Return of Organization Exempt From Income Tax

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OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For the	e 2016 cal	endar year, or tax year b	eginning	7/1	1/2016	, an	d endin	g	6/30/2	2017			
В	Check If	applic≆ble	C Name of organization	_New_Jersey in	novation Inst	titute, Inc			D En	iployer ide	entification n	umber		
	Address	change	Doing business as											
	Name ch	nange	Number and street (or P C			treet address)	Room/suit	e		<u>42118</u>				
\equiv		- 1	c/o NJIT, 323 Martin L	uther King Jr			<u> </u>		E Te	lephone nu	ımber			
Ш	Initial ret	urn	City or town			State	ZIP code		(973) 596-5800					
	Final return	n/terminated	Newark Foreign country name			NJ	07102		_					
一	Amende	d roturn	Foreign country name	Foreign	province/state/	county	Foreign po	stai code		oss receipt	- ¢	19.0	77,668	
므	Amende	a return		-				1	G GI	JSS receipt	.S I			
Ш	Applicati	on pending	F Name and address of prin	cipal officer				H(a)	ls this a grou	return for s	subordinates?	Yes	X No	
			Donald H Sebastian,	Same as C a	bove			H(b)	Are all sub	ordinates ii	ncluded?	Yes	No	
1 -	Fax-exem	npt status	X 501(c)(3) 501(c)	() <	(insert no)	4947(a)(1)	or (52	365)	If "No," atta	ach a list (see instruction	ns)		
<u>J</u> 1	Vebsite	e: Nww	v njii com	···	<u> </u>			~	Group exe	motion nun	nher 🕨			
		organization		ust Associa		er ▶	١.							
_				ust		EI -	 	Year of fo	omation	2014	M State of le	yai uumicile	NJ	
- 1	art I		nmary	-l		644:4:4				-4 1	.4.44 . 1			
Ģ	1	-	escribe the organizatio		_					ation ins	stitute, Inc			
auc			an innovative research				researcn,	educa	tion,					
Governance	_		ic development and urb											
ŏ	2		an 25% d	of its net as	its net assets									
Ű			of voting members of t			•	•			<u> Li</u>	3	f		
S	4		of independent voting		-			•			4		13	
į	5		mber of individuals em	•	•	:016 (Part V	', line 2a)			_	5		161	
Activities &	6		mber of volunteers (est		• '	•					6 ′a	,	0	
⋖	7a												0	
	b	Net unre	elated business taxable	income from	Horm 990-1	1 line.34)		- 1			b		0	
	١.	Comtribe	tions and areats (Dart)			-	၂ပ္က	-	Prior \			urrent Yea		
Revenue	8 9		itions and grants (Part ' i service revenue (Part		MAY 3	0 2018	Ö			0,322,6			64,213	
Ver	10	_	ent income (Part VIII, c	[RS			859,8	0		13,455	
æ	11		venue (Part VIII, colum					<u> </u>			0			
	12							-		1,182,4		10.0	77 660	
	13		Total revenue—add lines 8 through 11 (must equal Part VIII Ecolumn (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3)							1,322,4			77,668 42,379	
	14	Benefits paid to or for members (Part IX, column (A), line 4)								1,022,7	0 042,37			
so	14-		other compensation, emp				s 5–10)		-	5,594,5	<u> </u>			
Expenses	16a		onal fundraising fees (F				,	ļ		0,00 1,0	0	0,0	0	
ē	b		draising expenses (Pa			•		0			* /-		<u> </u>	
Ж	17		penses (Part IX, colum							4,088,4	88	7 7	14,898	
	18		penses Add lines 13-1				ne 25)		1	1,005,5			93,995	
	19		e less expenses Subtra							176,9			B3,673	
5								Beg	inning of C			nd of Year	,	
sets	20	Total as:	sets (Part X, line 16)							2,815,6	62	3,5	83,635	
Net Assets or	21	Total lial	oilities (Part X, line 26)							2,747,4	10	2,7	31,710	
ž	22	Net asse	ets or fund balances Si	ubtract line 21	from line 2	.0				68,2	52	8	51,925	
	irt II		nature Block											
			, I declare that I have examine											
anu	bener, it	is true, corre	ct, and complete Declaration	or preparer (other	than onicer) is	based on all in	normation o	i wnich pr	eparer nas	Mac		. 102		
Sig	jn	 	Signature of officer	<u></u>		-	· · · · · · · · · · · · · · · · · · ·			Date (15,20	118		
He	re		Donald H Sebastian, F	President & C	EΩ					Date 0	,			
			Type or print name and title	resident & C										
			Type preparer's name		Preparer's sign	ature		1	Date	1	P	TIN		
Pa	id									Chec	k ll ıf			
	eparer	·			SELF-PREF	PARED RET	URN			self-e	employed			
	e Only	I 1	s name 🕨						Fırm's E	EIN 🕨				
			s address 🕨						Phone	no				
Ma	y the IF	RS discus	s this return with the pr	eparer showr	above? (se	ee instructio	ns)					Yes [No	
_			ection Act Notice, see the	 			<u> </u>		-			Form 99		

orm 9	90 (2016)	New Jersey Innovation Institute, Inc.	<u>47-1042118</u>	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III		X
1 `	Briefly d	escribe the organization's mission:		
		sey Innovation Institute, Inc. (NJII) is an innovative research organization		
	dedicate	ed to scientific research, education, economic development and urban revitalization		
	within N	ew Jersey.		
2		organization undertake any significant program services during the year which were not listed on		
		r Form 990 or 990-EZ?	Yes	X No
	If "Yes,"	describe these new services on Schedule O.		
3	Did the	organization cease conducting, or make significant changes in how it conducts, any program		
		s?	· · TYes	X No
	If "Yes,"	describe these changes on Schedule O.		
4		e the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and		
	•	l expenses, and revenue, if any, for each program service reported.		,
		The second of th		
4a	(Code.) (Expenses \$ 13,148,722 including grants of \$ -149,247) (Revenue	e \$ 2.181	1.811)
••	Healtho	are Delivery Systems iLab - See Schedule O for Description.		1211./
4b	(Code:) (Expenses \$ 1,339,602 including grants of \$ 863,507) (Revenu	 e \$)
	Techno	logy & Enterprise Development iLab - See Schedule O for Description.		/
				·
				•
4c	(Code:) (Expenses \$ 1,140,829 including grants of \$ 128,119) (Revenu	e \$ 31	1 644)
70		e & Homeland Security (Lab - See Schedule O for Description.	· · · · · · · · · · · · · · · · · · ·	1417./
	Deleijo	5 4 Tomoland Occurry ILab - Oce Odreddie O for Description.		
	~			
4d	-	rogram services. (Describe in Schedule O.)		
	(Expens	ses \$ 1,035,781 including grants of \$ 0) (Revenue \$	0)	
40	Total pr	ogram service expenses 16 664 934		

YOUI YRO

Checklist of Required Schedules Part IV Yes No 1 . Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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. Х 5 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 6 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . 10 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 Х b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 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 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E....... 13 14a Did the organization maintain an office, employees, or agents outside of the United States?... 14a 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 Χ 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 Х 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 Х 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 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Х

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

Form **990** (2016)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Χ	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Χ	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Χ
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	i i		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or]		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		_ <u>X</u>
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	1		.,
~=	disqualified persons? If "Yes," complete Schedule L, Part II	26		_ <u>X</u> _
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	} }		
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	121		
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i> Schedule L, Part IV	28b	х	İ
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	-^-	
U	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	-		
-	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?]		_
	If "Yes," complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		- {	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	ا ۔ . ا		
05-	III, or IV, and Part V, line 1	34	_X_	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	256	ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35b		
J0	organization? If "Yes," complete Schedule R, Part V, line 2	36)	Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part]]	ļ	
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	\Box		<u> </u>
-	19? Note, All Form 990 filers are required to complete Schedule O	38	x l	

Pan	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			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 161			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			_
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts		1	
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		i i
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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	- 15		
·	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		^
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization receive any folias, directly of indirectly, to pay premiums on a personal benefit contract?	7f		$\frac{\hat{x}}{x}$
-	If the organization, during the year, pay premiums, directly of indirectly, or a personal benefit contract?			- -
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
h	· · · · · · · · · · · · · · · · · · ·			
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
a	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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			i
	against amounts due or received from them.)			i
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O	, ,	.	
b	Enter the amount of reserves the organization is required to maintain by the states in which	,]	ļ	
	the organization is licensed to issue qualified health plans	. !		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	l	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part V!

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1	5		
	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		İ '	İ
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		_X
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	'	$x_{\scriptscriptstyle{-}}$
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	1	X
6	Did the organization have members or stockholders?	6	Х	
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	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
_	stockholders, or persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following.		[
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b		X
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	[х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	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		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	· · · · · · · · · · · · · · · · · · ·	12a	Х	}
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			, — -
	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?	1		
а	The organization's CEO, Executive Director, or top management official.	15a	Х	
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NJ			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501)	c)(3)s	only)	
	available for public inspection Indicate how you made these available Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interes	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 record			
	Brian J Kirkpatrick, Assc VP Accounting & Treasury Mgmt (973) 596-342	7 		
	c/o NJIT, University Heights, 580 Fenster Hall, Newark, NJ 07012			

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	. []

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(C) Position										
(A) Name and Title	(B) Average hours per	(do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Bloom, Joel S.	1.00							_		
Chairman	34 00			Х			_	0	828,748	24,664
(2) Stern, Holly C.	1.00		}						}	
Secretary (Non-voting)	34.00		-	Х				0	291,923	23,398
(3) Blank, Kenneth	1.00						İ			
Director	0.00		ļ		_		_	0	0	0
(4) DeCaprio, Vincent	1 00							_		_
Director	0.00				-		<u> </u>	0	0	0
(5) Deek, Fadı P.	1.00									
Director	34.00		╁		<u> </u>	<u> </u>	<u> </u>	0	434,528	13,935
(6) DeNichilo, Nicholas						1				_
Director Freih	0.00		├		├-		_	0	0	0
(7) DeRocco, Emily					ļ	,	ļ			•
Director Debbie	0.00	Х	┼─		├	-		0	0	0
(8) Hart, Debbie	1.00	х	ľ			1		,	1	
Director	0.00		┼─		├─	-		0	0	0
(9) Hendricks, Rochelle R. Director	1 00 0.00							0	o	0
(10) Molloy, Christopher J.	1.00		}_		-				 	0
Director	000				ŀ			٥ ا	o	. 0
	1.00		╁		-					
(11) Paranicas, Dean Director	0 00							0	l	0
(12) Pyrovolakis, John	1.00	· ·	┢	_	\vdash			<u>-</u>	<u>-</u>	<u> </u>
Director	0.00	Х	Į		ļ	,		0	l ol	0
(13) Sugla, Binay		_			\vdash			-	<u>"</u>	<u>~</u>
Director	0.00							o	l ol	0
(14) Taylor, Joseph M.	1.00	_								
Director	0.00							o	ol	0
										- 000

