITED FINANCIAL STATEMENTS THIS PRODUCED A REPORT OF ALL STUDENTS WHO RECEIVED AI D RECOGNIZING THAT A STUDENT COULD BE RECEIVING AID IN MORE THAN ONE ACADEMIC TERM, THE I NFORMATION WAS THEN SORTED BY INDIVIDUAL AND THE STUDENT WAS COUNTED ONLY ONCE

Additional Data

Software ID:
Software Version:
EIN: 15-0532081
Name: SYRACUSE UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		254,687,157
Central America and the Caribbean			Program Services	HIGHER ED	262,603
Central America and the Caribbean			Grantmaking		14,685

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Fundraising		11,116
East Asia and the Pacific			Investments		663,224
East Asia and the Pacific	2	21	Program Services	HIGHER ED	2,531,201

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			Grantmaking		1,134,868
East Asia and the Pacific			Fundraising		8,561
Europe (Including Iceland and Greenland)			Investments		9,913,863

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)	5	175	Program Services	HIGHER ED	28,214,968
Europe (Including Iceland and Greenland)			Grantmaking		9,930,441
Europe (Including Iceland and Greenland)			Fundraising		38,573

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	HIGHER ED	550,130
Middle East and North Africa			Grantmaking		137,420
Middle East and North Africa			Fundraising		5,383

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			Investments		3,357,284
North America			Program Services	HIGHER ED	462,563
North America			Fundraising		3,150

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
Russia and the Newly Independent States			Program Services	HIGHER ED	25,687
Russia and the Newly Independent States			Grantmaking		19,600
South America	1	9	Program Services	HIGHER ED	873,998

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America			Grantmaking		429,963
South America			Fundraising		20,649
South Asia			Program Services	HIGHER ED	186,174

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Grantmaking		23,750
Sub-Saharan Africa			Program Services	HIGHER ED	162,087
Sub-Saharan Africa			Grantmaking		134,106

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
Sub-Saharan Africa			Fundraising		1,200

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization
SYRACUSE UNIVERSITY

Employer identification number

15-0532081

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1

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

☐ Mail solicitations

b

☐ Internet and email solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events
- 2a

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

☐ Yes ☐ No
- b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

- 3

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
-
-

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

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>Mirror Awards</u>	<u>TONER PRIZE</u>	<u>4</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
	1	Gross receipts	422,950	185,860	233,414	842,224	
	2	Less Contributions . . .	367,950	144,810	81,892	594,652	
3	Gross income (line 1 minus line 2)	55,000	41,050	151,522	247,572		
Direct Expenses	4	Cash prizes					
	5	Noncash prizes . . .					
	6	Rent/facility costs . . .			49,359	49,359	
	7	Food and beverages .					
	8	Entertainment					
	9	Other direct expenses .	295,797	109,316	89,210	494,323	
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(543,682)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-296,110

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

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

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

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No


13


Indicate the percentage of gaming activities conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 



Address 

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?


☐ Yes ☐ No


b

If "Yes," enter the amount of gaming revenue received by the organization  \$ and the amount of gaming revenue retained by the third party  \$

c


If "Yes," enter name and address of the third party


Name 


Address 

16

Gaming manager information

Name 

Gaming manager compensation  \$

Description of services provided 

☐ Director/officer

☐ Employee

☐ Independent contractor

17


Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$

Part IV

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

Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
SYRACUSE UNIVERSITY

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

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Employer identification number
15-0532081

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" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NATIONAL ASSN OF BASKETBALL COACHES 1111 MAIN ST KANSAS CITY MO 6410 KANSAS CITY, MO 64105	06-1569842	501(C)(3)	10,300				SUPPORT
(2) WESTCOTT COMMUNITY CENTER 826 EUCLID AVENUE SYRACUSE, NY 13210	16-1499834	501(C)(3)	10,000				SUPPORT

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

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

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SU STUDENT SCHOLARSHIPS AND FINANCIAL AID	14782	279,502,176			
(2) SEOG	2112	2,241,734			
(3) HEOP	261	689,858			
(4) ROOM AND BOARD	653	6,473,012			
(5) PROVISION OF BOOKS AND SUPPLIES	411		237,877	FMV	BOOKS AND SUPPLIES

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
MONITORING THE USE OF GRANTS IN THE U S	PART I, LINE 2 SU PROVIDED APPROXIMATELY \$289 MILLION IN INSTITUTIONAL AID TO UNDERGRADUATE AND GRADUATE STUDENTS IN THE FISCAL YEAR ENDED JUNE 30, 2015 THE AID PROVIDED CONSISTS OF A COMBINATION OF NEED-BASED AND MERIT-BASED GRANTS STUDENTS MUST APPLY FOR THESE FINANCIAL AID AWARDS BY COMPLETING TWO FORMS THAT ESTABLISH ELIGIBILITY FOR NEED-BASED AID THE COLLEGE SCHOLARSHIP SERVICE FINANCIAL AID PROFILE, AND THE FREE APPLICATION FOR FEDERAL STUDENT AID THESE ARE STANDARD FORMS USED IN HIGHER EDUCATION FOR THIS PURPOSE BOTH NEED-BASED AND MERIT-BASED AID PROVIDED TO STUDENTS IS APPLIED BY THE UNIVERSITY DIRECTLY TO THE STUDENT'S ACCOUNT TO ENSURE THAT THE GRANTS ARE USED FOR THEIR INTENDED PURPOSE MERIT SCHOLARSHIPS ARE GENERALLY LIMITED TO THE AMOUNT OF TUITION STUDENTS REACHING THE TUITION LIMIT ARE INELIGIBLE FOR ADDITIONAL SCHOLARSHIPS FROM THE UNIVERSITY NEED-BASED AID CAN BE USED FOR ALL EDUCATIONAL RELATED EXPENSES IN ADDITION TO TUITION
GRANTS TO ORGANIZATIONS IN THE U S	PART II THE UNIVERSITY PROVIDED FINANCIAL SUPPORT TO THE NATIONAL ASSOCIATION OF BASKETBALL COACHES, AND RECEIVED ACKNOWLEDGMENT THAT MONIES REPRESENT CHARITABLE CONTRIBUTIONS FOR THE ORGANIZATION'S EXEMPT PURPOSE THE UNIVERSITY PROVIDED FINANCIAL SUPPORT TO THE WESTCOTT COMMUNITY CENTER, AND RECEIVED ACKNOWLEDGMENT THAT MONIES REPRESENT CHARITABLE CONTRIBUTIONS FOR THE ORGANIZATION'S EXEMPT PURPOSE
NUMBER OF RECIPIENTS	PART III, COLUMN B THE NUMBER OF RECIPIENTS WHO RECEIVED SCHOLARSHIPS WAS DERIVED BY QUERYING THE INDIVIDUAL STUDENT DATABASE IN THE STUDENT RECEIVABLE SYSTEM FOR ACADEMIC TERMS WITHIN THE FISCAL YEAR ENDED JUNE 30, 2015 THE QUERY LOOKED FOR TUITION DISCOUNT (FINANCIAL AID) AND OTHER ASSISTANCE USING THE DEFINITION OF SUCH ITEMS AS REPORTED IN THE UNIVERSITY'S AUDITED FINANCIAL STATEMENTS THIS PRODUCED A REPORT OF ALL STUDENTS WHO RECEIVED AID RECOGNIZING THAT A STUDENT COULD BE RECEIVING AID IN MORE THAN ONE ACADEMIC TERM, THE INFORMATION WAS THEN SORTED BY INDIVIDUAL AND THE STUDENT WAS COUNTED ONLY ONCE PER FINANCIAL AID TYPE

