Department of the

# **Return of Organization Exempt From Income Tax**

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

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

▶ Go to  $\underline{www.irs.gov/Form990}$  for instructions and the latest information.

2018

DLN: 93493164017110 OMB No. 1545-0047

Open to Public Inspection

		nue Service			l l' 07.04	2010			
			C Name of organization	beginning 08-01-2018 , and	l ending 07-31	-2019	D Employe	r identif	ication number
		pplicable: change		plars of the University of Oxford					ication number
	me ch	-					98-6001	.062	
	tial ret		Doing business as Oxford University						
		n/terminated d return		ox if mail is not delivered to street ad	Idress) Room/suit	e	E Telephone	e number	
		on pending	Wollington Square						
				e, country, and ZIP or foreign postal	code				
			Oxford, Oxfordshire OX1 2JE United Kingdom (England, No	orthern Ireland, Scotland, and Wales)			<b>G</b> Gross red	eipts \$ 2	,711,005,963
			F Name and address of pr	incipal officer:		H(a) Is this	a group ret	urn for	
			Lindsay Pearson University Offices				linates?		□Yes 🗹 No
			Wellington Square Oxford OX1 2JD			H(b) Are all include		es	☐ Yes ☐No
			UK OX1 23B						instructions)
I Ta:	x-exer	npt status:	<b>☑</b> 501(c)(3) ☐ 501(c)(	) <b>◄</b> (insert no.) ☐ 4947(a)(1)	or 🗆 527	H(c) Group	exemption	number	<b>&gt;</b>
J W	ebsit	e:► ww	w.ox.ac.uk						
<b>K</b> Forr	n of o	rganization	: 🗹 Corporation 🗌 Trust 🗀	Association DOther >		<b>L</b> Year of forma	tion: 1096	M State	of legal domicile: UK
		C							
Pa	arti 1 :		mary	sion or most significant activities					
a.				are the advancement of learning		d research an	d its dissem	nination	by every means.
ည်	-	•							•
E	-								
Governance	_	Ch a al. Ma	:-	ion discontinued its operations o		the 250/	-¢:LL		
Ĝ				on discontinued its operations o verning body (Part VI, line 1a)			or its net as	ssets.	25
<b>∞</b>	l			ers of the governing body (Part			1	4	3
Activities &	l		•	l in calendar year 2018 (Part V, I	•		•	5	819
Ĭ	l		mber of volunteers (estimate		•		_	6	312
ACI	l		· ·	n Part VIII, column (C), line 12			-	7a	778,104
	ı			ne from Form 990-T, line 34 .			i	7b	778,104
	-						r Year	1	Current Year
	8	Contribut	tions and grants (Part VIII, lir	ne 1h)			821,000,0	60	794,096,930
Ravenue	ı			ne 2g)					1,694,818,314
ōΛċ	ı	_		(A), lines 3, 4, and 7d )			25,251,7	_	137,929,266
<b>~</b>	11	Other rev	venue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 11e	e)		79,984,8		84,161,453
	1			1 (must equal Part VIII, column (			2,636,047,0	96	2,711,005,963
	13	Grants a	nd similar amounts paid (Par	rt IX, column (A), lines 1–3)			112,053,4	88	111,550,482
	14	Benefits	paid to or for members (Part	IX, column (A), line 4)				0	0
ç	15	Salaries,	other compensation, employ	vee benefits (Part IX, column (A)	, lines 5–10)		1,223,579,0	25	1,196,145,139
Expenses	16a	Profession	onal fundraising fees (Part IX	, column (A), line 11e)				0	0
p et	ь	Total fund	raising expenses (Part IX, colum	n (D), line 25) ▶12,503,070					
Щ	17	Other ex	penses (Part IX, column (A),	lines 11a-11d, 11f-24e)	<del></del>		1,280,962,0	72	1,594,047,026
	18	Total exp	penses. Add lines 13–17 (mu	st equal Part IX, column (A), line	e 25)	2	2,616,594,5	85	2,901,742,647
	19	Revenue	less expenses. Subtract line	18 from line 12			19,452,5	11	-190,736,684
გ <u>გ</u>						Beginning o	of Current Ye	ar	End of Year
anc			-						
Ass. Bal	l		ets (Part X, line 16)				3,100,591,8	_	7,979,331,896
Net Assets or Fund Balances	l		oilities (Part X, line 26)				2,877,670,1		3,027,614,184
				t line 21 from line 20		į	5,222,921,6	57	4,951,717,712
	ırt II		ature Block						
				examined this return, including					
any k			er, it is true, correct, and con	nplete. Declaration of preparer (	other than office	r) is based or	i ali inioriia	ition or v	wnich preparer has
		1 k							
		Signat	ure of officer			2020 Date	)-06-12		
Sign		) Signat	are or officer			Dute			
Here	=		y Pearson Director of Finance or print name and title						
		17	Print/Type preparer's name	Preparer's signature	Dai	to I		TIN	
Da:-	1		ring Type preparer a Hairie	Treparer s signature	l Da	Ched	:k ∐ if	1114	
Paid		,  -	Firm's name		I		employed 's EIN ►		
Pre		<b>=1</b>							
Use	Un	'' <b>y</b>  ⊧	Firm's address 🕨			Phor	ne no.		
May t	he IR	S discuss	this return with the prepare	r shown above? (see instruction	s)				∕es □No
			duction Act Notice, see th	<u> </u>		Cat. No. 1:	1282Y		Form <b>990</b> (2018)

Form	990 (20	018)					Page 2
Pa	rt III	Statement o	f Program Serv	ice Accomplis	hments		
		Check if Schedu	ule O contains a res	ponse or note to a	any line in this Part III		🗆
1	Briefly		ganization's mission		,		
one ( educa ndep comn our s	Oxford b ation. W bendent nitted to tudents'	oringing together or do this in way scholarship and o equality of opp learning. The U	our staff, students s which benefit soci academic freedom ortunity and to engoniversity's strategic	and alumni, our of ety on a local, na while fostering a endering inclusivity priorities have be	colleges, faculties, depa tional and global scale. culture in which innova ty. We believe that dive een developed against a	research and its dissemination bartments and divisions to provid We build on the University's lor tion and collaboration play an in erse staff and students strengthe a background of local, national and partnership, and resources.	e world-class research and ng-standing traditions of nportant role. We are en our research and enhance
2	Did the	e organization u	ndertake anv signifi	cant program ser	vices during the year w	hich were not listed on	
_		ior Form 990 or					☐ Yes ☑ No
	,		e new services on S				
3					changes in how it cond	ucts, any program	
	service	_		-		. , , , ,	☐ Yes ☑ No
			e changes on Sched				
4	Descri Section	, be the organizat n 501(c)(3) and	ion's program servi	ce accomplishmer tions are required	to report the amount of	largest program services, as more of grants and allocations to othe	
4a	(Code:		) (Expenses \$	2,329,803,377	including grants of \$	111,570,482 ) (Revenue \$	1,694,818,314 )
	See Ad	ditional Data	, , ,				, , ,
4b	(Code:		) (Expenses \$		including grants of \$	) (Revenue \$	)
4c	(Code:		) (Expenses \$		including grants of \$	) (Revenue \$	)
	-						
4d	Other	program service	s (Describe in Sche	dule O.)			

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

22

rm	990 (2018)			Page
Pai	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
а	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		No
)	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
3	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
ı	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
а	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		No
)	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		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
	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		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
1	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		l No
•	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
2	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
3	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
a	Statements Regarding Other IRS Filings and Tax Compliance			_
_	Check if Schedule O contains a response or note to any line in this Part V		•	<u>✓</u>
_	Enter the number reported in Pay 2 of Form 1006 Enter 0 16 act and in Pay 40 200	$\square$	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 10,399  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Liner the namber of Forms W-ZM included in the fa <i>toriel "U"</i> II NOLADDIICADIE . I III I			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

	this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule $O$	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	AS , BE , BU , CA , CH , CI , EZ , FR , HK , HU , IN , LO , PE			
	If "Yes," enter the name of the foreign country: •, PK , RI , SF , UK , UP , VM			
5a	Shipses ith service distribution of the company of	5a		No

Nο

Nο

No

Nο

No

No

Nο

Nο

6a

6b

7a

**7**b

70

7e

7f

7g

7h

8

9a

12a

13a

14a

14b

15

No

Nο

Form 990 (2018)

7d

10a

10b

11a

11b

12b

13b

13c

	If res, has telled a rottle 350 i for all sycarize two to line 35, provide all explanation in Schedule 0 i		'
1	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	Υe
	$ AS \; , \; BE \; , \; BU \; , \; CA \; , \; CH \; , \; CI \; , \; EZ \; , \; FR \; , \; HK \; , \; HU \; , \; IN \; , \; LO \; , \; PE $ If "Yes," enter the name of the foreign country: $\blacktriangleright$ , PK , RI , SF , UK , UP , VM		
1	கிக்கு ithserocogiamis aftion filling and option amounts in the Bibliogram of the	5a	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	
	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

If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . . . Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were 

Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services

solicit any contributions that were not tax deductible as charitable contributions? . . . .

**9a** Did the sponsoring organization make any taxable distributions under section 4966? . . .

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

13 Section 501(c)(29) qualified nonprofit health insurance issuers.

**b** Gross income from other sources (Do not net amounts due or paid to other sources 

**b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

which the organization is licensed to issue qualified health plans . . . . Enter the amount of reserves on hand . . . . . . . . . . . . . . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O.

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Organizations that may receive deductible contributions under section 170(c).

**d** If "Yes," indicate the number of Forms 8282 filed during the year . . . .

Sponsoring organizations maintaining donor advised funds.