Form **990** (2016)

Part VII Section A. Officers, Directors, 1	rustees, Ney Er	npio	yee	<u>s, a</u>	<u>na</u>	High	est	Compensated	Employees (contin.	ued)	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do n	not ch unles	Pos eck s pe	ition more rson	n of structure Highest compensated the structure employee	one	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC) 0	(F) Estimate amount other ompensa from the organizate and relate a	of ation ie tion ted
(15) Brown, Michele Director	1.00	1					\vdash	0		0		
(16) Siekerka, Michele Director	1.00			_				0		0		0
(17) Sebastian, Donald H. President & CEO	17.50 17 50			Х		_		0	<u> </u>			2,625
(18) Franklin, Timothy V. Sr VP, COO & Treasurer				Х				0				<u>2,217</u>
(19) Gregorio, Tomas Sr Exec Dir Healthcare Systems iLab	35.00 0 00	1				X		239,194	3,60			0,502
(20) Cochinwala, Munir Exec Director & Chief Scientist	35 00 0.00	•				X		220,635		0		8,185
(21) Motyka, Thomas Sr Exec Director SMART iLab	35.00 0.00					Х		_205,748		0		9,500
(22) Nikolaou, George Exec Dir Fıra Svcs Innovation	35.00 0.00					Х		228,914		0	2:	2,189
(23) O'Byrne, William Exec Director SE Region HCDS	35.00 0.00					Х		177,619		0	1;	2,463
(24) Celiano, Edward Exec Director, Unmanned Air	35.00 0.00					X		177,561		0	2	3,592
	0.00		ļ			Х	Ĺ	175,899		0		1,196
c Total from continuation sheets to Part VII,		•					•	1,425,570 477,444		0	64	4,466 4,470
d Total (add lines 1b and 1c). 2 Total number of individuals (including but not reportable compensation from the organizatio		listed	d ab				ceiv	1,903,014 ed more than \$		<u>1,</u>		<u>8,936</u>
Teportable compensation from the organization			<u>'</u>	<u> </u>							Yes	No
3 Did the organization list any former officer, di employee on line 1a? If "Yes," complete Sche	•			•	yee	, or h	igh	est compensate	d	3	1.50	X
4 For any individual listed on line 1a, is the sum the organization and related organizations gre	of reportable co	ompe	nsa	tion				•				
individual									 ndividual	4	X	
for services rendered to the organization? If " Section B. Independent Contractors	res, complete s	Scrie	aure	JI	or s	ucn p	<u>ers</u>	on	· · · · ·	5	Т	X
Complete this table for your five highest compensation from the organization. Report of year.											ax	
(A) Name and business add	lress							(B) Description of sen	vices		C) ensation	I
	Building, Suite					J 07					1,070),916
	Suite 206 News		<u> 11 0</u>	710	3_			ctronic patient c				3,606
	aritan, NJ 08869							nsultant for HIP/				9,700
TP-ACO LLC 8550 United Pl	aza Blvd Ste 702	z Bat	on I	<u>tou</u>	ge,	LA /	out	ocontractor for P	ractice I		117	7 <u>,310</u> 0
Total number of independent contractors (incl more than \$100,000 of compensation from the	_	nited	to ti	nose	e lis	ted a	bov	re) who received	1			

Continuation Sheet for Form 990

Page 1 of _1

Name of the Organization

Employer Identification number

47-1042118

New Jersey Innovation Institute, Inc.

Part VII Section A Continu

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Emp	oyees (B)		_		C)		 (D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below dotted line)	Individual trustee or director		Officer		Highest compensated employee	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(26) Bartiromo, Thomas Chief Technology Officer HCDS iLab	35 00 0 00	1				х	174,795	0	23,158
(27) Novak, John Sr Director Arch Gov and Tech	35 00 0.00					х	153,971		
(28) White, Norma Director Clinical Operations	35.00 0.00					х	148,678	0	13,619
(29)								_	
(30)									
(31)									
(32)									
(33)									
(34)									
(35)	• • • • • • • • • • • • • • • • • • • •								
(36)									
(37)								_	
(38)									
(39)		ļ 							
(40)								·	
(41)									
(42)									
(43)						<u> </u>			
(44)									
(45)									
(46)									

raru	VIII	Check if Schedule O contains a response or note to any line	ın 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
s s	1a	Federated campaigns 1a 0			!	
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues				
ق ق	C	Fundraising events 1c 0				
ar A	d	Related organizations 1d 2,391,129				
S, E		Government grants (contributions) 1e 13,182,550				
it i	f	All other contributions, gifts, grants, and				
를 됨		similar amounts not included above 1f 1,190,534				
E E	g	Noncash contributions included in lines 1a-1f: \$0				1
	<u>h</u>	Total. Add lines 1a–1f	16,764,213			<u> </u>
활		Business Code)
Ę ,	2a	Healthcare System Innovation iLab 541610	2,213,455	2,213,455		
8	þ		0			<u> </u>
$\frac{5}{2}$	С		0		 -	 -
Ser	d		0			
Ē	e		0			
Program Service Revenue	f	All other program service revenue	0			ļ
	_ g	Total. Add lines 2a–2f ▶	2,213,455			
,	3	Investment income (including dividends, interest, and	ا			
1		other similar amounts)	0			
1	4 5	Income from investment of tax-exempt bond proceeds	0			
	9	(i) Real (ii) Personal				
	6a	Gross rents	İ			
	b	Less: rental expenses	•			
	C	Rental income or (loss)				
	ď	Net rental income or (loss)	اه			
	7a	(i) Convention (ii) Other				
		assets other than inventory 0 0				
	ь	Less cost or other basis				
	-	and sales expenses 0 0				
	c	Gain or (loss) 0 0				
	ď	Net gain or (loss)	o			
	}					
Other Revenue	8a	Gross income from fundraising				
Š.		events (not including \$0 of contributions reported on line 1c).				
ď	ļ	See Part IV, line 18 a0				
Pe .	<u> </u>	Less. direct expenses				
ಕ	C		o			į
		Gross income from gaming activities.				
	""	See Part IV, line 19				
	ь	Less: direct expenses b0				1
		Net income or (loss) from gaming activities	o			
	1	Gross sales of inventory, less				1
		returns and allowances a 0				
	Ь	Less: cost of goods sold b0		ļ		1
		Net income or (loss) from sales of inventory	0			İ
		Miscellaneous Revenue Business Code				
	11a		0			
	b		0			
	C		0			
	ď	All other revenue	0			
	e	Total. Add lines 11a–11d	0		·	ļ
	12	Total revenue. See instructions	18,977,668	2,213,455		0

New Jersey Innovation Institute, Inc. Statement of Functional Expenses Part IX

Section	on 501(c)(3) and 501(c)(4) organizations must complete all				<u>A).</u>
`	Check if Schedule O contains a response or note	to any line in this I	Part IX	· · · ·	<u> </u>
	not include amounts reported on lines 6b, 7b, 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				
	domestic governments. See Part IV, line 21	842,379	842,379		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign	1	Í		
	organizations, foreign governments, and foreign	İ	İ	ì	
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,	ļ	,	1	
	trustees, and key employees	0		0	
6	Compensation not included above, to disqualified]	J	}	
	persons (as defined under section 4958(f)(1)) and		ĺ	ļ	
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	7,950,221	7,126,114	824,107	
8	Pension plan accruals and contributions (include	Ì	f	Ì	
	section 401(k) and 403(b) employer contributions)	425,590	391,569	34,021	
9	Other employee benefits	373,483	446,523		
10	Payroll taxes	887,424	862,318	25,106	
11	Fees for services (non-employees):	ļ.	Į		
а	Management	0			
b	Legal	71,404	14,370	57,034	
С	Accounting	46,605		46,605	
ď	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	<u>51,518</u>	20,008	31,510	
13	Office expenses	125,948	83,739	42,209	
14	Information technology	579,308	539,177	40,131	
15	Royalties	0			
16	Occupancy	186,578	186,578	0	
17	Travel	131,081	103,146	27,935	
18	Payments of travel or entertainment expenses		1		
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	60,820	32,821	27,999	
20	Interest	0			
21	Payments to affiliates	48,594		48,594	
22	Depreciation, depletion, and amortization	12,341	12,341	0	0
23	Insurance	82,744	9,283	73,461	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column		1	[
_	(A) amount, list line 24e expenses on Schedule O.)	E 770 204	E 050 507	118,724	
a	Grant subcontracts & consulting/professional services	5,778,321	5,659,597		
b	Bad debt expense	250,300	250,300 18,971	203,020	
C	Miscellaneous	221,991		1,645	
d	Membership dues	55,275	53,630 12,070	1,045	
e 25	All other expenses Small equipment	12,070		1 520 064	
25	Total functional expenses. Add lines 1 through 24e.	18,193,995	16,664,934	1,529,061	0
26	Joint costs. Complete this line only if the	ļ	ł	1	
	organization reported in column (B) joint costs	Ĺ		(
	from a combined educational campaign and	ĺ	ļ	ĺ	
	fundraising solicitation. Check here if	i	1		
	following SOP 98-2 (ASC 958-720)				Form 990 (2016)
					1 31111 444 (4010)