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" to Form 990, Part IV, line 23.
▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
SYRACUSE UNIVERSITY

Employer identification number
15-0532081

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

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

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

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

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

Part III Supplemental Information

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

Return Reference	Explanation
SUPPLEMENTAL INFORMATION	PART I, LINE 1A FIRST-CLASS TRAVEL UNIVERSITY POLICY ALLOWS, IN CERTAIN SITUATIONS, EMPLOYEES TO TRAVEL VIA FIRST-CLASS AIRFARE WHILE ON UNIVERSITY BUSINESS. THIS POLICY PROVIDES THAT THE CHANCELLOR, VICE CHANCELLOR AND PROVOST, EXECUTIVE VICE PRESIDENT AND CHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENTS, CHANCELLOR'S EXECUTIVE TEAM AND DEANS MAY MAKE EXCEPTIONS IN THE CASE OF EXTENUATING CIRCUMSTANCES (E.G. DEMANDING FLIGHT SCHEDULE, EXTENDED FLIGHT TIMES) BY GIVING PRIOR WRITTEN AUTHORIZATION FOR FIRST CLASS OR BUSINESS TRAVEL TO EMPLOYEES THEY OVERSEE. AS A RESULT OF THIS POLICY, CERTAIN OFFICERS AND HIGHLY COMPENSATED EMPLOYEES INCLUDED IN THIS FILING AT TIMES UTILIZED FIRST-CLASS AIRFARE FOR UNIVERSITY BUSINESS TRAVEL DURING 2014. CHARTER TRAVEL CERTAIN SYRACUSE UNIVERSITY OFFICERS, TRUSTEES, AND HIGHLY COMPENSATED EMPLOYEES UTILIZED CHARTER AIRLINE TRAVEL FOR BUSINESS PURPOSES. CHARTER TRAVEL ELIMINATES THE TIME CONSTRAINTS OF COMMERCIAL AIR TRAVEL, IS COST EFFECTIVE AND PERMITS GREATER SUPERVISION OF STUDENTS' TRAVEL FOR COMPANIONS. CERTAIN OFFICERS AND HIGHLY COMPENSATED EMPLOYEES HAD COMPANION TRAVEL. THIS TRAVEL WAS DETERMINED TO BE BUSINESS OR PERSONAL AND TAXABLE, BASED UPON THE FACTS AND CIRCUMSTANCES OF EACH SPECIFIC INCIDENCE, AND WAS TREATED ACCORDINGLY, FOR REPORTING PURPOSES. GROSS-UP PAYMENTS: AN OFFICER RECEIVED A GROSS-UP PAYMENT RELATED TO TAXABLE LODGING WHICH WAS INCLUDED IN THE EMPLOYEE'S COMPENSATION REPORTED ON FORM W-2. A HIGHLY COMPENSATED EMPLOYEE RECEIVED A GROSS-UP PAYMENT RELATING TO TAXABLE COMPLIMENTARY TICKETS WHICH WERE INCLUDED IN THE EMPLOYEE'S COMPENSATION REPORTED ON FORM W-2. HOUSING ALLOWANCE: THE CHANCELLOR IS PROVIDED WITH LODGING BENEFITS AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE EMPLOYER. INCLUDED IN SCHEDULE J, PART II, COLUMN (D) IS THE COMPUTED NON-TAXABLE MARKET VALUE OF THE CHANCELLOR'S OCCUPANCY OF SUCH PREMISES. HEALTH OR SOCIAL CLUB DUES: CERTAIN OFFICERS AND HIGHLY COMPENSATED EMPLOYEES RECEIVED MEMBERSHIPS IN HEALTH OR SOCIAL CLUBS. CLUB DUES ARE DETERMINED TO BE TAXABLE OR NON-TAXABLE BASED UPON THE PERCENTAGE OF BUSINESS AND PERSONAL USE AS REPORTED ON CLUB USE CERTIFICATION STATEMENTS