Section 501(c)(7) organizations. Enter:

11 Section 501(c)(12) organizations. Enter:

Form	990 (2018)			Page <b>6</b>
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	·	onse to i	lines <b>V</b>
_Se	ection A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 25		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b  3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
_Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	Yes	
100	Did the organization have local chapters, branches, or affiliates?	10a	res	No
TOG	Did the organization have local chapters, branches, or anniates:	IVa		
b	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		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
11a	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		No
11a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.		Yes	
11a b 12a	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
11a b 12a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	11a 12a		
11a b 12a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	11a 12a 12b	Yes	
11a b 12a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	11a 12a 12b	Yes Yes	
11a b 12a b c	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.  Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13	Yes Yes Yes	
11a b 12a b c 13 14	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent	11a 12a 12b 12c 13	Yes Yes Yes	
11a b 12a b c 13 14 15	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
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11a b 12a b c 13 14 15 a b 16a b	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?	11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	And branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Extion C. Disclosure  List the States with which a copy of this Form 990 is required to be filed  NY  Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b Tell 17 18	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Ection C. Disclosure  List the States with which a copy of this Form 990 is required to be filed▶  NY  Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	And branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Extion C. Disclosure  List the States with which a copy of this Form 990 is required to be filed  NY  Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes Yes	

Part VII

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

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

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

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

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

Check this box if neither the organization no	r any related o	ganizat	ion c	omp	ens	ated a	ny c	urrent officer, dire	ctor, or trustee.	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than c	ne b	ox, ι n of	t cha unle: ficer	and a	son	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) Professor L Richardson University of Oxford, Vice-Chancellor	35			х	х			493,645	0	0
(2) Mr G Kerr University of Oxford, Director of Finance	35.00			х	х			295,541	0	0
(3) Professor EG McKendrick University of Oxford, Registrar (to Aug 2018)	35.00			х	х		х	236,032	0	0
(4) Mrs Gill Aitken CB University of Oxford, Registrar (from Sep 2018)	35			х	х			79,843	0	0
(5) Mr N Portwood  OUP - Chief Executive/Secretary to the Delegates	35					Х		932,549	0	0
(6) Professor AM Buchan Pro-Vice-Chancellor	35					Х		810,555	0	0
(7) Giles Spackman OUP - Group Finance Director	35					х		545,333	0	0
(8) Peter Marshall OUP - Managing Director - ELT	35					х		514,335	0	0
(9) Professor P Tufano Dean of Said Business School	35					х		569,644	0	0

Part VII Section A. Officers, Direct	tors, Trustees	, Key	Emp	loye	es,	and	High	nest Compensate	ed Employees (co	ntinued)	Page 8
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	Position than of is b	on (de	(C) o no ox, u on of tor/t	) t cho unles ficer	eck moss persection and a	ore	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	Estin amount compe fron	nated of other nsation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2,1077-11130)	2,1033-1413C)	rela	ition and ited zations
1b Sub-Total						▶					
c Total from continuation sheets to P d Total (add lines 1b and 1c)  Total number of individuals (including					bove	<b>&gt;</b>	rece	4,477,477 eived more than \$1	0,000		0
of reportable compensation from the								·	·	Yes	No
3 Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i> .			ee, k	еу е •	mplo •	oyee,	or hi	ghest compensated		3 Yes	
4 For any individual listed on line 1a, is organization and related organization individual										4 Yes	
5 Did any person listed on line 1a recei services rendered to the organization	?If "Yes," compi									5	No
Section B. Independent Contract  Complete this table for your five high		d indep	ender	nt co	ntra	actors	that	received more than	\$100,000 of comp	ensation	
from the organization. Report compe	nsation for the c	alendar	year	end	ling	with o	r wit	hin the organization	n's tax year. (B)	1 4	C)
Name a	and business addre	ess						Desc Information	ription of services	Comp	ensation 0,960,393
Dell House The Boulevard Cain Road Bracknell, Berkshire RD12 1LF UK								Institution	realifology		
E W Beard  201 Cumnor Hill Oxford OX2 9PJ UK								Construction	n/ Building Services		9,710,493
Life Technologies Life Technologies Ltd 3 Fountain Drive Inchinnan Business Park, Paisley								Life Science	s		8,038,423
WK Key Travel Limited 28-32 Britannia Street London WC1X 9JF								Travel and I	ogistics		6,778,290
UK Illumina Cambridge Ltd Illumina Centre 19 Granta Park								Life Science	S		5,744,666
Cambridge CB21 6DF <u>UK</u> 2 Total number of independent contractor compensation from the organization ▶		not lim	ited t	to th	ose	listed	abov	ve) who received m	ore than \$100,000 o	of	
and organization p										Form 9	90 (2018)

Part	VII													
		Check if Schedul	e O contains a	a respo	onse or r	note to any	(,	nis Part VIII A) revenue	Rel: ex	(B) ated or empt	Uı b	(C) nrelated usiness evenue	exc	(D) Revenue luded from
	1	a Federated campaign	ne	1-		0				venue	'	evenue		12 - 514
nts nts		<b>b</b> Membership dues		1a 1b	<u> </u>									
ons, Gifts, Grants Similar Amounts		c Fundraising events		1c										
ls, ( An		d Related organizatio		1d		9,575,072								
Giff		e Government grants (co		1e	l 62	26,096,296								
ns,		f All other contributions,												
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts nabove  9 Noncash contribution	ot included	1f	15	58,425,562								
Sont and (		in lines 1a - 1f:\$ h Total. Add lines 1a-	-1f		,234,299	<u>9</u> . ►								
		Total / (dd III/e3 14		•	•	Business		94,096,930	Т		I		1	
Service Revenue	28	a Education, publishing ar	nd research				611310	1,625,	722,700	1,624,94	4,596	778,	104	0
Rev	Ŀ			_										
vice	c	c ———		_									_	
Şe	c	d												
ranı	e	e ————————————————————————————————————	rvice revenue					69,0	095,614	69,09	5,614		0	0
Program						1,694,	818,314							
		JTotal. Add lines 2a-2 Investment income (ii			interest	and other	1		Т					
		similar amounts) .			interest,	and other	· <u> </u>	122,706,80	3	0		0		122,706,803
		Income from investme			ond proc		-		,	0		0		0
	5	Royalties	(i) Rea		· ·	· Personal	•	55,052,27	+	55,052,274		0		0
	6a	a Gross rents	(I) Real		(11) 1	Personal	-							
			23,6	56,313			0							
		<b>b</b> Less: rental expenses		0			0							
	•	c Rental income or (loss)	23,6	56,313			0							
		<b>d</b> Net rental income o	r (loss)				_	23,656,313	3	0		0		23,656,313
	ľ	- Net rental medine o	(i) Securit	ies		Other			$\vdash$					
	7 <i>a</i>	a Gross amount from sales of assets other than inventory		22,463	,		0							
	ı	<b>b</b> Less: cost or other basis and sales expenses		0			0							
		C Gain or (loss)		22,463			0	45 222 46		0				15 222 462
		<b>d</b> Net gain or (loss) . <b>a</b> Gross income from for				<u> </u>		15,222,463	3	0		0		15,222,463
Other Revenue		(not including \$ contributions reporte See Part IV, line 18	0 ed on line 1c).	of										
Re		<b>b</b> Less: direct expense		b										
her		<b>c</b> Net income or (loss) <b>a</b> Gross income from g		_	ents .	• •								
ŏ	36	See Part IV, line 19	• • •	es.										
				a										
		<b>b</b> Less: direct expense: <b>c</b> Net income or (loss)		b activit	ies									
		aGross sales of invent		400,710		• •								
		returns and allowand		a										
	ı	<b>b</b> Less: cost of goods s	sold	b			-							
	•	<b>c</b> Net income or (loss)		invent	ory .	. •								
		Miscellaneous	Revenue		Busin	ess Code								
	11	1a												
		<b>b</b>					+		1					
		<b>-</b>												
		с					+		+					
	ľ	-												
		d All other revenue .					+	5,452,866	5	5,452,866		0		0
		e Total. Add lines 11a			٠	<b>&gt;</b>				. , -		<u> </u>		
	12	<b>2 Total revenue.</b> See	Instructions.					5,452,86						
							2	2,711,005,96	3	1,754,545,350		778,104		161,585,579

Form 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all $cc$ Check if Schedule O contains a response or note to any	-		. ,	П
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0	general expenses	
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	111,550,482	111,550,482		
4 Benefits paid to or for members	0	0		
<b>5</b> Compensation of current officers, directors, trustees, and key employees	4,477,477	4,096,908	344,324	36,245
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	
7 Other salaries and wages	958,367,387	879,602,143	70,976,331	7,788,913
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	145,138,950	133,208,534	10,750,854	1,179,562
9 Other employee benefits	0	0	0	0
<b>10</b> Payroll taxes	88,161,325	80,914,467	6,530,360	716,498
11 Fees for services (non-employees):				
a Management	0	0	0	0
<b>b</b> Legal	6,275,922	2,323,312	3,947,928	4,682
c Accounting	1,060,913	123,447	937,466	0
<b>d</b> Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	88,718,765	52,795,784	35,334,569	588,412
12 Advertising and promotion	5,762,541	4,679,302	467,164	616,075
13 Office expenses	620,618,231	636,028,184	-15,596,462	186,509
14 Information technology	69,325,238	56,975,594	11,852,380	497,264
15 Royalties	1,189,084	882,637	305,680	767
<b>16</b> Occupancy	89,041,818	77,724,806	11,313,439	3,573
<b>17</b> Travel	40,716,895	38,408,077	2,014,434	294,384
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .	0	0	0	0
19 Conferences, conventions, and meetings	22,674,792	21,335,553	1,120,345	218,894
<b>20</b> Interest	40,459,817	0	40,459,817	0
21 Payments to affiliates	103,745,829	95,632,905	8,073,025	39,899
22 Depreciation, depletion, and amortization	170,595,870	146,392,699	24,201,081	2,090
23 Insurance	3,446,960	1,690,475	1,755,731	754
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Movement in pension provisions	346,823,010	0	346,823,010	0

3,238,616

2,259,363

-523,303

-21,383,335

2,901,742,647

2,161,480

1,186,154

1,222,281

-19,131,847

2,329,803,377

983,194

994,294

-1,816,469

-2,336,295

559,436,200

93,942

78,915

70,885

84,807

12,503,070

Form **990** (2018)