Par	t X	Balance Sheet					
		Check if Schedule O contains a response of	r note to	any line in this Part X	(A)		<u> </u>
					Beginning of year		End of year
$\overline{}$	1	Cash—non-interest-bearing			1,002,953	1	353,281
ŀ	2	Savings and temporary cash investments				2	
ł	3	Pledges and grants receivable, net		[1,445,707	3	2,465,453
Ì	-	Accounts receivable, net		[291,361	4	329,862
1	4	Loans and other receivables from current and	former of	fficers, directors,			
	5	trustees, key employees, and highest compens	sated em	ployees.			
- 1		Complete Part II of Schedule L		`		5	
ļ	_	Loans and other receivables from other disqualified person	ons (as def	ined under section			
ŀ	6	4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contribu	uting employers and			
		sponsoring organizations of section 501(c)(9) voluntary e	mplovees'	beneficiary			
		organizations (see instructions). Complete Part II of Sche	edule L			6	
Assets	_	Notes and loans receivable, net		Г	0	7	0
SS	7			[8	
`	8	Prepaid expenses and deferred charges			32,375	9	138,479
	9	Land, buildings, and equipment cost or	Ì				
1	10a	other basis. Complete Part VI of Schedule D	10a	151,310			
		Less: accumulated depreciation	10b	15,226	43,266	10c	136,084
		Investments—publicly traded securities	0	11	0		
	11	Investments—other securities See Part IV, lir	ne 11	Γ	0	12	0
	12	Investments—program-related. See Part IV, II		0	13	0	
	13	Intangible assets		0	14	0	
	14	Other assets See Part IV, line 11		0	15	160,476	
	15	Total assets. Add lines 1 through 15 (must ex	gual line	34)	2,815,662	16	3,583,635
	16	Accounts payable and accrued expenses	<u>qua,</u>		1,637,796	17	1,990,172
	17	Grants payable				18	
	18	Deferred revenue		726,597	19	741,538	
	19	Tax-exempt bond liabilities			20_		
	20	Escrow or custodial account liability Complet	e Part IV	of Schedule D		21	
	21	Loans and other payables to current and form	ner office	rs. directors.			
Liabilities	22	trustees, key employees, highest compensate	ed emplo	vees, and		l	
Ĕ		disqualified persons. Complete Part II of Scho	edule L .			22	
iak		Secured mortgages and notes payable to unr	related th	ird parties		23	0
_	23	Unsecured notes and loans payable to unrela	ated third	parties	(24	0
	24	Other liabilities (including federal income tax,	pavable	s to related third			
	25	parties, and other liabilities not included on li	nes 17-2	4) Complete		1	
	1	Part X of Schedule D			383,017	25	0
		Total liabilities. Add lines 17 through 25.			2,747,410	26	2,731,710
	26	Total liabilities. Add lines 17 through 25	0.E.Q.\ .c.b.	ook here X and			
	1	Organizations that follow SFAS 117 (ASC	330), Cili 2 and 34	ECK Here Manu		1	
ä	1	complete lines 27 through 29, and lines 33			-126,81	27	821,925
<u></u>	27	Unrestricted net assets			195,06		
ä	28	Temporanly restricted net assets			100,00	29	
7	29					† <u> </u>	
Not Accete or Fund Balances		Organizations that do not follow SFAS 117 (ASC95) complete lines 30 through 34.	8), check h	nere and			
g	20	Capital stock or trust principal, or current fun			30		
d	30		ent fund		31		
8	31		e, or other funds		32		
ţ	32				68,25		
_	34		i	<u></u> <u></u>	2,815,66	2 34	
_	34	Total liabilities and het association Data.					Form 990 (2016)

F 2	90 (2016) New Jersey Innovation Institute, Inc.	47-10	42118	Page	<u>. 12</u>
Part	Reconciliation of Net Assets			_	_
rait	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,977,</u>	
1	Total expenses (must equal Part IX, column (A), line 25)	2	18	<u>,193,</u>	
2	- The land expanses Subtract line 2 from line 1	3		783,	
3	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		68,	<u>252</u>
4	Net uprodized gains (losses) on investments	5			
5	Donated services and use of facilities	6			
6	I wastmont ovnonces	7			
7	Prior period adjustments	8			
8 9	out a sharmed in not except or fund halances (explain in Schedule U).	9			
9 10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Fart A, line 33,			054	005
10	column (B))	10		851	<u>,925</u>
Par	Type Singnoid Statements and Reporting			Г	X
	Check if Schedule O contains a response or note to any line in this Part XII.		·	 -	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		1 1	1	
1	If the organization changed its method of accounting from a prior year or checked "Other," explain in			l	.
	Out to adula O				J
2a	the accomination's financial statements compiled or reviewed by an independent accountant?		2a	\dashv	X
20	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:				1 1
	Separate basis Consolidated basis Both consolidated and separate basis				L
	Separate section's financial statements audited by an independent accountant?	•	2b	Х	
b	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		1		
	—— V D II Ideland and concrete hacis				
	Separate basis Consolidated basis X Both consolidated and separate basis	ht of	ŀ		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	the audit, review, or compilation of its financial statements and selection of an independent of the indepen	in			
	Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1			
38	As a result of a federal award, was the organization required to undergo an addition dudition as a second of the control of th		3a		X
	the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ne			
t	If "Yes," did the organization undergo the required audit of audits. If the organization and required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit	ts	. <u>3b</u>		
	required audit or audits, explain why in coneduce of and describe any every			990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2016

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		e organization					Employer identification		
_		sey Innovation Institute, Inc.						42118	
Par		Reason for Public Chari							
The	orga	enization is not a private founda A church, convention of church		-				07	
2	H	A school described in section	•					- ,	
_	片								
3	닏	A hospital or a cooperative hos	•			-	• •		
4	L	A medical research organization hospital's name, city, and state	•	unction with a hospita	l describe	d in secti	ion 170(b)(1)(A)(iii)	. Enter the	
5		An organization operated for the section 170(b)(1)(A)(iv). (Con		ege or university owne	d or opera	ated by a	governmental unit o	described in	
6		A federal, state, or local govern	nment or governme	ental unit described in	section '	170(b)(1)(A)(v).		
7	X	An organization that normally r described in section 170(b)(1)			from a go	vernment	al unit or from the g	eneral public	
8	\Box	A community trust described in		·	rt II.)				
9	H	An agricultural research organ			•	tod in cor	nunction with a land	l grant collogo	
9	لــا	or university or a non-land-grauniversity:							
10		An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt funct income and unrela	ions—subject to certa ated business taxable	in excepti income (l	ons, and ess section	(2) no more than 33 on 511 tax) from but	1/3% of its	s
11		An organization organized and	l operated exclusive	ely to test for public sa	afety. See	section :	509(a)(4).		
12	Ħ	An organization organized and		=				out the nurnose	20
14	L	of one or more publicly suppor Check the box in lines 12a thro	ted organizations of	described in section 5	09(a)(1) d	or section	509(a)(2). See sec	ction 509(a)(3)).
а		Type I. A supporting organi the supported organization(organization. You must co	(s) the power to reg	ularly appoint or elect					ng
b		Type II. A supporting organ control or management of the	ization supervised he supporting orga	or controlled in conne nization vested in the					
_		organization(s). You must of Type III functionally integri	•		d in conn	action wat	and functionally u	ategrated with	
С		its supported organization(s	r ateu. A supporting s) (see instructions)	You must complete	e Part IV	Sections	i, and functionally if	negraleu willi,	
d	ı	Type III non-functionally in	, ,	•	-			organization(s	:)
		that is not functionally integ requirement (see instruction	rated The organiza	ation generally must s	atisfy a di	stribution	requirement and ar		
е		Check this box if the organi	•	-				Type III	
		functionally integrated, or T					••		
f		Enter the number of supported	organizations						0
g		Provide the following information	on about the suppo	rted organization(s).					
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (support	
					Yes	No			
(A)									
/B\					 			 	
(B)				i					
(C)									
(D)									
(E)									
Tota	al						0	· · · · · · · · · · · · · · · · · · ·	0

Schedule A (Form 990 or 990-EZ) 2016

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.)

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	18	Private foundation. If the organization di instructions .	id not check a box	on line 13, 16a, 10	6b, 17a, or 17b, che	CK this box and se		▶ [

Schedule A (Form 990 or 990-EZ) 2016 New Jersey Innovation Institute, Inc.

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

	If the organization fails to qua	alify under the t	tests listed belo	w, please com	plete Part II)		
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees					}	
	received (Do not include any "unusual grants")			ļ			0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities			1			
	furnished in any activity that is related to the			1	:]	
	organization's tax-exempt purpose .						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		L			/	0
4	Tax revenues levied for the organization's]		j ,	
	benefit and either paid to or expended on]	
	its behalf			ļ		<u> </u>	0
5	The value of services or facilities						
	furnished by a governmental unit to the		1	Į.			
	organization without charge .				/	<u> </u>	0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3			/			
	received from disqualified persons					<u> </u>	0
b	Amounts included on lines 2 and 3 received					[
	from other than disqualified persons that				1)	
	exceed the greater of \$5,000 or 1% of the		1]	
	amount on line 13 for the year			/	L	ļ	0
C	Add lines 7a and 7b .	0	9	0	0	0	0
8	Public support (Subtract line 7c from	~	. /				
	line 6)					ll	0
-	ction B. Total Support			, 			
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) /2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,			}		}	
	payments received on secunties loans,	,5	/)]	
	rents, royalties and income from similar sources					 	0
b	Unrelated business taxable income (less	1		}		}	
	section 511 taxes) from businesses]		}	
	acquired after June 30, 1975					 	0
С	Add lines 10a and 10b .	0	0	<u> </u>	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether			([_
	or not the business is regularly carried on	<i>f</i>				<u> </u>	0
12	Other income Do not include gain or			J		, 1	
	loss from the sale of capital assets)			
	(Explain in Part VI)			 		 	0
13	Total support. (Add lines 9, 10c, 11]	_	1	
	and 12).	0	0] 0	<u> </u>	<u></u>	0
14	First five years. If the Form 990 is for the or	ganization's first, s	secona, tnira, tourt	n, or τιπη ταχ year a	as a section 501(c)	(3)	. ┌─
_	organization, check this box and stop here	15		 	<u> </u>	·	
Se	ction C. Computation of Public Sur						
15	Public support percentage for 2016 (line 8, c		-	(f))		15	0.00%
16	Public support percentage from 2015 Schedi					16	0.00%
Se	ction D. Computation of Investmen			 			
17	Investment income percentage for 2016 (line			column (f)) .		17	0.00%
18	Investment income percentage from 2015 Sc					18	0.00%
19a	33 1/3% support tests—2016. If the organiz						
	not more than 33/1/3%, check this box and s				-		▶∟
þ	33 1/3% support tests—2015. If the organiz						⊾ [□
	line 18 is not more than 33 1/3%, check this						₹₩
20	Private foundation. If the organization did n	OT CRECK 2 DOY OR	une 14 19a or 19	ID CHECK THIS DOX 8	ing see instruction	S	▶ 1