SUBMITTED BY THE INDIVIDUALS WITH THE MEMBERSHIPS. THE TAXABLE PORTION WAS INCLUDED IN THE INDIVIDUAL'S COMPENSATION REPORTED ON FORM W-2. PERSONAL SERVICES AS PART OF THE UNIVERSITY'S EMPLOYMENT ARRANGEMENT FOR THE CHANCELLOR, SU PROVIDES A RESIDENCE MANAGER AT THE UNIVERSITY-OWNED OFFICIAL CHANCELLOR'S RESIDENCE. THE CHANCELLOR REIMBURSES THE UNIVERSITY FOR THE VALUE OF ANY NON-UNIVERSITY RELATED PERSONAL USE THROUGH AN AFTER-TAX DEDUCTION TAKEN FROM HIS SEMI-MONTHLY PAY.
SEVERANCE PAYMENTS	PART I, LINE 4A THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE: DICKENS MATHIEU \$ 670,688; REBECCA L. FOOTE \$ 122,077; DONALD A. SALEH \$ 253,000.
NONQUALIFIED 457(F) PLAN	PART I, LINE 4B CERTAIN OFFICERS, HIGHLY COMPENSATED EMPLOYEES, AND A FORMER OFFICER PARTICIPATE IN NONQUALIFIED 457(F) PLAN. CONTRIBUTIONS MADE: LOUIS G. MARCOCCIA \$ 88,000; KENT SYVERUD \$ 40,000; JAMES A. BOEHEIM JR. \$ 40,000. DISTRIBUTIONS FROM: NANCY CANTOR \$ 216,000; LOUIS G. MARCOCCIA \$ 88,000; ERIC F. SPINA \$ 70,000; JAMES A. BOEHEIM JR. \$ 80,000; THOMAS J. WALSH \$ 224,957.
NON-FIXED PAYMENTS	PART I, LINE 7 CERTAIN OFFICERS RECEIVED AN OVERLOAD/EXTRA SERVICE PAYMENT. AN OVERLOAD/EXTRA SERVICE PAYMENT IS FOR RECOGNITION OF SERVICES ABOVE NORMAL JOB RESPONSIBILITIES. THESE PAYMENTS WERE INCLUDED IN THE INDIVIDUAL'S COMPENSATION REPORTED ON FORM W-2.
COMPENSATION FOR SERVICES RENDERED TO SU	SCHEDULE J, PART II, SUPPLEMENTAL INFORMATION: DANIEL J. FRENCH'S TOTAL COMPENSATION REPORTED IN PART II, (B) (I) OF \$144,000 WAS PAID BY BARCLAY DAMON LLP FOR THE SERVICES RENDERED AS THE UNIVERSITY'S INTERIM SVP & GENERAL COUNSEL. JAMES A. BOEHEIM JR.'S TOTAL COMPENSATION REPORTED IN PART II, (B) (I) OF \$1,735,411, INCLUDES \$906,066 PAID BY SYRACUSE UNIVERSITY WHICH WAS REPORTED ON FORM W-2, AND \$600,000 FROM IMG WORLDWIDE, INC. WHICH WAS REPORTED BY IMG WORLDWIDE, INC. ON FORM 1099. ALSO INCLUDED IS NET INCOME OF \$229,345 REALIZED BY BIG ORANGE BASKETBALL CAMP FROM CONDUCTING A SUMMER BASKETBALL CAMP WHICH IS NOT REQUIRED TO BE AND WAS NOT REPORTED BY THE UNIVERSITY ON FORM W-2 OR FORM 1099. SCOTT D. SHAFER'S TOTAL COMPENSATION REPORTED IN PART II, (B) (I) OF \$1,392,550, INCLUDES \$827,550 PAID BY SYRACUSE UNIVERSITY WHICH WAS REPORTED ON FORM W-2, AND \$565,000 FROM IMG WORLDWIDE, INC. WHICH WAS REPORTED BY IMG WORLDWIDE, INC. ON FORM 1099. SCOTT D. SCHAFER ENTERPRISE LLC REALIZED A NET LOSS OF \$939 FROM CONDUCTING A SUMMER FOOTBALL CAMP WHICH HAS NOT BEEN INCLUDED IN PART II, COLUMN (B)(I) AND WAS NOT REPORTED BY THE UNIVERSITY ON FORM W-2 OR FORM 1099. DARYL J. GROSS' TOTAL COMPENSATION REPORTED IN PART II, (B) (I) OF \$590,050, INCLUDES \$510,050 PAID BY SYRACUSE UNIVERSITY WHICH WAS REPORTED ON FORM W-2, AND \$80,000 FROM IMG WORLDWIDE, INC. WHICH WAS REPORTED BY IMG WORLDWIDE, INC. ON FORM 1099.