**b** Staff Training

d Commissions

e All other expenses

c Dues and Subscriptions

25 Total functional expenses. Add lines 1 through 24e

**26 Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here ► ☐ if following SOP 98-2 (ASC 958-720).

Forn	1 990	(2018)					Page <b>11</b>
Р	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗆
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			0	1	0
	2	Savings and temporary cash investments .		[	382,567,167	2	749,033,240
	3	Pledges and grants receivable, net			187,906,239	3	256,774,830
	4	Accounts receivable, net		[	426,939,954	4	332,674,088
Assets	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L Loans and other receivables from other disquality	nployees. Complete	0	5	0	
		section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	S(c)(3)(B), and of section 501(c)(9) ostructions) Complete	0	6	0	
	7	Notes and loans receivable, net	0	7	0		
SS	8	Inventories for sale or use			101,002,946	8	94,840,062
4	9	Prepaid expenses and deferred charges			25,888,026	9	55,734,396
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,852,001,499			
	b	Less: accumulated depreciation	10b	906,988,370	2,036,228,654	10c	1,945,013,129
	11	Investments—publicly traded securities .			1,277,286,017	11	972,245,601
	12	Investments—other securities. See Part IV, line	11 .		3,181,470,996	12	3,162,346,485
	13	Investments—program-related. See Part IV, line	11 .		137,106,672	13	133,179,021
	14	Intangible assets		[	94,916,824	14	89,140,306
	15	Other assets. See Part IV, line 11		[	249,278,334	15	188,350,738
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	8,100,591,829	16	7,979,331,896
	17	Accounts payable and accrued expenses			433,961,986	17	426,308,953
	18	Grants payable			390,526,664	18	395,175,736
	19	Deferred revenue		Γ	280,135,426	19	245,106,849
	20	Tax-exempt bond liabilities		[	0	20	0
S	21	Escrow or custodial account liability. Complete F	Part IV	of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee					
ge		persons. Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrela	ted th	ird parties	0	23	0
	24	Unsecured notes and loans payable to unrelated	l third	parties	1,281,677,072	24	1,164,181,030

491.369.024

2.877.670.172

5,222,921,657

5,222,921,657

8,100,591,829

25

26

27

28 29

31

32

33

34

0 30 0

796.841.616

3.027.614.184

0

4,951,717,712

4,951,717,712

7,979,331,896

Form **990** (2018)

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

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

and other liabilities not included on lines 17 - 24).

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . .

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

25

26

27 28

29

30

31

32

33

34

Net Assets or Fund Balances

Yes

No

Form 990 (2018)

2c

3a

3h

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

#### Additional Data

Software ID: 18007995

**Software Version:** v1.00

**EIN:** 98-6001062

Name: The Chancellor Master & Scholars of the University of

Oxford

Form 990 (2018)

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

Over 24,000 students from a diverse range of backgrounds and nationalities benefit from Oxford's resources, including 11,930 undergraduates and 11,813 postgraduates. Every year more than 14,000 students enrol on courses at the Department for Continuing Education, making Oxford University one of the largest providers of continuing education in the UK. Oxford consistently has the highest research income from external sponsors of any UK university. The University research activity involves more than 70 departments, the colleges, over 1.800 academic staff, more than 5.500 research and research support staff, and over 6.100 postgraduate research students. According to the 2014 Research Excellence Framework, the official UK-wide assessment of all university research, Oxford has the largest volume of world-leading research in the country. The University is also rated top in the REF power rankings published by Research Fortnight. Oxford is ranked first in the world in the Times Higher Education (THE) World University Rankings for 2019, for the third year running, and for the eight consecutive year ranked first in the world for Clinical, Pre-Clinical and Health subjects. It is also ranked first in the world for Social Sciences, for Engineering and Technology, and for Computer Science, third in the world and first in the UK for Business and Economics, and for Arts and Humanities; third in the world and second in the UK for Life Sciences; fifth in the world and first in the UK for Education; and fifth in the world and second in the UK for Law. Oxford is ranked first in the world in Arts and Humanities in the QS World University Rankings by Subject 2019. It ranks second for Life Sciences & Medicine, fourth for Social Sciences, fifth for Natural Sciences, and sixth for Engineering and Technology, Oxford is ranked fifth in the world in the OS World Rankings (2019) and seventh in the world in the Academic Ranking of World Universities compiled by Shanghai Jiao tong University (2019). Oxford is ranked second in the UK by The Sunday Times (2019), The Guardian (2019) and The Complete University Guide (2019). The excellence of Oxford's academic community is demonstrated by the inclusion of over 85 Fellows of the Royal Society and more than 175 Fellows of the British Academy. In 2019, five Oxford professors were elected to the Fellowship of the Royal Society, eight to the Fellowship of the Academy of Medical Sciences, eight to the Fellowship of the British Academy, four to the Fellowship of the Royal Academy of Engineering and four were elected to the Fellowship of the Academy of Social Sciences. Oxford University Press (OUP) is a department of the University of Oxford. It furthers the University's objective of excellence in research, scholarship, and education through publishing worldwide. With 6,000 staff across more than 50 offices, OUP is the world's largest university press with the widest global presence. OUP has a firm commitment to producing outstanding materials and services in our core markets of research, education, and the learning of English. We publish thousands of new titles each year, which are sold in approximately 200 countries and regions, and in around 90 languages. To further enhance the educational experience of our learners, we also support teachers by running professional development events worldwide. Last year, these events were attended by almost

400,000 teachers. Whether it's through primary and secondary school education texts. English language teaching (ELT) resources, children's fiction, university textbooks.

scholarly monographs and journals, or dictionaries, everything we do helps to change people's lives through education and research.

me	GKA	APHIC Pri	nt - DO NOT	PROCESS	As Filed Data -			DLN: 9	3493164017110
SCH Form 90EZ	ı 990	ULE A ) or	Сотр		Charity Staturganization is a sect 4947(a)(1) nonexe	ion 501(c)(3) c empt charitable	organization or trust.		2018
		the Treasury		► Go to	www.irs.gov/Form				Open to Public Inspection
me	of th	e organiza	<b>tion</b> nolars of the Unive	ersity of Oxford				Employer identific	ation number
Part		Peacon	for Bublic Cl	aarity Stati	<b>us</b> (All organization	s must comple	to this part ) 9	98-6001062	
					it is: (For lines 1 thro			see mstructions.	
		A church, c	onvention of ch	nurches, or as	sociation of churches	described in <b>sect</b>	tion <b>170</b> (b)( <b>1</b> )	(A)(i).	
	<b>✓</b>	A school de	scribed in <b>sect</b>	ion 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ).)		
		A hospital o	or a cooperative	e hospital serv	vice organization desc	ribed in <b>section</b>	170(b)(1)(A)(	iii).	
		A medical r name, city,		zation operate	ed in conjunction with	a hospital descri	bed in <b>section :</b>	170(b)(1)(A)(iii). E	nter the hospital's
			ation operated (iv). (Complete		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>
					governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).	
		An organiza	ation that norm '0(b)(1)(A)(v	ally receives i). (Complete	a substantial part of it Part II.)	s support from a	governmental u	nit or from the gener	al public described ir
		A communi	ty trust describ	ed in <b>section</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)		
		An agriculti non-land gi	ural research or rant college of	rganization de agriculture. S	escribed in <b>170(b)(1)</b> ee instructions. Enter	(A)(ix) operated the name, city, a	d in conjunction and state of the o	with a land-grant coll college or university:	ege or university or
		from activit	ies related to it income and ur	ts exempt fun related busin	(1) more than 331/39 ctions—subject to ceress taxable income (lemplete Part III.)	tain exceptions, a	and (2) no more	than 331/3% of its su	ipport from gross
					exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
		more public	ly supported o	rganizations d	d exclusively for the be described in <b>section 5</b> the type of supporting	09(a)(1) or sec	tion 509(a)(2	). See section 509(a	
		<b>Type I.</b> A so	supporting orga	nization oper to regularly a	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
		manageme		rting organiza	ervised or controlled intion vested in the sare				
					supporting organizatio ons). <b>You must com</b>				ted with, its
		Type III n	on-functional integrated. Th	lly integrated a company of the comp	d. A supporting organi n generally must satis t IV, Sections A and	ization operated i fy a distribution i	in connection wi	th its supported organ	
		Check this	box if the orgai	nization receiv	ved a written determing integrated supporting	ation from the II		pe I, Type II, Type II	I functionally
E	nter					-		<u> </u>	
					pported organization(				
		ame of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)
						Yes	No		
tal									
	perw	vork Reduc or 990-EZ.	tion Act Notic	e, see the Ir	nstructions for	Cat. No. 11285	F :	Schedule A (Form 9	90 or 990-EZ) 201

Page 2

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

S	Section A. Public Support						
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(4) 2017	(B) 2013	(6) 2010	(4) 2017	(0) 2010	(1) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grant.") .						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from						
	line 4.						
9	ection B. Total Support						1
	Calendar year						
	(or fiscal year beginning in) ▶	<b>(a)</b> 2014	<b>(b)</b> 2015	(c)2016	(d)2017	<b>(e)</b> 2018	(f)Total
7	Amounts from line 4						
8	Gross income from interest,						
٠	dividends, payments received on	1					
	securities loans, rents, royalties and	1					
	income from similar sources	1					
9	Net income from unrelated business						
-	activities, whether or not the	1					
	business is regularly carried on	1					
10	Other income. Do not include gain or						
	loss from the sale of capital assets	1					
	(Explain in Part VI.)						
11	Total support. Add lines 7 through						
	10					<u> </u>	
12	Gross receipts from related activities, e	tc. (see instructio	ons)			12	
13	First five years. If the Form 990 is for	the organization	's first, second, th	ird, fourth, or fifth	tax vear as a sec	tion 501(c)(3) or	anization.
	check this box and <b>stop here</b>	_		, ,	,	` ' ' ' '	,
	check this box and stop here	C D					
	ection C. Computation of Public						
	Public support percentage for 2018 (line					14	
15	Public support percentage for 2017 Sch	edule A, Part II, l	ine 14			15	
16a	<b>33 1/3% support test—2018.</b> If the	organization did r	not check the box	on line 13, and lin	e 14 is 33 1/3% oı	more, check this	box
	and stop here. The organization qualif						
b	33 1/3% support test—2017. If the						ck this
17a	box and <b>stop here.</b> The organization of <b>10%-facts-and-circumstances test</b> is 10% or more, and if the organization in Part VI how the organization meets t	<b>–2018.</b> If the org meets the "facts	ganization did not -and-circumstance	check a box on lines" test, check this	e 13, 16a, or 16b box and <b>stop he</b>	, and line 14 •re. Explain	▶⊔
b	organization	: <b>—2017.</b> If the or	acts-and-circumst	ances" test, check	this box and <b>sto</b>	p here.	▶□