Part IV Supporting Organizations

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

Secti	on 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		ļ'
2-	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	-		
3a		3a		J
	(b) and (c) below.	<u> </u>		-
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	l		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	25		
	organization made the determination.	3b		 -
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)	<u> </u>		ļ'
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	<u> </u>	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	<u> </u>		
	"Ye s," and if you checked 12a or 12b in Part I, answer (b) and (c) below	_4a_		<u> </u>
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	<u> </u>		
	despite being controlled or supervised by or in connection with its supported organizations.	4b		ļ
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	l		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)		<u> </u>	$ldsymbol{ld}}}}}}}}}}$
	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	Ì		
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	1		
	(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		i'
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
_	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
6	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	ļ		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	ĺ		
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	ļ	
_	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	├		
7	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	1		
	(defined in section 4930(c)(3)(C)), a larmly member of a substantial contributor, of a 35% controlled entity with	7	 	ļ
_	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	 	 	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	8	 	╟─╌┤
_	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	۴	├	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	l		
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	-		 -
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	-	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	<u></u>	 	├
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		ļ
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	ļ	ļ	<u> </u>
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	<u> </u>	 	
	supporting organizations)? If "Yes," answer 10b below	10a	<u> </u>	
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	<u> </u>	<u> </u>

Parent of Supported Organizations. Answer (a) and (b) below.

trustees of each of the supported organizations? Provide details in Part VI.

Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

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.

3a

3b

1 Check here if the organization satisfied the Integral Part Test as a qualify instructions. All other Type III non-functionally integrated supporting org	ing t	rust on Nov. 20, 1970 (exp	lain in Part VI). See
Section A - Adjusted Net Income	<u> </u>	(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	0	0
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	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other	Γ		
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	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4	ol	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035.	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3.	4		0
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		0
7 Check here if the current year is the organization's first as a non-functional instructions).	ally i	ntegrated Type III supporti	ng organization (see

Part '	Type III Non-Functionally Integrated 509(a)(3)	Suppo	orting	Organiza	tions (c	ontınued)		
Section	on D - Distributions						Current	Year
<u>·1</u>	Amounts paid to supported organizations to accomplish	exempt	purpos	es				
2	Amounts paid to perform activity that directly furthers exe	empt pu	rposes	of support	ted			
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purp	oses of	suppo	rted organ	izations			
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						<u> </u>	0
8	Distributions to attentive supported organizations to which	h the or	ganıza	tion is resp	onsive			
	(provide details in Part VI) See instructions							
9	Distributable amount for 2016 from Section C, line 6							0
10_	Line 8 amount divided by Line 9 amount	.,						0 000
			(i)			(ii)	(iii)	
Se	ction E - Distribution Allocations (see instructions)	Exces	٠,	ributions		listributions	Distribu	
				0.707 7.00		e-2016	Amount fo	or 2016
1	Distributable amount for 2016 from Section C, line 6					"是"等		0
	Underdistributions, if any, for years prior to 2016	心療	2				N. O. C. M.	
2	(reasonable cause required—explain in Part VI). See		. 45% 15%					
	instructions	916	·	"" " " " " " " " " " " " " " " " " " "			多 、参、数量。	()
3	Excess distributions carryover, if any, to 2016	A. Malaka	200	. 5 7	1 1 1 1 1 1 1	Side of the	多种的	100
a	「西通し歌ない歌楽をおかかかる」これを持 年記 本記 大田 本本 本	4 产品美			1.500	13 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 132-11
<u>b</u>	The Bolton of the second of the second	1 - M						
<u>C</u>	From 2013	0 - 5	Total Control		1.991	The same of	1796	* 1
d		0	·通额。		LA BOOK	, ,	古人がない	
ее		0 .	4	, 1	2 (Martin E. M	** ** *** **** ***	7 Set	, rij (3),
f	Total of lines 3a through e	k	.031.	0			は、海神神	- Van 13
g	Applied to underdistributions of prior years	110 CO		25 Car 40 30	Water VA	0	A THE PROPERTY AND A	
h	Applied to 2016 distributable amount	7 729	<u> </u>		N. A. S. S. S. S. S. S. S. S. S. S. S. S. S.	47.5	5 741 (26	0
i	Carryover from 2011 not applied (see instructions)	40	1. 1867.36	施成之	7.後ま		15.140.14 Th	
	Remainder Subtract lines 3g, 3h, and 3i from 3f	2 2 Nov.	71. NFR	0			3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
4	Distributions for 2016 from							
	Section D, line 7 \$	U S	1816)- C - TAB	\$ 19 July 19 J	15°44	in the site of	*** * **** *** **** **** **** **** **	- 1764 a 1
	Applied to underdistributions of prior years	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	, ALE		* '	O the time.	1 11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Applied to 2016 distributable amount	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	, M.E		- Anni	京 <u>教職、</u>	A .4 Me	<u>0</u> د ددی
<u></u>	Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2016, if	Art sales	2	0 2 % 1986: 1	A(" " 2	- 12	and the boards.	7 15
5	any Subtract lines 3g and 4a from line 2. For result							
	greater than zero, explain in Part VI See instructions					0		· Service
6	Remaining underdistributions for 2016 Subtract lines 3h	r= _200	7,77 3,830	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	5 . 46	
0	and 4b from line 1. For result greater than zero, explain in	74.23		- Et - 1 3	. 5	"整"。		
	Part VI See instructions.	1 .272			(j. 1			0
7	Excess distributions carryover to 2017. Add lines 3	1. A.S.	1 - 100 130 ·	"Million" Achief	6 . S. B. B. B. B.	35 M	1 4 5	<u>U</u>
•				0	. 100	1、秦星等	W	
8	and 4c Breakdown of line 7	- T By		U	· · · · · · · · · · · · · · · · · · ·	40 C 20 C	7.00	
_ a	Dieakdown of life /				F. Mary	****	State of the state	· Marian
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-		· 是 · · · · · · · · · · · · · · · · · ·		A STATE OF THE STA	· 1 1 1 1 1 1 1 1.	
		0	1 TWO	13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The Thirty	Same of the contract of the co	Maria - Albandina 17	44.5
d d	Excess from 2015		- 64 - 63		5 字稿號		数に縁めば	K JAGAN
u	Excess from 2016	O ST THE	TE.	2 Sec. 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 3 4 4 4 5	- 24 - 25 - 3	E. All	

Schedule A (Fo	orm 990 or 990-EZ) 2016	New Jersey Innovat	ion Institute, Inc		47-1042118	Page 8
Part VI	Supplemental Info	rmation. Provide the	explanations required b	by Part II, line 10; Part II, line	17a or 17b, Part	
				, 9b, 9c, 11a, 11b, and 11c; I		
				es 2 and 3, Part IV, Section		
	3a and 3b Part V.	line 1: Part V Section	B line 1e: Part V. Sec	tion D, lines 5, 6, and 8; and	Part V. Section E.	
	lines 2. 5. and 6 Al	so complete this part f	or any additional inform	nation. (See instructions)	,	
	<u>,</u>	or complete and part.	or drift deather the transfer	, , , , , , , , , , , , , , , , , , , ,		
					• • • • • • • • • • • • • • • • • • • •	
					• • • • • • • • • • • • • • • • • • • •	
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			-			
						-
				•••••••••••		
						•
					,	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name	of the organization		Employer identification number
New	Jersey Innovation Institute, Inc.		47-1042118
Pari		or Advised Funds or Other Similar	
		ered "Yes" on Form 990, Part IV, line	
		(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 d	lonor advisors in writing that the assets h	eld in donor advised
_	funds are the organization's property, subje		
6	Did the organization inform all grantees, do		
	used only for charitable purposes and not for		
	purpose conferring impermissible private be		·
Par			
ı aı		ered "Yes" on F <u>orm 990, Part IV, line</u>	. 7
1	Purpose(s) of conservation easements held		
•	Preservation of land for public use (e.g., reci		on of a historically important land area
			
	Protection of natural habitat	Preservation	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contrit	oution in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation ea		
C	Number of conservation easements on a ce		
ď	Number of conservation easements include		t I
	historic structure listed in the National Regis		
3	Number of conservation easements modified	d, transferred, released, extinguished, or	terminated by the organization during
	the tax year ▶		
4	Number of states where property subject to		
5	Does the organization have a written policy		
_	violations, and enforcement of the conserva-		
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforcing	ng conservation easements during the year
_	·		
7	Amount of expenses incurred in monitoring, inspense	ecting, handling of violations, and enforcing co	nservation easements during the year
_		1 1: 0/-1\	
8	Does each conservation easement reported	on line 2(d) above satisfy the requireme	, , , , , , , , , , , , , , , , , , ,
9	In Part XIII, describe how the organization r		•
	balance sheet, and include, if applicable, the		s financial statements that describes
Dar	the organization's accounting for conservate III Organizations Maintaining College	ections of Art, Historical Treasures	or Other Similar Assets
Fai		ered "Yes" on Form 990, Part IV, line	
1a	If the organization elected, as permitted und		
	works of art, historical treasures, or other si		
_	of public service, provide, in Part XIII, the te		
þ	If the organization elected, as permitted und		
	works of art, historical treasures, or other si		ucation, or research in furtherance
	of public service, provide the following amo		
	(i) Revenue included on Form 990, Part VII(ii) Assets included in Form 990, Part X	I, line 1	▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works or		
	following amounts required to be reported u		
а	Revenue included on Form 990, Part VIII, li		► \$
h	Assets included in Form 990 Part X		▶ \$