Additional Data

Software ID:
Software Version:
EIN: 15-0532081
Name: SYRACUSE UNIVERSITY

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 in prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
SHERBURNE ABBOTT, VP-SUSTAINABILITY INITIATIVES	(i) (ii)	259,412 0	0 0	161 0	26,000 0	7,275 0	292,848 0	0 0
KAREN L ALSTON, SENIOR VP HUMAN CAPITAL DEV	(i) (ii)	279,783 0	0 0	161 0	26,000 0	15,093 0	321,037 0	0 0
DEBORAH ARMSTRONG, VP DEVELOPMENT	(i) (ii)	216,173 0	0 0	5,463 0	22,014 0	8,622 0	252,272 0	0 0
NICOLE L BROWN, VP COMMUNICATIONS & CMO	(i) (ii)	202,098 0	0 0	32 0	20,324 0	1,172 0	223,626 0	0 0
ANTHONY CALLISTO JR, SVP SAFETY AND CLO	(i) (ii)	149,483 0	0 0	224 0	15,096 0	80,962 0	245,765 0	0 0
LISA DOLAK, SVP & UNIV SECRETARY/PROFESSOR	(i) (ii)	187,113 0	0 0	0 0	19,193 0	33,294 0	239,600 0	0 0
DANIEL J FRENCH, INTERIM SVP & GENERAL COUNSEL	(i) (ii)	144,000 0	0 0	0 0	0 0	0 0	144,000 0	0 0
JEAN B GALLIPEAU, COMPTROLLER	(i) (ii)	169,027 0	0 0	32 0	15,787 0	6,612 0	191,458 0	0 0
DARYL J GROSS, VP AND SPECIAL ASSISTANT	(i) (ii)	590,049 0	218,333 0	25,238 0	26,000 0	34,741 0	894,361 0	0 0
J MICHAEL HAYNIE, VICE CHANCELLOR - IVMF	(i) (ii)	326,263 0	0 0	161 0	26,000 0	7,964 0	360,388 0	0 0
MARILYN R HIGGINS, VP COMMUNITY ENGAGE ECO DEV	(i) (ii)	218,007 0	0 0	816 0	22,300 0	9,651 0	250,774 0	0 0
REBECCA REED KANTROWITZ, SR VP & DEAN STUDENT AFFAIRS	(i) (ii)	195,467 0	0 0	32 0	20,200 0	20,831 0	236,530 0	0 0
RUTH E KAPLAN, VP FOR EXTERNAL AFFAIRS	(i) (ii)	273,314 0	0 0	99 0	26,000 0	22 0	299,435 0	0 0
GINA LEE-GLAUSER, VP FOR RESEARCH	(i) (ii)	239,735 0	0 0	32 0	24,644 0	16,794 0	281,205 0	0 0
ELIZABETH LIDDY, INTERIM V CHANCELLOR PROVOST	(i) (ii)	341,780 0	0 0	805 0	26,000 0	8,123 0	376,708 0	0 0
LOUIS G MARCOCCIA, EXECUTIVE VP AND CFO	(i) (ii)	531,998 0	0 0	90,463 0	114,000 0	17,702 0	754,163 0	88,000 0
LARRY MARTIN, VP PROGRAM DEVELOPMENT	(i) (ii)	158,528 0	0 0	0 0	16,162 0	7,740 0	182,430 0	0 0
DICKENS MATHIEU, SR VP & GENERAL COUNSEL	(i) (ii)	237,084 0	10,048 0	671,042 0	24,181 0	14,260 0	956,615 0	0 0
CHARLES P MERRIHEW, VP FOR ENGAGEMENT INITIATIVES	(i) (ii)	311,357 0	0 0	52 0	26,000 0	16,405 0	353,814 0	0 0
ELIZABETH O'ROURKE, SVP PRINCIPAL GIFTS/INT ADV	(i) (ii)	277,522 0	0 0	32 0	26,000 0	15,095 0	318,649 0	0 0

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
KEVIN C QUINN, SENIOR VP FOR PUBLIC AFFAIRS	(i) 275,524 (ii) 0	0 0	32 0	26,000 0	21,302 0	322,858 0	0 0
SAMUEL J SCOZZAFAVA JR, INTERIM CIO & VP IT SERVICES	(i) 180,493 (ii) 0	0 0	32 0	18,487 0	54,043 0	253,055 0	0 0
CHRISTOPHER M SEDORE, SR VP FOR ENROLLMENT MGMT	(i) 325,911 (ii) 0	0 0	32 0	26,000 0	40,868 0	392,811 0	0 0
DAVID J SMITH, TREASURER	(i) 223,816 (ii) 0	0 0	32 0	23,375 0	24,231 0	271,454 0	0 0
ERIC F SPINA, VICE CHANCELLOR AND PROVOST	(i) 478,879 (ii) 0	28,000 0	70,206 0	26,000 0	54,265 0	657,350 0	70,000 0
KENT SYVERUD, CHANCELLOR AND PRESIDENT	(i) 648,117 (ii) 0	50,000 0	44,884 0	66,000 0	105,224 0	914,225 0	0 0
MARY ANN TYSZKO, VP STRATEGIC BUS DEV & INNO	(i) 267,026 (ii) 0	0 0	52 0	26,000 0	12,113 0	305,191 0	0 0
JAMIE CYR, DIRECTOR - AUXILIARY SERVICES	(i) 182,949 (ii) 0	0 0	32 0	18,875 0	68,938 0	270,794 0	0 0
GEORGE M LANGFORD, DEAN - ARTS AND SCIENCES	(i) 398,905 (ii) 0	0 0	203 0	26,000 0	1,261 0	426,369 0	0 0
KARIN RUHLANDT, DEAN - ARTS AND SCIENCES	(i) 186,136 (ii) 0	0 0	310 0	19,549 0	23,779 0	229,774 0	0 0
RYAN WILLIAMS, ASSOC VP FOR ENROLLMENT MGMT	(i) 234,664 (ii) 0	0 0	32 0	23,970 0	13,905 0	272,571 0	0 0
JAMES A BOEHEIM JR, BASKETBALL HEAD COACH	(i) 1,735,411 (ii) 0	80,000 0	142,038 0	66,000 0	20,221 0	2,043,670 0	40,000 0
SCOTT SHAFER, FOOTBALL HEAD COACH	(i) 1,391,611 (ii) 0	56,000 0	24,888 0	26,000 0	24,447 0	1,522,946 0	0 0
JAMES B STEINBERG, DEAN - MAXWELL SCHOOL	(i) 505,166 (ii) 0	0 0	161 0	26,000 0	17,919 0	549,246 0	0 0
MELVIN T STITH, PROFESSOR	(i) 461,282 (ii) 0	0 0	100 0	26,000 0	9,449 0	496,831 0	0 0
KENNETH KAVAJECZ, DEAN - WHITMAN SCHOOL	(i) 444,305 (ii) 0	17,000 0	161 0	26,000 0	8,982 0	496,448 0	0 0
NANCY CANTOR, CHANCELLOR AND PRESIDENT	(i) 0 (ii) 0	600,000 0	223,959 0	796 0	0 0	824,755 0	216,000 0
REBECCA L FOOTE, COMPTROLLER	(i) 65,531 (ii) 0	0 0	128,614 0	6,708 0	14,448 0	215,301 0	0 0
DONALD A SALEH, VP FOR ENROLLMENT MGMT	(i) 135,731 (ii) 0	0 0	253,040 0	13,800 0	4,598 0	407,169 0	0 0
THOMAS J WALSH, EXEC VP FOR INST'L ADVANCEMENT	(i) 234,900 (ii) 0	50,000 0	225,056 0	24,209 0	21,475 0	555,640 0	163,423 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
SYRACUSE UNIVERSITY