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

Р	art IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		1 490 2
	(Complete only if you cl					to qualify und	ler Part II. If
	the organization fails to	qualify under t	the tests listed l	pelow, please co	mplete Part II.)		
Se	ection A. Public Support						_
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
-	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
4	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
_	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
_	13 for the year. Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
J	from line 6.)						
Se	ection B. Total Support				•		•
	Calendar year	(2) 2014	(h) 2015	(a) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30,						
_	1975. Add lines 10a and 10b.						
С 11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c,						
	11, and 12.)						
14	First five years. If the Form 990 is for	_			,		
	check this box and <b>stop here</b>						▶ ⊔
	ection C. Computation of Public S			1 (6)			
15	Public support percentage for 2018 (lin		•	, , ,		15	
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr						·
17	Investment income percentage for 201	. <b>8</b> (line 10c, colur	nn (f) divided by	line 13, column (f	))	17	
18	Investment income percentage from 20					18	
19a	<b>331/3% support tests—2018.</b> If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not
	more than 33 1/3%, check this box and s	stop here. The or	rganization qualifi	es as a publicly su	ipported organizati	ion	. ▶□
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	and stop here.	The organization o	qualifies as a publ	icly supported orga	anization	. ▶□
20	Private foundation. If the organization						►□

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

Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations.

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b

organization's organizing document? 5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

9b

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

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

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below. 10a 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

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 01 990-EZ) 2016		- F	age 3
₽}	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>		<u> </u>
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
	governing body of a supported organization:	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	<b>11</b> c		
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.	-		ĺ
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
_	Section D. All Type III Supporting Organizations		<u> </u>	
	,,,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
_	Section E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct)	ions):		
_	a  The organization satisfied the Activities Test. Complete <b>line 2</b> below.	00		
	b  The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. <b>Answer (a) and (b) below.</b>		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		<u> </u>
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	<u> </u>		<u> </u>
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		_

Sched	dule A (Form 990 or 990-EZ) 2018			Page <b>6</b>
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	(B) Current Year (optional)			
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Chack have if the surrent year is the organization's first as a non-functionally in	toarst.	ad Type III supporting or	raprization (coo

Schedule A (Form 990 or 990-EZ) (2018)

b Applied to 2018 distributable amount
c Remainder. Subtract lines 4a and 4b from 4.
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines

See instructions.

d Excess from 2017.e Excess from 2018.

3j and 4c.

8 Breakdown of line 7:

#### Additional Data

instructions).

**Software ID:** 18007995 Software Version: v1.00

**EIN:** 98-6001062

Name: The Chancellor Master & Scholars of the University of

Oxford

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See

Facts And Circumstances Test

**SCHEDULE D** 

(Form 990)

Department of the Treasury

DLN: 93493164017110

OMB No. 1545-0047

## **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.

Open to Public

	l -	gov/Form990 for the latest information.			nspection
<b>Na</b> The	me of the organization Chancellor Master & Scholars of the University of Oxford		-	oloyer identification	on number
Pa	Organizations Maintaining Donor Adv Complete if the organization answered "Ye	ised Funds or Other Similar Funds o			
		(a) Donor advised funds		(b)Funds and othe	r accounts
	Total number at end of year				
:	Aggregate value of contributions to (during year)				
1	Aggregate value of grants from (during year)				
	Aggregate value at end of year				
1	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex			_	☐ Yes ☐ No
	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?	r or donor advisor, or for any other purpose o			☐ Yes ☐ No
Pa	rt II Conservation Easements. Complete if t	he organization answered "Yes" on Forn	n 990	, Part IV, line 7.	
	Purpose(s) of conservation easements held by the orga	anization (check all that apply).			
	Preservation of land for public use (e.g., recreation	on or education) $\square$ Preservation of an	histor	ically important land	d area
	Protection of natural habitat	☐ Preservation of a c	ertifie	d historic structure	
	Preservation of open space				
!	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation contribution in the for	m of a	a conservation  Held at the End	l of the Year
а	Total number of conservation easements		2a	Tield de cire zind	or the real
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified histor	ric structure included in (a)	2c		
d	Number of conservation easements included in (c) acqu structure listed in the National Register	uired after 7/25/06, and not on a historic	2d		
l	Number of conservation easements modified, transferratax year ▶	ed, released, extinguished, or terminated by t	the or	ganization during th	е
	Number of states where property subject to conservation	on easement is located <b>&gt;</b>			
i	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		of viola	ations,	□ No
,	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcing co	nserv		
,	Amount of expenses incurred in monitoring, inspecting  \$ \\$	, handling of violations, and enforcing conserv	vation	easements during t	he year
,	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?		70(h)(	4)(B)(i)	□ No
ı	In Part XIII, describe how the organization reports con- balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	e footnote to the organization's financial state		atement, and	_ No
ar	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treasures, or Oth	er Si	milar Assets.	
a	If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its fina	16 (ASC 958), not to report in its revenue star public exhibition, education, or research in f			
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items:	7, 1			
(	i) Revenue included on Form 990, Part VIII, line 1			<b>▶</b> \$	7,850,325
	i)Assets included in Form 990, Part X				113,919,276
	If the organization received or held works of art, histor following amounts required to be reported under SFAS	ical treasures, or other similar assets for final			
а	Revenue included on Form 990, Part VIII, line 1	•		. ▶\$	0
b	Assets included in Form 990, Part X			. \$	0
	•				

Pari	300	Organizations Ma	aintaining Collections o	of Art, Histo	rical T	reas	ures, or	Other	Similar As	sets (conti	nued)	
3		g the organization's acques (check all that apply):	uisition, accession, and other	records, check	any of	the fo	ollowing tl	nat are a	significant u	ise of its coll	ection	
а	<b>✓</b>	Public exhibition		d	<b>✓</b>	Loar	or excha	nge prog	ırams			
b	<b>✓</b>	Scholarly research		е		Othe	er					
С	<b>✓</b>	Preservation for future	generations									
4	Provi Part		organization's collections and	explain how th	ney furt	her th	e organiz	ation's ex	kempt purpo	se in		
5	Durir asset	ng the year, did the orga ts to be sold to raise fun	anization solicit or receive do Ids rather than to be maintai	nations of art, ned as part of t	historica the orga	al trea anizati	sures or o ion's colle	other sim	ilar	☐ Yes	<b></b> N	o
Par	t IV		odial Arrangements. ganization answered "Yes	" on Form 99	0, Part	: IV,	ine 9, or	reporte	ed an amou	ınt on Form		
1a			, trustee, custodian or other </th <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>☐ Yes</th> <th>□ N</th> <th>o</th>							☐ Yes	□ N	o
b	If "Y	es," explain the arrange	ment in Part XIII and comple	ete the followin	g table:		Γ		Α	mount		_
c					-			1c				_
d	Addit	tions during the year .						1d				_
e	Distr	ibutions during the year	·				[	1e				_
f	Endir	ng balance					[	1f				
2a	Did t	he organization include:	an amount on Form 990, Pa	t X, line 21, fo	r escrov	v or c	- ustodial a	ccount lia	bility?	☐ Yes	□ N	0
b			ment in Part XIII. Check her									
	rt V		<b>is.</b> Complete if the organ									
			(a)Currer		Prior yea		(c)Two ye		(d)Three yea		our yea	rs back
<b>1</b> a	Beginr	ning of year balance .	1,331	,495,474	L,208,32	4,243	1,11	2,661,555	1,127,	805,445	1,004,	029,025
b	Contri	butions	67	,620,688	55,40	4,401	4	5,091,688	55,	650,742	124,	574,630
c	Net in	vestment earnings, gain	s, and losses	,751,844	200,68	8,327	9	6,241,595	95,	264,905	128,	141,205
d	Grants	s or scholarships	. 14	,751,545	13,44	7,616	1	1,167,420	14,	028,140	13,	705,818
		expenditures for facilitie	es 18	,666,595	17,01	6,605	2	4,665,446	22,	042,375	30,	643,445
f	Admin	istrative expenses .		,211,479	2,92	7,608		4,038,656	4,	972,765	8,	001,747
g	End of	f year balance	1,396	,238,387	L,431,02	5,142	1,21	4,123,316	1,237,	677,812	1,204,	393,850
2	Provi	ide the estimated percer	ntage of the current year end	l balance (line	1g, colu	mn (a	i)) held as	s:				
а	Boar	d designated or quasi-e	ndowment ► 0 %									
b	Perm	nanent endowment ►	80.6 %									
c	Tem	porarily restricted endov	vment ► 19.4 %									
			2b, and 2c should equal 100									
3а		here endowment funds nization by:	not in the possession of the	organization th	at are h	ield ar	nd admini	stered fo	r the		Yes	No
	-	nrelated organizations								3a(i)	163	No
	• •	related organizations .								3a(ii)		No
b		_	ated organizations listed as r							3b		
4	Desc	ribe in Part XIII the inte	nded uses of the organizatio	n's endowment	funds.							
Par	t VI	Land, Buildings,				-,			000 -			
	Descr	iption of property	ganization answered "Yes (a) Cost or other basis (investment)	(b) Cost or other					epreciation		ook valu	e
					420.0	20.70					400	220 707
	Land	ŀ	271 721 576		•	30,707			769 601 012			330,707
		ngs	271,731,576		2,201,2		+		768,601,012			1,369,261
		hold improvements	0		· ·	51,937	-		18,956,518			3,195,419
d	⊏quipr	ment			217,5	48,582	·		119,430,840		98	3,117,742

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

Part VII Investments—Other Securities. Complete if the	he organization an	swered "Yes" on Fo	rm 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b) Book value		Method of valuation:
(including name of security)  (1) Financial derivatives		Cost or	end-of-year market value
(2) Closely-held equity interests			
(3) Other(A) Managed Funds	2,790,387,08	3	F
(B) Unquoted spinout companies	204,469,43	8	F
(C) 3rd Party Managed	167,489,96	4	F
(D)	, ,		
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	3,162,346,48	5	
Part VIII Investments—Program Related.			
Complete if the organization answered 'Yes' on I  (a) Description of investment	Form 990, Part IV, (b) Book valu		1 990, Part X, line 13.
	(b) Book value		end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)  Part IX Other Assets. Complete if the organization answered	d 'Yes' on Form 990,	 Part IV, line 11d. See	Form 990, Part X, line 15.
(a) Description	n		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X Other Liabilities. Complete if the organization a			line 11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	(b)	Book value	
(1) Federal income taxes			
Amounts due to associated undertakings Provision for liabilities and charges		31,793,734 19,571,965	
Pension Deficit Provision		745,475,917	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.) <b>2.</b> Liability for uncertain tax positions. In Part XIII, provide the text of	of the footnote to the	796,841,616 organization's financia	al statements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 1		-	· —

2

Schedule D (Form 990) 2018

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . . .

Page 4

b	Donated services and use of facili	ties	2b			
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line <b>2e</b> from line <b>1</b> .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1:				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.) .		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 1	2.)		5	
Par		penses per Audited Financial State ization answered 'Yes' on Form 990, P			Returi	n.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25:				
а	Donated services and use of facili	ities	2a			
b	Prior year adjustments		2b			
c	Other losses		2c			
d	Other (Describe in Part XIII.) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 🔒 .	4a			
b	Other (Describe in Part XIII.) .		4b			
c	Add lines <b>4a</b> and <b>4b</b>				4c	
5	Total expenses. Add lines <b>3</b> and 4	4c. (This must equal Form 990, Part I, line	18.) .		5	
Pai	t XIII Supplemental Info	ormation				
		art II, lines 3, 5, and 9; Part III, lines 1a a s 2d and 4b. Also complete this part to prov			V, line	4; Part X, line 2; Part
	Return Reference		Exp	lanation		
See A	Additional Data Table					
					Sched	lule D (Form 990) 2018

2a

	Page <b>5</b>
Information (continued)	
Explanation	

Schedule D (Form 990) 2018

#### **Additional Data**

Software ID: 18007995
Software Version: v1.00

**EIN:** 98-6001062

Name: The Chancellor Master & Scholars of the University of

Oxford

### Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 4	The University of Oxford collections relate to museums, libraries, and other collections.  The University objectives are to make the collections a focus for research, teaching, and collection-based scholarship within the University. The collections are used as a research resource for a wide range of scholarly users, a facility for interaction between the University and the public and an active contributor to the region's cultural development. Over 3.3 million visitors were welcomed to the University's gardens, libraries and museums in the last year. Exhibition highlights included; * Jeff Koons Exhibition at the Ashmolean Museum; * Messy Realities at the Pitt Rivers Museum; * Multaka-Oxford: an award-winning project at the Pitt Rivers Museum and the History of Science Museum which creates volunteering opportunities for people who have recently arrived in Oxford as forced migrants * The opening of the Herbarium Room at the Botanic Gardens

upplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4	The University has significant numbers of individual endowments to be used for specified p urposes within the remit of University activities. To ensure that endowment gifts provide the greatest benefit possible and where appropriate to ensure that their charitable benefit is maintained in perpetuity the University invests unspent endowment reserves and capita I in a mixture of investment vehicles. Endowment reserves fall into the following categorites: * General academic * Academic posts * Scholarship funds * Support for libraries and museums * Societies * Prize funds

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493164017110 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ► Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** The Chancellor Master & Scholars of the University of Oxford 98-6001062 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . . . . . . . . . . . . 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? . . . . . . . . 5b Νo **c** Employment of faculty or administrative staff? 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? . . . . . 5g Νo 5h No If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a **b** Has the organization's right to such aid ever been revoked or suspended? . . . . . . . . No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. . . . . . . . . . . . Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2018)

Return Reference	Explanation
Schedule E, Part I, Line 3	A racially discriminatory policy would be illegal within the UK so it would be unusual for the University to make such a statement. However, the University's undergraduate and postgraduate admissions websites and prospectuses make it clear that admissions decisions are taken within the framework of the University's Equality Policy and the Equality Act 2010, and specifically that "Oxford is committed to recruiting the best candidates from all backgrounds and all identities. The University is committed to fostering an inclusive culture which promotes equality and values diversity."
Schedule E, Part I, Line 6	Oxford University receives various forms of grants and aid from U.K government agencies including via the Higher Education Council for England (HEFCE). Research funding is received from a variety of US governmental agencies. During the academic year to July 2019, this totalled \$9,795,416. National Institutes of Health USA \$ 4,663,667 United States Agency for International Development \$ 1,124,878 United States Air Force \$ 979,385 United States Army \$ 802,876 Centers for Disease Control and Prevention \$ 367,221 Intelligence Advanced Research Projects Activity \$ 315,696 US Navy Region Centre Singapore \$ 256,091 US Department of Commerce \$ 251,484 Air Force Research Laboratory \$ 223,193 US Department of Defence \$ 146,063 Office of Naval Research \$ 136,449 European Office Aerospace Research & Development \$ 133,282 Defence Advanced Research Projects Agency (DARPA) \$ 120,768 United States Geological Survey \$ 109,562 United States Department of Energy \$ 103,584 US Defence Threat Reduction Agency \$ 33,156 National Energy Research Scientific Computing Center \$ 18,381 Naval Medical Research Centre \$ 6,731 U.S. Department of State \$ 2,774 National Institute of Food and Agriculture \$ 176
	Schedule E (Form 990 or 990-EZ) (2018)

eme dital file prine by	efile GRAPHIC print - DO NOT PROCESS					
SCHEDULE F	Statement o	f Activities	Outside the Un	ited States	OMB No. 1545-0047	
(Form 990)  Department of the Treasury Internal Revenue Service		► Attach	Yes" to Form 990, Part IV, I to Form 990. nstructions and the latest in	2018 Open to Public Inspection		
Name of the organization				Employer ide	ntification number	
The Chancellor Master & Schola	rs of the University of	Oxford		98-6001062		
<b>General Inform</b> Form 990, Part		es Outside the l	<b>Jnited States.</b> Comple	ete if the organization	answered "Yes" to	
other assistance, the g	antees' eligibility for	the grants or assi	substantiate the amoun stance, and the selection	criteria used	✓ Yes □ No	
2 For grantmakers. Des outside the United Stat		rganization's proce	dures for monitoring the	use of its grants and o	ther assistance	
<b>3</b> Activites per Region. (The	e following Part I, line	3 table can be dupli	cated if additional space is	needed.)		
(a) Region	<b>(b)</b> Number offices in the region		(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a <b>(f)</b> Total expenditures for and investments in region	
See Add'l Data						
3a Sub-total						
c Totals (add lines 3a and 3	3b)	기 18,933	8		2,329,803,377	

Part II			<b>.</b>		s Outside the Uni Part II can be dupli		ete if the organization pace is needed.	on answered "Yes" t	to Form 990, Part
1 (a) Na organ	me of zation	(b) IRS code section	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of non-cash	(h) Description of non-cash	(i) Method of valuation (book EMV

organization	section and EIN (if applicable)	(C) Region	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
See Add'l Data								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-55 exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . .

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018							Page <b>3</b>			
Part III Grants and Oth				<b>ed States.</b> Complete i	f the organization ar	nswered "Yes" to Form S	990, Part IV, line 16.			
	Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
See Add'l Data										

Sche	dule F (Form 990) 2018		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
	· · · · ·	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) .	☐Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see instructions for form 6565)	☐Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐Yes	<b>✓</b> No

Schedule F (Fo	rm 990) 2018 Page <b>5</b>						
F a r	Part V Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting manual amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to pany additional information (see instructions).						
990 Schedu	le F, Supplemental Information						
Return Reference	Explanation						
Schedule F, Part I, Line 2	Scholarships are granted to students enrolled for graduate study at the University of Oxford. The scholarships normally comprise of tuition fees, college fees and a maintenance grant. The University pays the tuition fees and college fees directly from its accounts through the Finance Division to the colleges, which ensures they are used for their intended purpose. The University pays the student's maintenance termly, and each student must collect the first payment in person (with identification). Each student is required to write a report at the end of their first term of study and at the end of each academic year. This report details their						

academic activities and progress, and extra-curricular activities in which they are involved. The maintenance grant is used by the students to help with living costs. The amount of this grant is a recommended amount calculated by a committee of bursars and is based on average costs of rent and living costs.