Sched			New Jersey Innova							47-104			Page 2
Part	. 0	rganizati	ions Maintaining	Collec	ctions of A	rt, Histor	rical Tre	asures, or (Other	Similar Assets	s (contin	ued)	
3	Using th	e organiz	ation's acquisition, a	ccess	ion, and othe	er records	, check a	ny of the follo	owing	that are a signifi	cant use	of its	
•	collectio	n items (c	check all that apply):							-			
а	Pı	ublic exhib	oition			d 🗌	Loan	or exchange	progra	ams			
b	$\overline{\square}$ so	cholarly re	esearch			e 🗀	Other	•					
	===	•				ч	,						
C			n for future generati									_	
4		a descrip	tion of the organizat	ion's c	collections an	id explain	now tney	turtner the o	rganı	ration's exempt p	ourpose ii	ı Part	
	XIII												
5			lid the organization								—		1
	assets to	o be sold	to raise funds rather	than t	to be mainta	ined as pa	art of the	organization'	s colle	ection?	Ye	:s []	No
Par			nd Custodial Arra	_									
	С	complete	if the organization	answ	ered "Yes"	on Form	990, Pa	rt IV, line 9,	or re	ported an amou	int on Fo	ırm	
	99	90, Part 2	X, line 21.										
1a	Is the or	rganizatio	n an agent, trustee,	custod	lian or other	intermedi	ary for co	ontributions o	r othe	assets not			
	included	d on Form	990, Part X?								Ye	es 🔲	No
b	If "Yes,"	' explain th	ne arrangement in P	art XII	l and comple	te the fol	lowing tal	ble:					
	·	·	-		-		_				Amount		
С	Begirnni	ng balanc	e						1	С			0
d	•	ns during t								d			
e		_	ng the year							e			
f		balance .							_	If			
`	_						24 for a					_ 🔽	
2a		•	ion include an amou							•	1¢	es 🔼	No
b	If "Yes,"	" explain tl	he arrangement in P	art XII	I. Check her	e if the ex	planation	has been pr	ovided	on Part XIII .	· · ·		<u> </u>
Part			ent Funds.										
	C	Complete	if the organization	answ	ered "Yes"	on Form	990, Pa	rt IV, line 10)				
				(a) (Current year	(b) Pn	or year	(c) Two years	back	(d) Three years bad	k (e) Fo	ur years	back
1a	Beginn	ng of year	balance .		0		0						
b	Contribu	utions									}		
С	Net inve	estment ea	arnıngs, gaıns,					T					
_													
d			ships								1 -		
e			es for facilities							t	1		
Ū		grams .						1			}		
•	-	•	penses					 		 	+		
'			nce		0			-			0		
2			ated percentage of	the cu	rrent vear en	d halance	/line 1a	column (a))	held a	¢.	<u> </u>		
			or quasi-endowme		• • • • • • • • • • • • • • • • • • •	% Balance	, (iiile 19,	Column (a))	ileiu a	3.			
a		nent endov	* · · · · · · · · · · · · · · · · · · ·	i it		/0							
b					<u>%</u> .								
С	•	•	icted endowment		%	000/							
_			on lines 2a, 2b, and				41			Internal Control			
3a			ment funds not in the	posse	ession of the	organiza	tion that a	are neid and	admin	istered for the	1	·	
	•	ation by.										Yes	No
			•								3a(i)		
											3a(ii)		
þ			a(ii), are the related								_3b_		
4			KIII the intended use			on's endo	wment fu	nds					
Par			ildings, and Equi	•									
	C	omplete	if the organization	answ	ered "Yes"	on Form	990, Pa	rt IV, line 11	<u>a. Se</u>	e Form 990, P	art X, line	<u> 10.</u>	
		Description	on of property		(a) Cost or of	ther basis		ost or other	(0	:) Accumulated	(d) B	ook valu	е
					(investm	nent)	bas	is (other)		depreciation			
1a	Land					0	L	0					0
b	Building	js				0		0		0			0
c	-	old improv	vements			0		0		0			0
d	Eguipme	•				0		151,310		15,226		13	6,084
e			· · · · · · · · · · · · · · · · · · ·			0		0		0			0
	al. Add line	es 1a thro	ugh 1e (Column (d) must	egual Form	990, Part	X. colum	n (B), line 10	c.)			13	6,084

Schedule D (Form 990) 2016

Part Vil	Investments—Other Securities Complete if the organization an		0, Part IV, line 11b See Fori	m 990. Part X. line 12
(a) l	Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	luation
(1) Financial (derivatives	0		
• •	eld equity interests	0		
			<u>-</u>	· · · · · · · · · · · · · · · · · · ·
(E)				
(F)		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
(G)			· · · · · · · · · · · · · · · · · · ·	
(H)				
	must equal Form 990, Part X, col (B) line 12)	0		
Part VIII	Investments—Program Relate		0 Death M. Par 44 - 0 - Fe	- 000 B 1 V 1 10
	Complete if the organization an	swered "Yes" on Form 99		
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year r	
			Obstroi end-on-year i	nainet value
<u>(1)</u>				
(2)				
(3)				
(4)				
(6)				
(7)				
(8)				-
(9)				
Total. (Column (b)	must equal Form 990, Part X, col (B) line 13)	0		
Part IX	Other Assets.		O Dart IV line 44d Con Fam	- 000 Dad V has 45
	Complete if the organization an	swered Yes On Form 99 a) Description	u, Partiv, line 110. See Fori	n 990, Part 入, line 15. (b) Book value
(1)		·		
(2)				
(3)				
(4)				
(5)				
(6)				<u> </u>
(7)				
(8)	·_ -			
(9)				
	nn (b) must equal Form 990, Part X, c	col. (B) line 15.)	<u>. ,</u>	
Part X	Other Liabilities.			
	Complete if the organization an line 25.	swered "Yes" on Form 99	0, Part IV, line 11e or 11f Se	ee Form 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes	0		
	lew Jersey Institute of Technology	0		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				•
Total. (Column (b) m	nust equal Form 990, Part X, col (B) line 25)	0		
	uncertain tax positions. In Part XIII, provid			
	liability for uncertain tax positions under l			

Schea	tile D (Form 990) 2016 New Jersey Innovation Institute, Inc.	47-1042118	Page 4
Par		Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1 '	Total revenue, gains, and other support per audited financial statements	1	<u>19,455,195</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains (losses) on investments	4 [
b	Donated services and use of facilities	4	
C	Recoveries of prior year grants	1 1	
d	Other (Describe in Part XIII.)		437 503
e	Add lines 2a through 2d	2e	477,527
3 4	Subtract line 2e from line 1	3	18,977,668
-	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1 1	
a b	Other (Describe in Part XIII.)	† †	
C	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		18,977,668
	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses p		10,911,000
ı aı	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	or rectarii.	
1	Total expenses and losses per audited financial statements	1	18,671,522
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		10,07 1,022
a	Donated services and use of facilities		
b	Prior year adjustments	1 1	
C	Other losses	1	
d	Other (Describe in Part XIII.)	1	
е	Add lines 2a through 2d	2e	477,527
3	Subtract line 2e from line 1	-	18,193,995
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]]	
b	Other (Describe in Part XIII.)	1.	
С	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	18,193,995
Par	t XIII Supplemental Information.		
	ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b		; Part X, line
2, Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional info	ormation.	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

Schedule D (Folia	1990) 2016 New Jersey Innovation Institute, Inc	47-1042118 Page 5
Part XIII	Supplemental Information (continued)	
	•	
•		
		•

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

2016	Open to Publ	Inspection

OMB No 1545-0047

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

47-1042118			X Yes No		Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form	ded	(g) Description of (h) Purpose of grant non-cash assistance or assistance	Scientific research grants & programs								
		ants or assi			nization an	ace is need	(g) Desc non-cash									
		es' eligibility for the gra		·S	Complete if the orgai	ated if additional spa	(f) Method of valuation (book, FMV, appraisal, other)									
		ssistance, the grante		ds in the United State	stic Governments.	Part II can be duplic	(e) Amount of non- cash assistance									
		ount of the grants or a		g the use of grant fund	zations and Domes	more than \$5,000. F	(d) Amount of cash grant	842,379								
	and Assistance	ubstantiate the am	its or assistance?.	dures for monitorin	Domestic Organi	ent that received	(c) IRC section if applicable	115								
Ċ	n on Grants	ain records to s	award the gran	ization's proce	ssistance to	, for any recipi	(b) EIN	22-6000910								
New Jersey Innovation Institute, Inc.	Part 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?	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 A	990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government	(1) New Jersey Institute of Technology University Heights Newark, NJ 07102	(2)	(3)	(4)	(5)	(6)	(a)	(8)	(6)

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

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

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

Schedule I (Form 990) (2016)

€

Page 2

Part III

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

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information. Part I Line 2 The New Jersey Innovation Institute, Inc.'s (NJII) primary exempt mission is to support scientific research and education and subcontracting from NJIT grant funds to support academic and research endeavors. NJII monitors the usage of funds to ensure they (e) Method of valuation (book, FMV, appraisal, other) in conjunction with its sole member, the New Jersey Institute of Technology (NJIT). NJII accomplishes this mission by both granting to (d) Amount of noncash assistance are in compliance with grant terms by reviewing all expenditures of grant funds made by NJIT. (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Part IV S)

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Compensation Information

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

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

► Attach to Form 990

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

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

New Jersey Innovation Institute, Inc. 47-1042118 **Questions Regarding Compensation** Nο Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 1a 990. Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a The organization? а Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of: 6a The organization? . . . а Any related organization?. 6b If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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