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number
15-0532081

Part I

Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	CITY OF SYRACUSE IND DEV AGENCY	16-1231050	8717120BU	12-13-2005	80,000,000	CAPITAL IMPROVEMENT & ACQUISITION		X		X		X
B	CITY OF SYRACUSE IND DEV AGYONON CTY IDA	16-1231050	871720BZO	01-30-2008	105,000,000	CONSTRUCTION & EQUIPMENT		X		X		X
C	TRUST FOR CULTURAL RESOURCES CO OF ONONDAGA	80-0516646	68276FAL4	01-14-2010	40,896,714	MULTI-PURPOSE ISSUE - NON-REFUNDING		X		X		X
D	TRUST FOR CULTURAL RESOURCES CO OF ONONDAGA	80-0516646	68276FAL4	01-14-2010	70,440,000	MULTI-PURP ISSUE - REFUNDING BONDS		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	0		6,800,000		730,000		0	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	84,386,885		106,128,306		40,898,838		70,440,000	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	5,413,741		1,709,200		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	1,339,056		631,443		401,811		518,439	
8	Credit enhancement from proceeds	681,104		42,000		22,487		29,013	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	76,952,984		103,745,663		40,474,540		0	
11	Other spent proceeds	0		0		0		69,892,548	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2008		2010		2014		2010	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X	X	
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?	X		X		X			
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X		X		X		
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 127 %		0 %		0 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5	0 127 %							
7	Does the bond issue meet the private security or payment test?		X		X		X		
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X		X		
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X			

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?								
c	No rebate due?	X		X		X		X	
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X		X		X		X	
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X		X		X		X	
b	Name of provider	GOLDMAN SACHS		GOLDMAN SACHS		MORGAN STANLEY			
c	Term of hedge	30		30		20		20	
d	Was the hedge superintegrated?		X		X		X		X
e	Was the hedge terminated?		X		X		X		X

Part IV

Arbitrage (Continued)

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

Part V

Procedures To Undertake Corrective Action

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

Part VI

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

Return Reference	Explanation
SUPPLEMENTAL INFORMATION	SCHEDULE K, PART I, LINE B THIS FINANCING CONSISTED OF TWO BOND ISSUES THAT WERE SOLD AND ISSUED ON THE SAME DATE, PURSUANT TO A SINGLE PLAN OF FINANCING, WHICH ARE TREATED AS A SINGLE BOND ISSUE FOR TAX PURPOSES THE ISSUER NAME, EIN, AND CUSIP NUMBER FOR THE TWO ISSUES ARE AS FOLLOWS (A) ISSUER NAME (B) ISSUER EIN (C) CUSIP# AMOUNT CITY OF SYRACUSE INDUST DEV AGENCY 16-1231050 871720BZO \$70M ONONDAGA COUNTY INDUST DEV AGENCY 16-0193714 682747HG8 \$35M

Return Reference	Explanation
TOTAL PROCEEDS OF BOND ISSUE	SCHEDULE K, PART I, COLUMN E AND PART II, LINE 3 DIFFERENCES BETWEEN THE ISSUE PRICE IN PART I AND THE TOTAL PROCEEDS OF ISSUE IN PART II CONSIST SOLELY OF EARNINGS OF CASH WITH TRUSTEE BALANCES SPECIFIC AMOUNTS OF EARNINGS INCLUDED IN PART II NOT INCLUDED IN PART I ARE AS FOLLOWS COLUMN A 12/13/2005 ISSUE 4,386,885 COLUMN B 01/30/2008 ISSUE 1,128,306 COLUMN C 01/14/2010 ISSUE 2,124 COLUMN A 07/07/2011 ISSUE 9,029 COLUMN B 09/12/2013 ISSUE 28,246

Return Reference	Explanation
SCHEDULE K, PART III, COLUMN D	N/A-THIS ISSUE REFUNDED PRE-2003 BONDS SCHEDULE K, PART IV, COLUMN A, B, C AND D, LINE 2C CALCULATIONS WERE PERFORMED 11/30/2010, 12/31/2012, 12/31/2014 AND 12/31/2014 RESPECTIVELY SCHEDULE K, PART IV, COLUMN C, LINE 6 ALL PROCEEDS HAVE BEEN EXPENDED

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
SYRACUSE UNIVERSITY

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

15-0532081

Part I Bond Issues												
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	TRUST FOR CULTURAL RESOURCES CO OF ONONDAGA	80-0516646	68276FBJ8	07-07-2011	50,693,415	MULTI-PURPOSE ISSUE-NON-REFUNDING		X		X		X
B	TRUST FOR CULTURAL RESOURCES CO OF ONONDAGA	80-0516646	68276FCK4	09-12-2013	67,827,371	MULTI-PURPOSE ISSUE-NON-REFUNDING		X		X		X

Part II Proceeds									
		A		B		C		D	
1	Amount of bonds retired	3,310,000		1,385,000					
2	Amount of bonds legally defeased	0		0					
3	Total proceeds of issue	50,702,444		67,855,617					
4	Gross proceeds in reserve funds	0		0					
5	Capitalized interest from proceeds	0		0					
6	Proceeds in refunding escrows	0		0					
7	Issuance costs from proceeds	569,737		572,007					
8	Credit enhancement from proceeds	0		0					
9	Working capital expenditures from proceeds	0		0					
10	Capital expenditures from proceeds	50,132,707		26,208,561					
11	Other spent proceeds	0		0					
12	Other unspent proceeds	0		41,075,049					
13	Year of substantial completion	2015							
		Yes	No						
14	Were the bonds issued as part of a current refunding issue?		X		X				
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X			X				
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?	X		X					
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X		X				
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 301 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5			0 301 %					
7	Does the bond issue meet the private security or payment test?		X		X				
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV

Arbitrage

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

Part IV

Arbitrage (Continued)

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

Part V

Procedures To Undertake Corrective Action

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

Part VI

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

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2014

Open to Public Inspection

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

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

Name of the organization SYRACUSE UNIVERSITY	Employer identification number 15-0532081
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

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

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

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Total ▶ \$			
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Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		8,000	SCHOLARSHIP	SCHOLARSHIP