#### **Additional Data**

East Asia and the Pacific

Greenland)

Europe (including Iceland and

**Software ID:** 18007995 Software Version: v1.00

463 Program Services

16,506 Program Services

**EIN:** 98-6001062

Oxford

Name: The Chancellor Master & Scholars of the University of

recipients located in the region)

-orm 990 Schedule F Part 1 - Activities Outside The United States								
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted	(e) If activity listed in (d)				
	offices in the	employees or	in region (by type) (i.e.,	is a program service,				
	region	agents in	fundraising, program	describe specific type of				

services, grants to region

service(s) in region

Education and Research

Education and Research

(f) Total expenditures

for region

26,026,754

2,080,224,161

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) North America (including 799 | Program Services Education and Research 144,303,395 Canada and Mexico, but not the United States) South Asia 1,165 Program Services Education and Research 79,249,067

(i) Method of (b) IRS code (h) Description (g) Amount of (f) Manner of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization arant non-cash disbursement assistance appraisal, applicable) assistance other) lEurope Research and 1.526.750 Wire Transfer Lincluding Education

Wire Transfer

Iceland and Greenland)	Education	
Europe (includina	Research and Education	919,570

Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 488,560 Wire Transfer Research and Europe l(includina Education Iceland and Greenland) 132.143 Wire Transfer Europe Research and (including Education

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 127,026 Wire Transfer Research and Europe l(includina Education Iceland and Greenland) 103.431 Wire Transfer Europe Research and (including Education

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 67,004 Wire Transfer Europe l(includina Education Iceland and Greenland)

54.189

Wire Transfer

Europe

(including

lIceland and (Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 49,320 Wire Transfer Europe l(includina Education Iceland and Greenland)

## 

Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 30,535 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 25,444 Wire Transfer Europe l(includina Education Iceland and Greenland)

## 24.428 Wire Transfer Europe Research and (including Education

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 24,428 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 22.813 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 20,598 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 18.321 Wire Transfer Europe l(includina Education Iceland and Greenland)

13.934 Wire Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

Europe (including lIceland and

(Greenland

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 13.934 Wire Transfer Europe l(includina Education Iceland and Greenland)

13.934 Wire Transfer

## Greenland)

(including

Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 13.328 Wire Transfer Europe l(includina Education Iceland and Greenland)

13.328 Wire Transfer

Europe

(including

lIceland and (Greenland

Research and

Education

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 12.722 Wire Transfer Europe l(includina Education Iceland and Greenland)

12.299 Wire Transfer

## Europe

(including

lIceland and (Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 12.214 Wire Transfer Europe l(includina Education Iceland and Greenland)

11.510 Wire Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

Europe

(including

Iceland and Greenland)

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(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 10,905 Wire Transfer Europe l(includina Education Iceland and Greenland)



(including Education lIceland and

(Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 10,602 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 9,693 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 8,481 Wire Transfer Europe l(includina Education Iceland and Greenland)

8.376 Wire Transfer

## Greenland) Europe (including

Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 7.780 Wire Transfer Europe l(includina Education Iceland and



(i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 7.328 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 7.203 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 6.718 Wire Transfer Europe l(includina Education Iceland and Greenland)

6.664 Wire Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

Europe

(including

(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 6.664 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 6.473 Wire Transfer Europe l(includina Education Iceland and Greenland)

# Europe Research and 6,403 Wire Transfer

Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 6,361 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 6.107 Wire Transfer Europe l(includina Education Iceland and Greenland)

6.058 Wire Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Research and

Education

Europe

(including

Iceland and Greenland)

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(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 5.863 Wire Transfer Europe l(includina Education Iceland and Greenland)



(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Research and 5.452 Wire Transfer Europe l(includina Education Iceland and Greenland)

5.452 Wire Transfer

Europe

(including

lIceland and (Greenland

Research and

Education

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) Research and 5.011 Wire Transfer lEurope l(includina Education

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of or assistance cash grant disbursement valuation (book, of non-cash non-cash recipients FMV, appraisal, assistance assistance other) Bursaries for lower-2.284 7.153,634 BACS lEurope income families l(includina Iceland and Greenland) Industry-linked 88 209,469 BACS |Europe sponsorship (includina bursaries Iceland and

Greenland)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (g) Description of (h) Method of (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 153,307 Study Abroad 84 IBACS Europe Scholarships (includina Iceland and (IGreenland Erasmus Grant for 367 773,591 BACS Europe Students (including Iceland and (Greenland

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Hardship funding 129 405,631 BACS lEurope (includina Iceland and |Greenland Prizes 187 46,162 BACS Europe (including Iceland and Greenland)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) PG Scholarships 1,124 31,978,602 BACS lEurope (includina Iceland and (Greenland Various grants, 3,000 67,174,253 BACS lEurope scholars (including Iceland and (Greenland

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19316	4017	110	
Schedule J (Form 990)		C	ompensat	ion Information	00	1B No.	1545-0	0047	
		For certain Officers, Directors, Trustees, Key Employees, and Highest							
	Compensated Employees  ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.						2018		
Б	▶ Attach to Form 990.						Open to Public		
•	tment of the Treasury al Revenue Service	P do to <u>www.ns.go</u>	<i>70/101111990</i> 101	mistructions and the latest miloti	lation.		ectio		
	ne of the organiza	ation Scholars of the University of Oxford			Employer identificat	ion nu	ımber		
	Chancellor Master o	Cocholars of the offiversity of Oxford			98-6001062				
Pa	rt I Questi	ons Regarding Compensa	ition						
							Yes	No	
1a		Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
		s or charter travel	$oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}}}}$	Housing allowance or residence for p					
		companions		Payments for business use of person					
		nification and gross-up payment	ts 📙	Health or social club dues or initiation Personal services (e.g., maid, chauf					
	LI Discretion	nary spending account		Personal services (e.g., maid, chaur	reur, cher)				
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding paym oplete Part III to explain	ent or reimbursement	<b>1</b> b	Yes		
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1 - 2	2	Yes		
	directors, truste	es, officers, including the CEO/1	executive Directo	r, regarding the items checked in line	laf				
3				ed to establish the compensation of the not check any boxes for methods	ne				
	_	•		CEO/Executive Director, but explain i	n Part III.				
	<b>✓</b> Compensa	ation committee	<b>~</b>	Written employment contract					
	_ '	ent compensation consultant	<u> </u>	Compensation survey or study					
		of other organizations	<b>▽</b>	Approval by the board or compensa	tion committee				
4	During the year related organiza	year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a lanization:							
а	Receive a sever	ance payment or change-of-con	itrol payment?			4a		No	
b	Receive a severance payment or change-of-control payment? .  Participate in, or receive payment from, a supplemental nonqualified retirement plan?					4b		No	
c				nsation arrangement?		4c		No	
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
	Only E01(a)(2	), 501(c)(4), and 501(c)(29	) organizations	must complete lines E-0					
5				the organization pay or accrue any					
		ontingent on the revenues of:		<b>g</b> ,,					
а	The organization	n?				5a	Yes		
b	-					5b		No	
	,	5a or 5b, describe in Part III.							
6		ed on Form 990, Part VII, Section Ontingent on the net earnings o		the organization pay or accrue any					
а	-	n?				6a		No	
b						6b		No_	
7	•	6a or 6b, describe in Part III.	A line 4	the organization provide any nonfixed	4				
7	payments not d	escribed in lines 5 and 6? If "Ye	7		No				
8	subject to the in	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de		8		No	
9				presumption procedure described in		9		INU	
For F	Paperwork Redu	iction Act Notice, see the Ins	structions for Fo	orm 990. Cat No. 5	0053T Schedule J	(Forn	1 9901	2018	

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 200. But VII.

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

<b>Note.</b> The sum of columns $(B)(i)$ -(iii) for each listed individual must equal the total amount of Form 990,		J, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.						
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1 Professor L Richardson University of Oxford, Vice-	(i)	487,595	0	6,050	0	0	493,645	0
Chancellor	(ii)	0	0	0	0	0	0	0
<b>2</b> Mr G Kerr University of Oxford, Director of Finance	(i)	291,438	0	4,103	0	0	295,541	0
or Finance	(ii)	0	0	0	0	0	0	0
<b>3</b> Professor EG McKendrick University of Oxford,	(i)	236,032	0	0	0	0	236,032	0
Registrar (to Aug 2018)	(ii)	0	0	0	0	0	0	0
<b>4</b> Mrs Gill Aitken CB University of Oxford,	(i)	79,843	0	0	0	0	79,843	0
	(ii)	0	0	0	0	0	0	0
<b>5</b> Mr N Portwood OUP - Chief	(i)	761,436	146,953	24,160	0	0	932,549	0
Evocutive/Corretary to the	(ii)	0	0	0	0	0	0	0
<b>6</b> Professor AM Buchan Pro-Vice-Chancellor	(i)	347,901	0	462,654	0	0	810,555	0
	(ii)	0	0	0	0	0	0	0
<b>7</b> Giles Spackman OUP - Group Finance Director	(i)	441,385	87,940	16,008	0	0	545,333	0
	(ii)	0	0	0	0	0	0	0
<b>8</b> Peter Marshall OUP - Managing Director -	(i)	424,328	69,637	20,370	0	0	514,335	0
	(ii)	0	0	0	0	0	0	0
<b>9</b> Professor P Tufano Dean of Said Business School	(i)	484,470	0	85,174 	0	0	569,644	0
	(ii)	0	0	0	0	0	0	0
							Schedule	J (Form 990) 2018

Schedule J (Form 990) 2018	Page <b>3</b>				
Part III Supplemental Inform	Part III Supplemental Information				
Provide the information, explanation, or	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.				
Return Reference	Explanation				
, ,	The Vice Chancellor is provided with a residence for personal use. The accommodation is provided for the better performance of the VC's duties and the employment is one of the kinds for which it is customary for employers to provide accommodation for the employee. The Vice Chancellor and the Finance Director received private healthcare insurance, including a grossed up payment for the associated tax liability. Professor Tufano is provided with a residence for personal use				

land private healthcare insurance. These benefits were treated as taxable.

Return Reference	Explanation
• •	Nigel Portwood, Giles Spackman and Peter Marshall were paid bonuses dependent on achievement of OUP's Group and Divisional objectives, sales, surplus, and cash conversion.