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

Note: The sum of columns (B)(I)–(III) for each listed individual must equal the	n listec	individual must equal th	이오	Part VII,	Section A, line 1a, app	licable column (D) a	and (E) amounts for that individua	hat ındıvıdual
		(a) DIEGRADOWII OF	Уl	and/or ross-misc compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	as deferred on prior
Bloom, Joel S.	ε	0	0		0	0	0	0
1 Chairman	(ii)	637,39	138,800	52,550	11,280	13,384	853,412	0
Sebastian, Donald H	(i)	0	0	0		0		0
2 President & CEO	(ii)	304,757	40	13,271	11,280	31,345	360,693	0
Franklin, Timothy V.	(i)	0	0	0		0		0
3 Sr VP, COO & Treasurer	(ii)	223,391	0	5,963	11,280	30,937	271,571	0
Stern, Holly C.	Ξ	0	0	0		0	0	0
4 Secretary (Non-voting)	(ii)	284,309		7,614	11,2	12,118	315,32	0
Deek, Fadi P.	(i)	0	0	0	0	0	0	0
5 Director	(ii)	418,708		15,820	11,2	2,655	448,463	0
Gregorio, Tomas	Ξ	239,194	0	0	11,280	19,222	269,696	0
6 Sr Exec Dir Healthcare Systems iLa	(ii)	0		3,600		0	3,600	0
Cochinwala, Munir	(i)	220,635	0	0	11,280	16,905	248,820	0
7 Exec Director & Chief Scientist	(ii)	0		0	0	0	0	0
Motyka, Thomas	()	205,748	0	0	11,280	8,220	225,248	0
8 Sr Exec Director SMART iLab	(ii)	0		0	0	0	0	0
Nikolaou, George	€	228,914	0	0	11,280	10,909	251,103	0
9 Exec Dir Fin Svcs Innovation	€	0		0	0	0	0	0
O'Byrne, William	€	177,619	0	0	11,280	1,183	190,082	0
10 Exec Director SE Region HCDS	(ii)	0		0	0	О	0	0
Celiano, Edward	€	177,561	0	0	11,280	12,312	201,153	0
11 Exec Director, Unmanned Air	€	0	0	0	0	0	0	0
McVey, Lynn	€	175,899	0	0	11,515	9,681	197,095	0
12 Exec Head of Oper HCDS iLab	(ii)	0	0	0	0	0	0	0
Bartiromo, Thomas	ε	174,795	0	0	11,280	11,878	197,953	0
13 Chief Technology Officer HCDS iLat	Œ	0	0	0	0	0	0	0
Novak, John	€	153,971	0	0	11,280	16,413	181,664	0
14 Sr Director Arch Gov and Tech	€	0	0	0	0	0	0	0
White, Norma	€	148,678	0	0	10,914	2,705	162,297	0
15 Director Clinical Operations	€	0	0	0	0	0	0	0
16	€ €		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					

Schedule J (Form 990) 2016

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Schedule J (Form 990) 2016 New Jersey Innova	Provide the information, explanation, or descriptions required for any additional information						! !	;	1 1 1			i !	•			; 1 1 1 1					
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SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Internal Revenue Service Name of the organization **Employer identification number** New Jersey Innovation Institute, Inc. 47-1042118 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified person and (d) Corrected? 1 (a) Name of disqualified person (c) Description of transaction organization Yes No (1)(2)(3) (4)(5)(6)2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . Loans to and/or From Interested Persons. Part II 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. (d) Loan to or (b) Relationship (c) Purpose (e) Original (g) In default? (h) Approved (a) Name of interested person (f) Balance due (i) Written with organization of loan from the principal amount by board or agreement? organization? committee? From Yes Yes Yes Νo (1)(2)(3)(4)(5) (6)(7)(8) (9) (10)0 Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (e) Purpose of assistance (b) Relationship between interested (c) Amount of assistance (d) Type of assistance person and the organization (1)(2)(3)

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

Schedule L (Form 990 or 990-EZ) 2016

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	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	
		İ			Yes	No
(1) Time	othy V Franklin	Sr VP, COO & Treasurer	36,000	Program Mgmt Consulting for NJI7		Х
(2) Joh	n Pyrovolakis	Director	148,015	Subcontract services for NJIT		X
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Part V	Supplemental Information					
		n for responses to questions or	n Schedule L (see i	nstructions).		
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Jersey Ir	<u>istitute of Technology (NJIT), a r</u>	elated entity.		•••••		
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Part IV L	ine 2 John Pyrovolakis is CEO o	f Innovation Accelorator. In FY	2017, Innovation	• • • • • • • • • • • • • • • • • • • •		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2016

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

Name of the organization

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Form 990. Part II. Line 4a.

THE NEW JERSEY INNOVATION INSTITUTE, A NEW MODEL FOR BUSINESS INNOVATION

The New Jersey Innovation Institute (NJII) was launched in April 2014 as an NJIT nonprofit corporation to accelerate the university's industrial technology and economic development agenda; to connect New Jersey's research universities, business, and government to address industry challenges; and to position New Jersey Institute of Technology (NJIT) as a national leader among universities in supporting innovative economic development and job creation.

Fundamentally, NJII represents a new model for business innovation. NJII advances the competitiveness of key industrial sectors by leveraging the talent and resources of its parent, New Jersey Institute of Technology, other partner universities, emerging technology companies and its own professional staff to offer *Innovation-as-a-Service* (IaaS) to its client companies. No other organization in the US landscape brings a comparable focus and design for bridging the gap between full commercial operation and discovery-based research and development.

NJII has created public-private partnerships in biotechnology & pharmaceutical production, civil infrastructure, defense & homeland security, financial services and healthcare delivery systems that have quickly grown in annual contract and grant sponsored work. Its Board of Directors represents the state's public research universities, major industry trade groups, the NJ Secretary of Higher Education, and the State's business attraction and economic development organizations.

NJII works with individual companies, consortia of peer companies, and across vertical supply chains to address problems that are difficult or impossible for a single entity to resolve. It employs an array of tools and techniques that span ideation, demonstration and commercialization to move from formulation of a problem to successful adoption of a solution. More than just a think tank, NJII's pilot scale test-beds and demonstration centers create a unique capacity to iterate quickly from idea to proof of concept. NJII's business acceleration and incubation programs draw in emerging technologies that feed ideation and also mature out new businesses that may bring new solutions to market.

http://www.njii.com

NJII Innovation Labs (iLabs)

NJII is organized around commercial sectors, with iLabs serving as the organizational unit dedicated to developing an industry facing agenda of innovation services. The Institute launched with five iLabs: Biotechnology & Pharmaceutical Production, Civil Infrastructure, Defense & Homeland Security, Financial Services and Healthcare Delivery Services. The objective for each is to bring together leading industries in their sector to define the "Grand Challenges" that go beyond the resources of a single company to resolve and to develop and implement a roadmap using the full suite of *Innovation as a Service* methods and techniques described below. These pre-competitive programs are amenable to public funding as well as

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Name of the organization **Employer identification number** New Jersey Innovation Institute, Inc.

consortium funding, leveraging every participant's investment to much greater impact. In addition to Grand Challenge programs, the Institute works on an individual and proprietary basis to help firm tap into their own innovative potential or to access the resources of start-ups and academic groups that NJII has curated around its sectoral themes. The top three program areas in FY 17 were:

HEATHCARE DELIVERY SYSTEMS ILAB

Grand Challenge: The U.S. spends two-and-a-half times more any other developed country and at a faster rate. NJII is focused on re-engineering the delivery process using advanced IT tools and integrating automated medical device technology.

http://njii.com/healthcare-delivery-systems/

National Healthcare Quality Programs

Working in partnership with NJIT, NJII became a national leader in the transformation of healthcare from a paper-based to digitally networked system of delivery and is now a leader in using those assets to achieve outcomes-driven medicine. The NJ Healthcare Information Technology Extension Center was the most successful program in the country among centers run by the Office of the National Coordinator for Health Information Technology, exceeding its goal of converting 5000 primary care physicians from paper to electronic medical record systems. It is now managing a 15,000-physician program of practice transformation on a \$48M federal award from the Center for Medicaid Medicare Innovation to drive the adoption of outcomesoriented reimbursement models. The early success of this effort has attracted private payers like United Health, Aetna and Horizon Blue Cross to seek our assistance in practice transformation across their networks.

Statewide Healthcare Information Exchange

NJII pioneered interoperability across seven regional hospitals and then added thousands of related physician-owned systems to the Highlander Healthcare Information Exchange. Based on that experience, the NJ Department of Health and Senior Services has selected NJII and NJIT to create the New Jersey Health Information Network, a statewide interconnection of public and private Health Information Exchanges (HIEs) with Master Patient Index technology developed by NJII.

Healthcare System Innovation Program

In August 2017, Hackensack Meridian Health and the NJII opened the Agile Strategies Lab, the first incubator of its kind for health care advances in New Jersey. The lab, located on the NJIT campus in Newark, is designed to help create and launch the next wave of problem-solving in health care through better devices, improved technology and more efficient services to provide a higher quality of care, lower costs, and an enhanced patient experience.

The concept is similar to the popular ABC reality show Shark Tank - 10 companies have already pitched ideas to a panel of experts. Innovations include a device to lower risk in common surgeries and a wearable monitor to better track patients' vitals. Hackensack Meridian Health has committed \$25 million, a new revenue stream to help companies develop trailblazing products and services. This seed money will help launch ideas to the point where they can become viable and receive financing through venture capitalists.

While many of the nation's major academic medical centers have such incubators, this venture is truly unique because it brings together entrepreneurs and innovators from life sciences,

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engineering and technology – not just the clinical realm. This remarkable collaboration will provide solutions to health care challenges in every sphere, not just in creating more effective medicines or treatment.

Newark Healthcare Quality Improvement Projects:

NJII is proud to support over 522 Newark-clinicians and practices and 3 major hospitals in their efforts in providing safer and high quality healthcare to the residents of Newark. According to the City of Newark Department of Health and Community Wellness latest May 2017 Community Health Assessment for Newark, it was noted that the leading cause of death in Newark is heart disease at 21%, followed by cancer (20%), stroke (4.5%) and diabetes (4.4%). With the exception of cancer, these diseases and their progression can be greatly reduced or even prevented through better care coordination, population health, and connection to appropriate socioeconomic services that support Newark residents and their social determinants of health.

As a direct collaborator and partner with the Centers for Medicare and Medicaid (CMS), commercial payers, healthcare industry leaders, and the State, the iLab has the ability and expertise to deliver real support and monies from federal, state, and commercial quality programs to the Newark clinicians and hospitals who are seeking to treat and prevent the progression of these illnesses affecting Newark residents.

Form 990, Part II, Line 4b.

TECHNOLOGY & ENTERPRISE DEVELOPMENT

For financial reporting purposes, this category includes NJII's work in fostering new firms, innovation commercialization, economic and cluster development and a wide array of innovation services, which are described in the sections below.