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V Supplemental Information

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

Return Reference	Explanation
BUSINESS TRANSACTIONS WITH INTERESTED PERSONS	PART IV DRUMLINS, INC 'S BOARD MEMBERS INCLUDE LOUIS G MARCOCCIA, DAVID J SMITH, JAMIE CYR AND JEAN B GALLIPEAU WHO DO NOT HAVE A PERSONAL INTEREST IN DRUMLINS BUT ARE OFFICERS OF SYRACUSE UNIVERSITY AND DRUMLINS INC THE ABOVE TRANSACTIONS WITH ALLIANCE ENERGY TRANSMISSION SYRACUSE, DANIEL J FRENCH & ASSOCIATES, LLC, FRENCH ALCOTT PLLC, HUEBER-BREUER CONSTRUCTION CO INC AND LOON CREEK PROPERTIES HAVE BEEN MANAGED IN ACCORDANCE WITH UNIVERSITY POLICIES AND FULLY COMPLIED WITH THE UNIVERSITY'S EXISTING CONFLICT OF INTEREST POLICY ALL TRANSACTIONS WERE ENTERED INTO AT ARM'S LENGTH AND PAYMENTS FOR SERVICES WERE AT FAIR MARKET VALUE

Additional Data

Software ID:
Software Version:
EIN: 15-0532081
Name: SYRACUSE UNIVERSITY

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) HUBERT BROWN	SPOUSE- NICOLE BROWN	119,451	UNIV EMPLOYEE - ASSOC DEAN		No
(2) RUTH CHEN	SPOUSE - KENT SYVERUD	96,825	UNIV EMPLOYEE - PROFESSOR		No
(3) KATHERINE DOPULOS	DAUGHTER- CHRISTINE LARSEN	40,432	UNIV EMPLOYEE -ADM COUNSELOR		No
(4) STEPHEN DORUS	SON IN LAW- MACNAUGHTON	88,357	ASSOC PROFESSOR BIOLOGY		No
(5) SAM EDELSTEIN	SON - DAVID EDELSTEIN	45,968	ASSOC DIR - REG PGMS & ENG		No
(6) ULRICH B ENGLISH	SPOUSE-KARIN RUHLANDT	74,100	UNIV EMP-RESEARCH SCIENCE		No
(7) MARK N GLAUSER	SPOUSE- GINA LEE- GLAUSER	185,648	UNIV EMPLOYEE - ASSOC DEAN		No
(8) LAEL GROSS	SPOUSE-DARYL GROSS	79,494	UNIV EMPLOYEE-ASST ATH DIR		No
(9) SYLVIA T LANGFORD	SPOUSE- GEORGE LANGFORD	129,046	UNIV EMPLOYEE - ASSOC VP		No
(10) JOHN LIDDY	SON- ELIZABETH LIDDY	50,070	UNIV EMPLOYEE - PROG MGR		No
(11) CHRISTOPHER C MERRIHEW	SON - CHARLES MERRIHEW	37,761	UNIV EMPLOYEE - SUPERVISOR		No
(12) ERIC S SEDORE	BROTHER- CHRIS SEDORE	143,529	UNIV EMPLOYEE - DIRECTOR ITS		No
(13) JAMES STEINBERG	SPOUSE- SHERBURNE ABBOTT	519,180	UNIV EMPLOYEE DEAN/PROFESSOR		No
(14) MARGARET WALSH	DAUGHTER-THOMAS WALSH	18,603	UNIV EMPLOYEE - TEMP LIBRARY		No
(15) WAYNE WESTERVELT	BROTHER IN LAW - J CYR	23,583	UNIV EMPLOYEE-DIR COMM/SVCS		No
(16) DRUMLINS INC	BOARD MEMBERS	953,342	DINING AND RECREATION SERVICES		No
(17) ALLIANCE ENERGY TRANSMISSION SYRACU	TRUSTEE- SAMUEL G NAPPI	1,120,434	DESIGN & ENGINEERING SERVICES		No
(18) DANIEL J FRENCH ASSOCIATES LLC	OFFICER - DANIEL FRENCH	187,000	LEGAL SERVICES		No
(19) FRENCH ALCOTT PLLC	OFFICER - DANIEL FRENCH	117,900	LEGAL SERVICES		No
(20) HUEBER- BREUER CONSTRUCTION COINC	TRUSTEE- JAMES BREUER	77,379,996	CONSTRUCTION SERVICES		No
(21) LOON CREEK PROPERTIESPECK HALL	TRUSTEE- JOSHUA H HEINTZ	477,000	LEASE PMT/LEASEHOLD IMPROV		No

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
SYRACUSE UNIVERSITY

Employer identification number
15-0532081

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	1	200,000	APPRAISED VALUE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		16,407	APPRAISED VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	193	6,865,920	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (SPONSORED EQUIP)	X	38	1,039,676	MARKET VALUE
26 Other ► (SPONSORED BLDGS)	X	10	5,137,326	MARKET VALUE
27 Other ► ()				
28 Other ► ()				

29

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

1

30a

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

30a

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

32a

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

32a

No

b

If "Yes," describe in Part II

33

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

Part II

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

Return Reference	Explanation
NUMBER OF CONTRIBUTIONS	PART I, COLUMN B SYRACUSE UNIVERSITY IS REPORTING THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN B

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization SYRACUSE UNIVERSITY	Employer identification number 15-0532081
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Return Reference	Explanation
VOLUNTEERS	FORM 990, PART I, LINE 6 VOLUNTEERS ARE INDISPENSABLE TO THE UNIVERSITY IN THE ACCOMPLISHMENT OF THE UNIVERSITY'S EDUCATIONAL MISSION THE BOARD OF TRUSTEES IS COMPRISED OF INDIVIDUALS WHO GIVE OF THEIR TIME, ENERGY AND TALENTS TO PROVIDE GUIDANCE FOR THE EFFICIENT AND EFFECTIVE GOVERNANCE OF THE UNIVERSITY STUDENTS AND STAFF VOLUNTEER THEIR TIME AND EFFORT IN ACTIVITIES SUCH AS HELPING FRESHMEN STUDENTS MOVE INTO DORMITORIES AND ACQUAINTING THEM WITH THE CAMPUS STUDENTS ALSO ASSIST IN DEVELOPMENT ACTIVITIES, SUCH AS THE ANNUAL "TELEFUND", TO RAISE FUNDS NEEDED TO SUPPORT THE UNIVERSITY'S EDUCATIONAL MISSION