I (Form 990) 2018

#### **Additional Data**

(i)

(i)

(ii)

(i)

(ii)

(ii)

(i)

(i)

(ii)

(ii)

(i)

(ii)

(i)

(ii)

Professor L Richardson

University of Oxford, Director of Finance

University of Oxford. Registrar (to Aug 2018)

Mrs Gill Aitken CB

Mr N Portwood

OUP - Chief

Delegates Professor AM Buchan

Director

ELT

School

University of Oxford, Registrar (from Sep 2018)

Pro-Vice-Chancellor

OUP - Group Finance

OUP - Managing Director -

Giles Spackman

Peter Marshall

Professor P Tufano

Dean of Said Business

Executive/Secretary to the

Professor EG McKendrick

Chancellor Mr G Kerr

University of Oxford, Vice-

**Software ID:** 18007995 Software Version: v1.00

146,953

87,940

69,637

compensation

**EIN:** 98-6001062

compensation

Name: The Chancellor Master & Scholars of the University of Oxford

prior Form 990

493,645

295,541

236,032

79,843

932,549

810,555

545,333

514,335

569,644

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees							
(A) Name and Title	(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	( <b>D</b> ) Nontaxable	(E) Total of columns	(F) Compensation in
	(i) Base Compensation	(ii) Bonus & incentive	(iii) Other reportable	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on

6,050

4,103

24,160

462,654

16,008

20,370

85,174

Form 990, Schedule J,	Part II - Officers, Di	irectors, Trustees, K	ey Employees, a
(A) Name and Title	(B) Breakdown	of W-2 and/or 1099-MIS	C compensation
	(i) Base Compensation	(ii)	(iii)

487,595

291,438

236,032

79,843

761,436

347,901

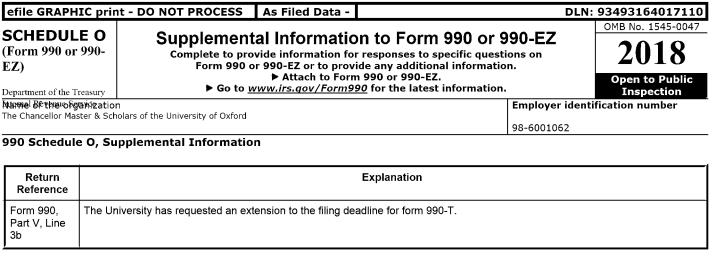
441,385

424,328

484,470

DLN: 93493164017110 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** The Chancellor Master & Scholars of the University of Oxford 98-6001062 **Types of Property** (a) (b) (c) (d) Check if Method of determining Number of contributions or Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Χ 6,969,327 Appraisal Art—Historical treasures Art—Fractional interests Χ 818,338 Appraisal 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles Boats and planes . . Intellectual property . . Securities-Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . 13 Oualified conservation contribution-Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential Real estate—Commercial . Χ 10,131,513 Appraisal 17 Real estate-Other . . Collectibles . . . . 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . . . 23 Scientific specimens . 24 Archeological artifacts . . Other ► ( Χ 162,446 Appraisal Archive of Clement Attlee ) 26 Other ▶ ( Χ 152,675 Appraisal Archive of David Astor ) 27 Other ▶ ( \_ 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2018)

Schedule M (Form 990) (2018)	Page <b>2</b>
Part III Supplemental Info	
Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part
I, column (b), the nu	ımber of contributions, the number of items received, or a combination of both. Also complete
this part for any add	itional information.
Return Reference	Explanation
	Schedule M (Form 990) (2018)



Return Reference	Explanation	
Form 990, Part VI, Section A, Line 4	During the financial year 1 August 2018 to 31 July 2019, the University made the following changes to its statutes: Statute V: Colleges, Societies, and Permanent Private Halls - to add Parks College as a society Statute VIII: Libraries, Museums and Scientific Collection s, and the University Press - to make updates to the Museums Board including name changes and amendments to visitors Statute X: Degrees, Diplomas, and Certificates - to add the deg ree of Master of Biology Statute XVI: Property, Contracts, and Trusts - to clarify the Uni versity's policy in respect of IP generated by students All changes to statutes require th e approval of Congregation. Regulations are amended on a regular basis and are too numerou s to list here.	

Return Explanation
Reference

nal members of Council.

Line 7a

Form 990,
Part VI,
Section A.

Congregation, the University's ultimate legislative body, is composed of virtually all aca demic staff and certain research support staff, administrators and librarians. Members of Congregation elect eleven members of Council and approve the appointment of the four exter

Return Explanation

Form 990,	Congregation has responsibility for considering major policy issues submitted to it by Cou
Part VI,	ncil or members of Congregation; elects members to certain University bodies, including Co
Section A,	uncil; and approves changes to the University's statutes and regulations, which define the
Line 7b	University's governance structure.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	Once the University's financial statements have been signed off, a meeting is arranged wit h key finance/tax personnel to identify changes from the previous year's Form 990, identif y changes in applicable law, agree methodology for gathering information and agree a timet able for completion and review of the Form 990. After information has been gathered, figur es are prepared and reconciled to the financial statements. A review is done at this stage by key tax/finance staff to ensure accuracy and completeness. Prior to submission, a fina I review of the Form 990 is undertaken by key staff including the Head of Tax, the Group T ax Director and the Director of Finance on behalf of Council (the University's governing b ody).

Return Explanation
Reference

Form 990,	The University has a conflict of interest committee, the remit of which includes ensuring
Part VI,	that there are appropriate systems in place to promote and monitor compliance with the Uni
Section B,	versity's policy on conflict of interest. Committee secretaries are asked to draw the conf
Line 12c	lict of interest policy to the attention of their members on an annual basis and to remind
	committee members at each meeting of the requirement to declare any conflicts or potentia
	I conflicts.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	The University has a committee to review the salaries of senior University officers. The committee includes three members who are external to the University, two members who are not temployees of the University, and a member of the University whose role it is to uphold the University's statutes and policies throughout its governance and administration. This committee is responsible for setting and reviewing the remuneration of the Vice-Chancellor, Registrar, Pro-Vice-Chancellors, Heads of Division, and Director of Finance. The committee determines salaries on appointment and reviews remuneration biennially to ensure it remains appropriate. In setting senior remuneration packages the committee ensures fair (equit able), appropriate and justifiable levels of remuneration, taking account of: * the contex tin which the University operates and institutional performance within that context; * the eremit and responsibilities of a role, and attributes required to undertake that role effectively; * the market rate in UK Universities for jobs of comparable scale and type. Benchmarking information is used and interpreted based on the scale, structure and ambition of the University. Where it is relevant the Committee may take account of evidence about the international market for comparable roles * factors in addition to the market rate which might lead to an adjustment to the salary, including: - the academic discipline of the ind ividual; - their track record in academic and leadership roles; - internal relativities for jobs of comparable scale and type. The pattern of pay is checked against the relative size and complexity of the roles; and - retention and flight risk, where there is a clear and devidenced concern.

Return Reference	Explanation
Form 990, Part VI, Section C, Line 18	The University's governing documents can be found on the University website at https://www.admin.ox.ac.uk/statutes/. Financial statements are also available at https://www.ox.ac.uk/about/organisation/finance-and-funding?wssl=1. The University's conflict of interest policy, along with other ethical policies can be found at https://researchsupport.admin.ox.ac.uk/governance/integrity.

Return Reference	Explanation
	The University's governing documents can be found on the University website at https://www .admin.ox.ac.uk/statutes/. Financial statements are also available at https://www.ox.ac.uk /about/organisation/finance-and-funding?wssl=1. The University's conflict of interest poli cy, along with other ethical policies can be found at https://researchsupport.admin.ox.ac. uk/governance/integrity.

Return Explanation

Reference	
Form 990,	Net exchange rate gains (losses) - (361,810,002) Other changes in net assets - (3,540,752)
Part XI Line	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data SCHEDULE R | Related

(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.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018

DLN: 93493164017110

Open to Public Inspection

Name of the organization The Chancellor Master & Scholars of the University of Oxford							•	oyer identif 001062	ication numb	er		
Part I Identification of Disregarded Entities Complete	te if the organi	ization answ	ered "Yes	on Form	990, Part :	IV, line 33		.01002				
(a)  Name, address, and EIN (if applicable) of disregarded entity		<b>(b)</b> Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		<b>(e)</b> End-of-year as	ssets (f) Direct con entit			
Part II Identification of Related Tax-Exempt Organizations during the tax years.												
(a) Name, address, and EIN of related organization	Prima	<b>(b)</b> ary activity	Legal do	(c) micile (state gn country)	Exempt Co	) de section	Public cl (if sectio	(e) harity status on 501(c)(3))	(f) Direct cont entity	rolling /		ntrolle ity?
(1)Oxford Univ Dev (NA) Inc 500 Fifth Avenue 32nd Floor New York, NY 10110 13-3497066	Fundraising	1		NY	501(c)(3)	ı	9		N/A		Yes	No No
(2)Oxford Endowment Fund King Charles House Park End Street Oxford, Oxfordshire OX1 1JG UK 98-0680056	Funds Mana	agement		UK	501(c)(3)		11a		The Chancellor Scholars of the of Oxford		Yes	
												_
For Paperwork Reduction Act Notice, see the Instructions for Fo	rm 990.		Ca	t. No. 50135					Schedule F	(Form 9	990) 20	018

Part III Identification of Related Organization one or more related organizations treat	ons Taxable as a P ed as a partnership o	artnership during the ta	Complet x year.	e if the or	ganization	answ	vered "Yes	" on Form	990,	Part I\	/, line 34 b	ecau	se it ha	d
(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	unrelate excluded tax und sections !	ominant e(related, elated, ded from under	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	part	ral or   Po aging   o	<b>(k)</b> ercentage wnership
					514)	'			Yes	No		Yes	No	
Part IV Identification of Related Organizati because it had one or more related organizations.							ation answ	ered "Yes	" on Fo	orm 9	90, Part IV,	line	34	
See Additional Data Table									,					
(a) Name, address, and EIN of related organization	(b) Primary activity	Le don (state d	c) gal nicile r foreign ntry)	Dire	(d) ect controlling entity	Type (C corp	(e) of entity o, S corp, trust)	<b>(f)</b> Share of total income		(g) of end- year assets	of- Perce owne	ntage	(13)	(i) ion 512(b) controlled entity?
		cou	1101 9 7										Ye	s No
	1										Sahadula D	/Ear	000\	2018

Schedule R (Form 990) 2018					Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form 990	), Part IV, line 34, 35h	o, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more	e related organizations lis	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity				1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		No
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				<b>1</b> f		No
g Sale of assets to related organization(s)				<b>1</b> g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				<b>1</b> i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related organization(s) . $$ .				11		No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No
q Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No
r Other transfer of cash or property to related organization(s)				1r	Yes	
${f s}$ Other transfer of cash or property from related organization(s)				1s	Yes	
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	te this line, including cov	ered relationships and tr	ansaction thresholds.			
(a) Name of related organization	<b>(b)</b> Transactior type (a-s)	(c) Amount involved	(d) Method of determining a	amount in	ıvolved	
1)Oxford Univ Dev (NA) Inc	c c	5,649,285	Donations received from Ameri collected by Oxford Univ Dec (I		Oxford	as
			1			

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	10	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ı	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		,	<b>(k)</b> Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Form	990	0) 2018

Schedule R (Form 990) 2018 Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions). Return Reference Explanation Schedule R, Part V, Line 1a Oxford University conducts its exempt program activities worldwide directly and through a number of controlled entities around the World. In conducting its exempt program activities it engages in frequent transactions with controlled entities on a daily basis. Due to the volume of transactions, it would be impractical to disclose all the transactions between entities.