NJII Innovation Capabilities

NJII engaged in several programs of direct interest to large, multinational companies. These programs help companies grow internal capabilities, like drone delivery services or supply chain efficiency. NJII's programs also help assemble and grow regional hubs of related companies working new markets. Programs and associated test beds are located throughout the state to energize the region making it increasingly attractive as a place to live and work.

Supply Chain Initiatives and NJII's Ideation Portfolio

The New Jersey Innovation Institute (NJII) works with New Jersey businesses, large and small, to strengthen and diversify supply chains across the state and beyond. By taking both a top-down and bottom-up approach, it adds direct value to clients while simultaneously catalyzing a shift in New Jersey from a supply *chain* state to a supply *network* state.

Launched in 2014, NJ MarketShift (NJMS), funded by the US Department of Defense Office of Economic Adjustment, represents one of NJII's first programs (in partnership with NJIT). Through NJMS, NJII created innovation tools and processes designed to strategically grow existing and future NJ-based defense suppliers into new markets while creating high paying skilled positions. These cutting-edge approaches now make up NJII's Ideation Portfolio, a toolset for supply chain visibility, innovation acceleration and new idea generation and adoption.

Fundamentally, NJ MarketShift addresses supply chain failures in the aerospace and defense industry. The tools and technologies assembled to identify, fortify and diversify these companies

New Jersey Innovation Institute, Inc.

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are not specific to the defense industry and are now being used by companies such as Arconic (Alcoa spinoff), Lockheed Martin, Hackensack Meridian Health, the United States Air Force, AtlanticCare, and others in their own supplier relations. Several of these tools are worth highlighting:

- The MarketShift intelligence Platform (MSIP) is one such tool that creates a business-to-business networking facility. It catalogs companies by their manufacturing capabilities and competencies rather than standard product codes, like NAICS. It includes resources like iBridge, the nation's largest and best database of university-derived IP that can support ideation across a supply chain,
- Market Explorer and Tech Radar represent distinctive methodologies for market exploration and technology scouting that NJII has co-developed with our partners at the internationally recognized Fraunhofer Institute in Germany. These technologies are designed to identify new markets for an existing technology or to identify a new technology for existing or proposed product.
- Strategic Doing, incubated at Purdue University for more than a decade, is at the center of several agile strategy tools and adapted to the New Jersey market. Its method is premised on network-based concepts and builds strategy quickly with measurable outcomes and strategic action plans shaped in groups working for two hours or less. Its applicability includes corporate product development, organization development, regional development, and open innovation.
- NJII enables and manages processes that manage Open Innovation and Technology
 Challenges, in which large companies engage a number of smaller technology companies
 in an effort to shape a unique solution or find suppliers in a rapid engagement that opens
 visibility into new supplier networks.

Large corporate clients come to NJII when "tightening" their supply chains (i.e. cultivating local partners), which allows its clients to respond faster to increasing product cycle times and customer demand. Moreover, NJII has become an innovation partner for its clients, generating capability and leverage for cultivating and harvesting the NJ innovation ecosystem (early stage companies, university intellectual property, university research capability, etc.) to source and onboard the latest technologies. Taken together, NJII's clients become more agile, which creates downward pressure on small and early stage companies. As such, NJII works with NJ suppliers and entrepreneurs to embed processes and seed behaviors that will help them better respond to the ever-changing competitive landscape and evolving demands of their customers while providing short term, yet sustainable revenue growth opportunities.

http://njii.com/nj-marketshift/

Enterprise Development and the Healthcare Cluster Growth Program

Thirty years ago, the establishment of the Enterprise Development Center (EDC) in 1988 served as a focal point for the implementation of NJIT's economic development mission supporting the growth and development of technology- and life sciences-based companies with physical facilities/space, programming, mentoring and connections to a wide array of NJIT and external capabilities. In addition to being the first, EDC grew to be the largest technology incubator in NJ and served to symbolize NJIT's unique mission all the while distinguishing the university in its focus on developing NJ's high-tech and life sciences industry base. EDC has grown to 95 companies in residence that generate \$145.0 million in total output for the state, supporting roughly 910 jobs and creating \$3.4 million in tax revenues for New Jersey. The business

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initiation and growth services result in a 5-year post-graduation persistence rate of over 85% - significantly higher than the national average of under 50%.

This core program has been joined by other related program efforts, notably:

- The National Science Foundation's i-Corps program that assists student and faculty entrepreneurs with business coaching and mentorship, and
- JPMorgan Chase's Small Business Forward A program to coach, connect, and create a commercialization pathway in ways that accelerates the growth of Health IT entrepreneurs with annual revenues from \$250,000 to \$5 million.

NJII received a \$1.3M grant from JP Morgan Chase's Small Business Forward program to accelerate growth of a regional cluster of innovators in the electronic healthcare space. It has successfully taken multiple cohorts of companies through its business and cluster growth programs. As the adoption of electronic medical record technology grows and prompts related innovation, it seems clear that inserting the patient into this environment is fundamental to achieving objectives from promoting wellness to chronic disease care.

The NJIT/NJII Innovation Commercialization Framework

Now, once again, NJIT/NJII is acting as first mover and innovator with implementation underway to reposition the overall innovation commercialization effort. The rebranded framework will provide a distinctive value proposition in a fast-changing industrial technology landscape and be unique in its reach and scope. As corporate R&D increasingly focuses on product development, larger companies rely more and more on finding new technologies to commercialize from smaller companies. NJII is launching technology acceleration and technology adoption programs that create a two-sided business model in which the sponsoring large companies value access to curated cohorts of smaller companies. At the same time, the smaller companies value access to the larger companies.

Success in this overall framework stems from success in this three-sided value proposition. NJII is uniquely positioned to develop the proposed framework with over 100 employees and roughly a dozen business units each of which is led by mid-to-high level executive talent working routinely within networks of companies. The proposed strategy dovetails the current programs with related products and services made possible by NJII's overall development to form a three-part strategy and business model. This new framework includes:

- 1. EDC Incubation Space+- Streamline and center EDC management efforts on facility management (current NJIT space and any new space) and coordinating company incubation. Revenues will be captured primarily through facility leases.
- 2. Technology Acceleration NJII is expanding its program unit focused on instilling business acumen into high potential companies and technologies. This unit will be dedicated to providing world-class scouting, selection, development training, consulting services, programs, connections, investment opportunities, and curation for theme-based cohorts of technology startup and scale up companies. The small technology companies will receive this value in exchange for equity and success fees as payment for the services and value received.
- 3. Technology Adoption NJII's externally-facing iLabs and program units are well-positioned as sales channels in which to leverage corporate relationships to market *Innovation-as-a-Service* subscriptions. These industry-facing units contract with large companies to

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- participate in programs and events connecting the subscribing large companies with the cohorts of smaller companies engaged in the technology acceleration programs.
- 4. Fund Management Services NJII's efforts in connecting high-quality smaller firms with larger firms interested in innovation offers value to investors and positions NJII to develop new investment fund management services to effect angel funding of early stage startups. Fundamentally, this value includes deal flow by sourcing, selecting, and vetting candidate startup and scaleup companies.

NJII is preparing to execute contracts with both large companies and cohorts of small companies. As mentioned, NJII iLabs and program units provide "sales channels" and networks of relationship from which bring this three-sided business model to life. Selling both technology adoption services to bring large companies and scouting for candidate smaller companies have tested well as new products and services for NJII units to offer the numerous players with whom they are connecting in their ongoing programs and business development activities.

Form 990, Part II, Line 4c.

DEFENSE & HOMELAND SECURITY ILAB

Grand Challenge: The defense and homeland security industries face a new generation of challenges posed by asymmetric threats and terrorist activities conducted in civilian settings. Cyber defense and unmanned systems technology are among the tools that NJII brings to confront these challenges.

http://njii.com/defense-homeland-security/

New Jersey Unmanned Aircraft Systems Test Site

New Jersey created the New Jersey Unmanned Aircraft Systems Test Site (NJ UASTS) as part of the Mid-Atlantic Aviation Partnership, one of six FAA designated unmanned aircraft systems (UAS) test sites. FAA designed the national program to resolve the problems of integrating unmanned aircraft in the national airspace to ensure a safe operating environment for all flying in the airspace as well as those on the ground below. The NJ airspace in the congested northeast corridor offers unique advantages over the other six national test sites, including coastal and oceanic airspace and a combination of restricted/unrestricted airspace

In 2016 NJII assumed responsibility for operating the New Jersey test site, organized under its Defense & Homeland Security division. It leverages NJIT's independent authority to grant Certificates of Authorization (CoA) to permit use of the National Airspace for UAS applications. NJII's operations at Cape May County Airport (KWWD) take advantage of the diverse set of ground and airspace environments accessible from that location – coastal, rural, agricultural and urban settings all proximate to the busy air corridor linking Boston, New York, Philadelphia, Baltimore and Washington, DC. In addition to securing CoAs, NJII provides a full array of preflight, in-flight, and post-flight engineering and operational services to help clients conduct successful campaigns in the New Jersey airspace. NJII provides systems engineering services to combine platforms and payloads. It conducts flightworthiness assessments as a pre-condition of permission to fly. It assembles ground support, and air chase resources for beyond-line-of-sight operation, and it coordinates data reporting to the FAA to validate safe flight outcomes.

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In concert with **Atlantic Cape Community College, Stockton University**, state and local economic development officials the Cape May – Atlantic City region are growing an identity as a hub of businesses relating to UAV platforms and sensors, flight support systems, pilot training, and other related businesses.

NJ UASTS has engaged in many notable demonstrations in its brief period of operation. Some recent examples follow:

In the wake of Hurricane Harvey, NJ UASTS responded to **T-Mobile's** request for help in assessing cell tower damage by assembling a team of UAV providers, providing pilots and deploying a command center that was operational with days of the storm's passing. It is also working with power utilities in Florida to assess damage from Irma.

NJ UASTS provided the flight support for **American Aerospace Technologies** and **Verizon** to demonstrate fixed-wing drones as aerial cellular communications relays allowing emergency first responders to have access to 4G LTE even when ground based systems were compromised.

In June 2017, NJII co-hosted a "Do Tank" – a design thinking workshop – at the Cape May-Lewes Ferry Terminal in North Cape May. It supported **Flirty** in staging the first-ever demonstration of off-shore delivery of emergency medical supplies to a stranded ship. It works with **Johns Hopkins** to demonstrate the use of drones for speeding the transfer of organs from donor to recipient hospital in urban airspace.