Return Reference	Explanation
OTHER PROGRAM SERVICES	FORM 990, PART III, LINE 4D OTHER PROGRAM SERVICE EXPENDITURES SUPPORT THE UNIVERSITY'S ACADEMIC AND RESEARCH INITIATIVES THROUGH PROVISION OF ACADEMIC SUPPORT, STUDENT SERVICES AND GENERAL INSTITUTIONAL SUPPORT, THE CRITICAL COMPONENTS TO SEAMLESS DELIVERY AND TO MEETING THE NEEDS AND EXPECTATIONS OF SYRACUSE UNIVERSITY'S STUDENTS AND FACULTY

Return Reference	Explanation
BUSINESS RELATIONSHIPS	FORM 990, PART VI, SECTION A, LINE 2 LOUIS G MARCOCCIA, DAVID J SMITH, JAMIE CYR AND JEAN B GALLIPEAU HAVE A BUSINESS RELATIONSHIP AS THEY ARE OFFICERS OF SYRACUSE UNIVERSITY AND DRUMLINS, INC TRUSTEES LAURIE B TAISHOFF AND ROBERT P TAISHOFF HAVE A FAMILY RELATIONSHIP

Return Reference	Explanation
REVIEW PROCESS	<p>FORM 990, PART VI, SECTION B, LINE 11B THE UNIVERSITY PROVIDED ITS SUBSTANTIALLY COMPLETE FORM 990 TO MEMBERS OF THE TRUSTEES AUDIT COMMITTEE AND COMPENSATION COMMITTEE. ACCOMPANYING THE 990 WAS A REPORT HIGHLIGHTING IMPORTANT SECTIONS, DATA AND POINTS, AND CHANGES FROM THE PREVIOUS FORM 990. A CONFERENCE CALL WITH THESE COMMITTEE MEMBERS WAS HELD WITH THE UNIVERSITY'S CHANCELLOR AND PRESIDENT AND EXECUTIVE VICE PRESIDENT AND CHIEF FINANCIAL OFFICER TO REVIEW THE FORM AND SUMMARY REPORT. THIS REVIEW INCLUDED A WALKTHROUGH OF THE FORM AND SCHEDULES WITH DIALOGUE ON SIGNIFICANT ITEMS AND POINTS AND A FURTHER EXPANSION OF INFORMATION PROVIDED IN THE SUMMARY REPORT. QUESTIONS WERE ADDRESSED AS RAISED BY COMMITTEE MEMBERS. ONCE FINALIZED, THE COMPLETE COPY OF THE UNIVERSITY'S FINAL FORM 990 (INCLUDING ALL REQUIRED SCHEDULES, AS ULTIMATELY FILED WITH THE IRS) IS PROVIDED TO EACH VOTING MEMBER OF THE BOARD THROUGH A SECURED SYRACUSE UNIVERSITY BOARD OF TRUSTEES WEB PORTAL BEFORE ITS FILING WITH THE IRS.</p>

Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12C THE UNIVERSITY'S REGULAR AND CONSISTENT MONITORING AND ENFORCEMENT COMPLIANCE OF THE CONFLICT OF INTEREST POLICY ARTICLE XI OF THE UNIVERSITY'S BY LAWS REQUIRE AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE BE COMPLETED BY EACH TRUSTEE AND OFFICER ADDITIONALLY , THE UNIVERSITY REQUIRES KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND OTHER IDENTIFIED EMPLOYEES AND GROUPS OF EMPLOYEES TO COMPLETE THE CONFLICT OF INTEREST QUESTIONNAIRE ALL COMPLETED QUESTIONNAIRES ARE REVIEWED BY THE DIRECTOR OF AUDIT AND MANAGEMENT ADVISORY SERVICES, THE COMPTROLLER ALSO REVIEWS THOSE OF TRUSTEES, OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES CONFLICTS ARE AGGREGATED INTO A REPORT WHICH IS PROVIDED TO THE EXECUTIVE VICE PRESIDENT AND CHIEF FINANCIAL OFFICER AND THE AUDIT COMMITTEE

Return Reference	Explanation
COMPENSATION POLICY	<p>FORM 990, PART VI, SECTION B, LINE 15 COMPENSATION FOR THE CHANCELLOR AND PRESIDENT, OFFICERS, KEY EMPLOYEES AND CERTAIN OTHER COVERED INDIVIDUALS IS ESTABLISHED ACCORDING TO UNIVERSITY POLICIES THAT MEET THE THREE REQUIREMENTS OF THE REBUTTABLE PRESUMPTIONS PROVISIONS UNDER TREAS REG 53 4958-6 THE COMPENSATION ARRANGEMENT IS APPROVED IN ADVANCE BY THE UNIVERSITY'S COMPENSATION COMMITTEE WHO ARE INDEPENDENT AND FREE OF ANY CONFLICTS OF INTEREST THAT WOULD INTERFERE WITH THEIR EXERCISE OF INDEPENDENT JUDGMENT THE UNIVERSITY'S COMPENSATION COMMITTEE REVIEWS COMPARABILITY DATA PROVIDED BY AN INDEPENDENT EXTERNAL CONSULTANT THAT INCORPORATES BOTH UNIVERSITY DATA AND THAT OF COMPARABLE INSTITUTIONS THE COMPENSATION COMMITTEE, WHICH TYPICALLY SEEKS TO ESTABLISH COMPENSATION WITHIN THE MIDDLE OF THE RANGE OF COMPARABILITY DATA, MAKES A RECOMMENDATION TO THE UNIVERSITY'S EXECUTIVE COMMITTEE WHO THEN MAKES A DETERMINATION WHETHER THE PROPOSED COMPENSATION IS REASONABLE IF A PROPOSAL IS DEEMED TO BE REASONABLE, THE EXECUTIVE COMMITTEE ADEQUATELY DOCUMENTS THE BASIS FOR ITS DETERMINATION WITHIN 60 DAYS AFTER THE DATE THE DETERMINATION WAS MADE AND SUCH DOCUMENTATION IS KEPT IN THE WRITTEN OR ELECTRONIC RECORDS OF THE EXECUTIVE COMMITTEE</p>