**Software ID:** 18007995 **Software Version:** v1.00

**EIN:** 98-6001062

Name: The Chancellor Master & Scholars of the University of Oxford

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

Form 990, Schedule R, Part IV - Idei	1					1 ( )	4.5	1 45
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?
(1) Instruct Academic Services Ltd University Offices Wellington Square Oxford OX1 2JD UK	Scientific	UK	The Chancellor Master & Scholars of the University of Oxford	С	0	1,053	100 %	Yes No
(1) Oxford University Innovation Limited University Offices Wellington Square Oxford OX1 2JD UK	Research	UK	The Chancellor Master & Scholars of the University of Oxford	С	2,876,009	20,110,020	100 %	Yes
(2) Oxford University Innovation (Hong Kong) Limited Level 12 Infinitus Plaza 199 Des Voeuz Road Central Sheung Wang, Hong Kong HK	Research	НК	Oxford University Innovation Limited	С	0	0	100 %	Yes
(3) Oxford Limited University Offices Wellington Square Oxford OX1 2JD UK	Retail	UK	The Chancellor Master & Scholars of the University of Oxford	С	0	1,420,916	100 %	Yes
(4) Oxford Mutual Limited University Offices Wellington Square Oxford OX1 2JD UK	Insurance	UK	The Chancellor Master & Scholars of the University of Oxford	С	1,309,341	5,126,216	100 %	Yes
(5) Oxford Said Business School Limited University Offices Wellington Square Oxford OX1 2JD UK	Education	UK	The Chancellor Master & Scholars of the University of Oxford	С	112,369	11,806,052	100 %	Yes
(6) Oxford University Endowment Management King Charles House Park End Street Oxford OX1 1JD UK	Investment Management	UK	The Chancellor Master & Scholars of the University of Oxford	С	2,347,531	23,017,283	100 %	Yes
(7) Oxford University Fixed Assets Limited University Offices Wellington Square Oxford OX1 2JD UK	Management	UK	The Chancellor Master & Scholars of the University of Oxford	С	414,055	8,856,371	100 %	Yes
(8) Oxford University Trading Limited University Offices Wellington Square Oxford OX1 2JD UK	Retail	UK	The Chancellor Master & Scholars of the University of Oxford	С	7,202,596	19,775,687	100 %	Yes
(9) Gray Laboratory Cancer Research Trust Gray Cancer Trust University Offices Wellington Square Oxford OX1 2JD UK	Research	UK	The Chancellor Master & Scholars of the University of Oxford	С	0	751,161	100 %	Yes
(10) University of Oxford China Office Suite 4018 Cosco Tower 181-183 Queens Road HK	Fundraising	НК	The Chancellor Master & Scholars of the University of Oxford	С	0	280,129	100 %	Yes
(11) Voltaire Foundation 99 Banbury Road Oxford OX2 6JX UK	Publishing	UK	The Chancellor Master & Scholars of the University of Oxford	С	0	399,398	100 %	Yes
(12) Oxford Advanced Research Centres Limited University Offices Wellington Square Oxford OX1 2JD UK	Management	UK	The Chancellor Master & Scholars of the University of Oxford	С	0	129,468	100 %	Yes
(13) Oxford Research South Africa Limited University Offices Wellington Square Oxford OX1 2JD UK	Management	UK	The Chancellor Master & Scholars of the University of Oxford	С	0	87,941	100 %	Yes
(14) OUC Investments Limited University Offices Wellington Square Oxford OX1 2JD UK	Management	UK	The Chancellor Master and Scholars of the University of Oxford	С	0	2,996,094	100 %	Yes

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (b) (c) (f) (g) (h) Name, address, and EIN of Primary activity Direct controlling Section 512 Legal Type of entity Share of total Share of end-of-year Percentage related organization domicile entity (C corp, S corp, (b)(13)income assets ownership (state or foreign or trust) controlled country) entity? Yes No UK (16) James Martin 21st Century (UK) Trust N/A 4,039,588 90,269,433 100 % No **University Offices** Wellington Square Oxford OX1 2JD UK (1) OELT Ltd UK Publishing The Chancellor 92,398 1,421,101 100 % Yes Great Clarendon Street Master & Scholars Oxford OX2 6DP of the University of Oxford (2) Oxford Publishing Limited UK The Chancellor 88,583,256 100 % Publishing 11,617,957 Yes Great Clarendon Street Master & Scholars Oxford OX2 6DP of the University of Oxford (3) Oxford Reference Limited UK Sale of online The Chancellor 1,258,990 1,644,217 100 % Yes Great Clarendon Street advertising Master & Scholars Oxford OX2 6DP of the University of Oxford (4) Oxford Information Limited Publishing UK The Chancellor 7,082 38,572 100 % Yes Great Clarendon Street Master & Scholars Oxford OX26DP of the University of Oxford (5) Oxuniprint Limited Publishing UK The Chancellor 0 100 % Yes Great Clarendon Street Master & Scholars Oxford OX2 6DP of the University of Oxford (6) Oxford University Press Espana SA Publishing SP Oxford Publishing 2,884,482 34,390,503 100 % Yes Parque Empresarial San Fernando Ltd Edificio Atenas Esc A Planta 1a Madrid 28830 (7) Oxford University Press Kabushiki Kaisha JΑ 100 % The Chancellor 124,207 12,625,691 Yes Tamachi Place 3F Master & Scholars 4-17-5 Shiba of the University of Tokyo 108-8386 Oxford (8) Oxford University Press (China) Ltd HK The Chancellor 8,505,844 100 % Publishing 25,368,934 Yes 39th Floor One Kowloon Master & Scholars No 1 Wang Yuen Street of the University of Oxford Hong Kong HΚ (9) Oxford University Press (Shanghai) Ltd Publishing CH OUP (China) 472,706 4,938,043 100 % Yes Rm 1201-1202 No 1305 Li Tong Plaza Limited North Si Chuan Road Shanghai 200080 (10) Oxford University Press GmbH GΜ Oxford Publishing 0 1,420,563 100 % Publishing Yes Markgraflerstrasse 2 Stuttgart 70329 GΜ (11) Oxford University Press Mexico SA de CV Publishing ΜX Oxford Publishing 596,212 16,085,489 100 % Yes Citi Center Piso 11 Insurgentes Sur Limited Esquina Hermes y Mosqueta Mexico City 03940 (12) Oxford University Press do Brasil Pub Lta Publishing BR Oxford Publishing 1,821,287 14,739,998 100 % Yes Av Jaquare 818 Galpoes 30/31 Limited cep 05346 000 Sao Paulo BR (13)Publishina ΚE Oxford Publishina 864,823 13,427,295 100 % Yes Oxford University Press East Africa Limited Limited Upper Hill Elgon Road PO Box 72532-00100 Nairobi ΚE (14) ΤZ The Chancellor 992,920 Publishing 0 100 % Yes Oxford University Press Tanzania Limited Master & Scholars Plot 149 Mikocheni B of the University of Old Bagamoyo Road Oxford Dar Es Salaam ΤZ

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (c) (f) (i) (g) (h) Primary activity Direct controlling Name, address, and EIN of Legal Type of entity Share of total Share of end-of-year Percentage Section 512 domicile (C corp, S corp, assets related organization entity income ownership (b)(13)(state or foreign or trust) controlled entity? country) Yes No 2,205,612 SF 75 % (31)Publishina The Chancellor 18,083,500 Yes Oxford University Press Southern Africa Pty Master & Scholars of the University of Vasco Boulevard Oxford N1 City Goodwood Cape Town 7460 (1) OUP Properties SA Pty Ltd SF Publishing The Chancellor 208,519 4,513,258 100 % Yes Vasco Boulevard Master & Scholars N1 City Goodwood of the University of Cape Town 7460 Oxford (2) Oxford Yayincilik Ltd Sirketi Publishing TU Oxford Publishing | C 418,164 3,857,039 100 % Yes Degirman Sok Nida Kule No 18 K 16 Limited Kozyatagi Kadikoy Istanbul (3) Oxford Fajar Sdn Berhad Publishing MY OELT Ltd 0 12,063,704 70 % Yes 4 Jalan Pemaju Seksyen U1 Hicom-Glenmarie Industrial Park Shah Alam, Selangor Darul Eh 40150 MY MY The Chancellor 134,861 1,459,160 100 % Publishing Yes 4 Jalan Pemaju Master & Scholars Hicom-Glenmarie Industrial Park of the University of Shah Alam, Selangor Darul Eh 40150 Oxford UK Ω 50,226 100 % Publishina The Chancellor Yes Great Clarendon Street Master and Oxford OX2 6DP Scholars of the UK University of Oxford (6) Bab la GmbH GM Oxford University 0 726,973 100 % Publishing Yes Markgraflerstrasse 2 Press GmbH Stuttgart 70329 GM Publishina SN Oxford Fajar Sdn 33,829 348,609 100 % Yes

Berhad

Ltd

Oxford Publishing

586,160

6,286,286

100 %

Yes

AR

# (4) Dentingan Kejayaan Sdn Bhd (5) Epigeum Ltd

Oxford University Press (Singapore) PTE

(8) Oxford University Press Argentina SA

Publishing

Limited 51 Goldhill Plaza

16-01

AR

Novena 308900

Edificio Central Park

California 2082 Piso 3 Oficina Buenos Aires C1289ANN