NJII has conducted pilot deployments of **DJI** drones to identify mosquito breeding grounds in Warren and Atlantic County. First identifying stagnant water accumulations in remote wooded areas, then refining surveillance to identify density of mosquito larvae from aerial reconnaissance, the team is now looking at drone delivery of mosquito control measures directly to affected sites. The threat of Zika, West Nile and other mosquito borne viruses elevates the importance of this work beyond mere pest control.

NJII is exploring the feasibility of using drones to enhance the care coordination activities of its Healthcare initiatives. Drone delivery of medication to stranded patients – housebound or immobilized individuals for whom a trip to a pharmacy is a challenge – could be part of a care regimen that ensures the patient is receiving prescribed treatments.

These activities serve as a magnet to attract small, entrepreneurial companies with airframe, sensor, and communications technology that benefits from easy access to the test bed and the flow of applications driven clients looking to explore the applications of unmanned systems technology. In addition to the KWWD location, there is a new science park on the edge of the **FAA William J. Hughes Test Center** in Pomona that will be a focal point for this emerging hub.

Advanced Development of Asset Protection Technologies (ADAPT)

In the current geopolitical environment in which the U.S. Army must operate, there is a need for advanced materials, material processes and systems that can function and survive in a variety of extreme environments that support the warfighter. The technology and application(s) need to be legacy compatible and capable of being fully integrated with future systems. The ADAPT Program is a multi-year, multi-million-dollar program to capitalize on new technological break-throughs in active materials, smart coatings, nano-technology, advanced and additive manufacturing, 3D material printing, micro-electronics, etc., to develop materials and devices that meet the Army's objectives for "smarter," more rapidly deployable, lighter weapons systems. To meet the vision of "manufacture on demand" Rapid Fabrication on the Battlefield" RFAB will provide innovative solutions, custom design & manufacture and integrate novel

Schedule	0	(Form	990	or	990-	EZ)	(2016)	
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technologies into functional systems for the creation and advancement of armaments and weapon systems optimized through advance and additive manufacturing. This program is a partnership with US Army Research Development and Engineering Command at Picatinny Arsenal in Rockaway, NJ.

Form 990, Part II, Line 4d.

Other program services is comprised of activities from the following iLabs:

Data Analytics iLab	272,562
BioPharma iLab	263,443
Financial Services iLab	261,459
Smart Infrastructure iLab	238,317
	1,035,781

Form 990, Part VI, Section A, Line 6.

New Jersey Innovation Institute, Inc.'s sole corporate member is the New Jersey Institute of Technology, a Section 115(a)(2) governmental entity.

Form 990, Part VI. Section A. Line 7a.

New Jersey Innovation Institute, Inc.'s (NJII) sole corporate member, New Jersey Institute of Technology, has the following powers reserved to it within NJII's bylaws: (1) To determine the size of NJII's Board of Directors; and (2) To appoint and remove NJII's Directors.

Form 990, Part VI, Section A, Line 7b.

New Jersey Innovation Institute, Inc.'s (NJII) sole corporate member, New Jersey Institute of Technology, has the following powers reserved to it within NJII's bylaws: (1) To authorize the amendment and restatement of NJII's bylaws and articles of incorporation; (2) To authorize the merger, consolidation or other reorganization of NJII; (3) To authorize the liquidation or dissolution of NJII; and (4) To authorize the initiation of insolvency or bankruptcy proceedings.

Form 990, Part VI, Section B, Line 8b.

Documentation of Committee Meetings or Actions: The New Jersey Innovation Institute, Inc.'s Board of Directors had no committees during the fiscal year ended June 30, 2017.

Form 990, Part VI, Section B, Line 11b.

Form 990 Review Process: Form 990 is prepared by New Jersey Institute of Technology and reviewed by an outside accounting firm. A copy of the Form 990 is provided to all members of the Board of Directors prior to its filing.

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Form 990, Part VI, Section B, Line 12c.

Explanation of Monitoring and Enforcement of Conflicts: Annually, all officers and directors sign statements to affirm compliance with the conflict of interest policy and to disclose interests that could give rise to conflicts. Conflicts are investigated and if conflicts are found, they are handled in accordance with procedures set forth in the policy, with actions of the governing board and committees documented in the minutes. In addition, periodic reviews are performed to ensure compliance with the conflict of interest policy.

Form 990, Part VI, Section B, Line 15a.

Compensation Review & Approval Process - CEO, Top Management: Compensation of the President & CEO of New Jersey Innovation Institute, Inc. is established by New Jersey Institute of Technology, the employer of record. Compensation levels are established within competitive ranges determined via comparisons with similar organizations and local market conditions.

Form 990, Part VI, Section B, Line 15b.

Compensation Review & Approval Process - Officers & Key Employees: Compensation of the Senior Vice President, Chief Operating Officer and Treasurer of New Jersey Innovation Institute, Inc. is established by New Jersey Institute of Technology, the employer of record. Compensation levels are established within competitive ranges determined via comparisons with similar organizations and local market conditions.

Form 990, Part VI, Section C, Line 19.

Other Organization Documents Publicly Available: New Jersey Innovation Institute, Inc. makes its governing documents, conflict of interest policy, and financial statements available to the public upon written request.

Form 990, Part XII, Line 2c.

Oversight of Audit and Selection of Independent Accountants: The New Jersey Innovation Institute, Inc.'s Board of Directors had the responsibility of oversight of the audit of its financial statements and selection of an independent accountant for the fiscal year ended June 30, 2017.

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.

Open to Public

OMB No 1545-0047

Employer identification number

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Ŷ × × Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Yes (f)
Direct controlling
entity 47-1042118 (e) End-of-year assets ٤ ٤ Public charity status (if section 501(c)(3)) <u>e</u> Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 115(a)(2) 501(c)(3) (c)
Legal domicile (state
or foreign country) Primary activity 2 Organization for NJIT one or more related tax-exempt organizations during the tax year Primary activity Public Research Fundraising University (a) Name, address, and EIN (if applicable) of disregarded entity (1) New Jersey Institute of Technology 22-6000910 (a) Name, address, and EIN of related organization 323 Martin Luther King Jr Blvd, Newark, NJ 07102 University Heights, Newark, NJ 07102 (2) Foundation at NJIT 22-1714037 New Jersey Innovation Institute, Inc. Name of the organization Part II Part I 6 € (2) €; 3 <u>(</u>9 ଞ୍ଚ 2 3

Schedule R (Form 990) 2016

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

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New Jersey Innovation Institute, Inc.

Schedule R (Form 990) 2016

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34

(i) Section 512(b)(13) controlled Schedule R (Form 990) 2016 Percentage ownership £ B entity? Yes Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part managing partner? ĝ General or (h) Percentage ownership Yes amount in box 20 of Schedule K-1 Code V—UBI (Form 1065) (g) Share of end-of-year assets Disproportionate allocations? ŝ (f) Share of total income Ξ Yes IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year (g) Share of end-ofyear assets (e)
Type of entity
(C corp, S corp, or trust) Share of total because it had one or more related organizations treated as a partnership during the tax year (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated, sections 512-514) excluded from tax under (c)
Legal domicile
(state or foreign country) (d)
(Direct controlling | (b) Primary activity (c) Legal domicile (state or foreign country) Primary activity (a)Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV Part III 8 5 €, Œ 2 €. (5) <u>(9</u> 2 3 **(5)** <u>e</u> <u>e</u> [2]

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Schedule R (Form 990) 2016 New Jersey Innovation Institute, Inc.

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

the following transactions with one or more related organizations listed in Parts II–IV? int from a controlled entity.	iy of 'v) re on(s) atior n(s)
following transactions with one or more related or om a controlled entity. Ization(s). tions for related organization(s). tions by related organization(s). inth related organization(s).	During the tax year, did the organization engage in any of the following transactions with one or more related seceipt of (i) interest, (ii) annuities, (iii) royalities, or (iv) rent from a controlled entity. Giff, grant, or capital contribution to related organization(s). Giff, grant, or capital contribution from related organization(s). Loans or loan guarantees by related organization(s). Dividends from related organization(s). Sale of assets from related organization(s). Exchange of assets from related organization(s). Exchange of assets from related organization(s). Lease of facilities, equipment, or other assets from related organization(s). Performance of services or membership or fundraising solicitations for related organization(s). Sharing of paid employees with related organization(s). Sharing of paid employees with related organization(s). Reimbursement paid to related organization(s) for expenses Reimbursement daid by related organization(s) for expenses
om a controlled entity ization(s) tions for related organizations by related organizations by related organizations hith related organization(s)	s, (III) royalities, or (IV) rent from a controlled entity. to related organization(s). from related organization(s). related organization(s). and organization(s). read organization(s). read organization(s). reanization(s). sther assets from related organization(s). rership or fundraising solicitations by related organization(s) rership or fundraising solicitations by related organization(s). reship or fundraising solicitations by related organization(s). reship or fundraising solicitations by related organization(s). related organization(s). ganization(s) for expenses
	ization engage in any of the s, (iii) royalties, or (iv) rent for related organization(s). from related organization(s). related organization(s). ed organization(s). rganization(s). rganization(s). ther assets from related organization or fundraising solicitalership or fundraising solicitalership or fundraising solicitalership or fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of fundraising solicitalership of solicitalership of solicitalership of fundraising solicitalership

New Jersey Innovation Institute, Inc.

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

(k) Percentage ownership 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. £ (j) General or *man*aging partner? Yes (I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h)
Disproportionate
allocations? Š Yes (g) Share of end-of-year assets Share of total income (e)
Are all partners section 501(c)(3) organizations? Yes No unrelated, excluded from tax under sections 512-514) income (related, Predominant € (c) Legal domicile (state or foreign country) Primary activity (1) (15) Name, address, and EIN of entity (12) (13) (44) (16) 2 €. <u>(5</u> (61) (5) 9 <u>65</u> 5 <u>@</u>

Schedule R (Form 990) 2016

Schedule R (For		New Jersey Innovation Institute, Inc	47-1042118	Page 5
Part VII	Supplem	ental Information.		
	Provide a	dditional information for responses to questions on Schedule R_See Instructi	ons.	
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