Return Reference	Explanation
JOINT VENTURE	<p>FORM 990, PART VI, SECTION B, LINE 16A JPMORGAN CHASE & CO AND SYRACUSE UNIVERSITY ESTABLISHED A UNIQUE CORPORATE-UNIVERSITY COLLABORATION THE PURPOSE OF THE COLLABORATION IS TO DEVELOP EDUCATION AND WORK EXPERIENCE INNOVATIONS IN THE AREA OF FINANCIAL SERVICES INFORMATION TECHNOLOGY , LEVERAGING EACH OTHER'S KNOWLEDGE AND EXPERTISE IN THE BUILDING OF A BEST IN CLASS CURRICULUM FOR ENTRY LEVEL TECHNOLOGISTS AND TO COLLABORATE ON PROJECTS OF JOINT INTEREST THAT PROVIDE VALUE TO BOTH ORGANIZATIONS AND TO SOCIETY EMPLOYEES OF JPMORGAN CHASE & CO ARE JOINING WITH SYRACUSE UNIVERSITY FACULTY AND STUDENTS TO CREATE A COMPREHENSIVE, INTERDISCIPLINARY CURRICULUM FOCUSED ON THE FIELDS OF GLOBAL ENTERPRISE TECHNOLOGY SYSTEMS SYRACUSE UNIVERSITY JOINED THE CENTER FOR APPLIED IDENTITY MANAGEMENT RESEARCH (CAIMR) CAIMR IS DEDICATED TO SOLVING SOCIETY'S MOST CRITICAL IDENTITY MANAGEMENT CHALLENGES THROUGH APPLIED RESEARCH</p>

Return Reference	Explanation
PUBLIC DISCLOSURE	FORM 990, PART VI, SECTION C, LINE 19 THE UNIVERSITY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC ON THE UNIVERSITY'S WEBSITE

Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 9 POSTRETIREMENT BENEFIT OBLIGATION (\$1,814,358)

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
SYRACUSE UNIVERSITY

Employer identification number
15-0532081

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) SU SHERATON HOTEL & CONFERENCE CENTER 801 UNIVERSITY AVE SYRACUSE, NY 13210 16-1586346	ACCOMODATION	NY	13,395,098	15,198,001	SU
(2) ORANGE INSURANCE COMPANY LLC 100 BANK ST STE 610 BURLINGTON, VT 05401 47-3844706	INSURANCE	VT	0	0	SU

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) CONSURTIO INC 721 UNIVERSITY AVE SYRACUSE, NY 13244 47-2527854	EDUCATION	DE	501(C)(3)	9	SU	Yes	
(2) SU ALUMNI ASSOCIATION INC 401 UNIVERSITY PLACE SYRACUSE, NY 13244 16-1431749	ALUMNI ACTVTY	NY	501(C)(3)	11A	SU	Yes	
(3) SYRACUSE UNIVERSITY (USA LONDON) 48 OLD GLOUCESTER ST LONDON WC1N 38E UK	EDUCATION	UK	N/A	N/A	SU	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropportionate 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.

(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
See Additional Data Table									

Part V

Transactions With Related Organizations

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

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

Yes

No

1a Yes

1b No

1c Yes

1d No

1e No

1f No

1g No

1h No

1i No

1j Yes

1k Yes

1l No

1m Yes

1n No

1o Yes

1p Yes

1q Yes

1r Yes

1s No

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

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

Schedule R (Form 990) 2014

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) 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		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation
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Additional Data

Software ID:
Software Version:
EIN: 15-0532081
Name: SYRACUSE UNIVERSITY

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								
DRUMLINS INC 800 NOTTINGHAM RD SYRACUSE, NY 13224 15-0516881	DINING/REC	NY	SYRACUSE UNIV	C Corp	1,477,911	5,432,778	100 000 %	Yes	
BLUE HIGHWAY INC 2-212 CST SYRACUSE, NY 13244 45-2400613	PROFESSIONAL	NY	SYRACUSE UNIV	C Corp	1,018	0	100 000 %	Yes	
SYRACUSE IDEAS INC 254 HINDS HALL SYRACUSE UNIVERSITY SYRACUSE, NY 13244 46-2339155	EDUCATIONAL	NY	SYRACUSE UNIV	C Corp		2,000	100 000 %	Yes	
SU ISTANBUL EGITIM DESTEK VE DANISMA HIZMETLERI TICARET LTD SIRK TU	EDUCATIONAL	TU	SYRACUSE UNIV	C Corp	1,507,040	1,250,521	99 500 %	Yes	
CHARITABLE REMAINDER ANNUITY TRUST (4)	CRAT	NY	SYRACUSE UNIV	Trust				Yes	
CHARITABLE REMAINDER TRUST (2)	CRT	NY	SYRACUSE UNIV	Trust				Yes	
CHARITABLE REMAINDER UNITRUST (5)	CRUT	NY	SYRACUSE UNIV	Trust				Yes	
CHARITABLE REMAINDER UNITRUST (1)	CRUT	FL	SYRACUSE UNIV	Trust				Yes	
NET INCOME CHAR REM UNITRUST (1)	NICRUT	PA	SYRACUSE UNIV	Trust				Yes	

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

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
DRUMLINS INC	p	361,765	COST
DRUMLINS INC	r	234,350	COST
DRUMLINS INC	k	100,443	COST
DRUMLINS INC	m	328,867	COST
DRUMLINS INC	q	75,001	COST
DRUMLINS INC	a(i)	4,721	COST
SU ISTANBUL EGITIM DESTEK VE DANISMA	R	180,390	COST
SU LONDON USA	R	5,489,384	COST