

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

**A** For the 2012 calendar year, or tax year beginning **JUL 1, 2012** and ending **JUN 30, 2013**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization UNIVERSITY OF PITTSBURGH Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 116 ATWOOD STREET, SUITE 201 City, town, or post office, state, and ZIP code PITTSBURGH, PA 15260-0100 <b>F</b> Name and address of principal officer: MARK A. NORDENBERG 107 CATHEDRAL OF LEARNING, PGH, PA 15260	<b>D</b> Employer identification number 25-0965591 <b>E</b> Telephone number (412) 624-6395 <b>G</b> Gross receipts \$ 3,374,933,534. <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ WWW.PITT.EDU		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: 1787 <b>M</b> State of legal domicile: PA

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>TO PROVIDE HIGH QUALITY EDUCATIONAL SERVICES, RESEARCH, AND COMMUNITY SERVICE.</u>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	34
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	23
<b>5</b>	Total number of individuals employed in calendar year 2012 (Part V, line 2a) .....	<b>5</b>	27796
<b>6</b>	Total number of volunteers (estimate if necessary) .....	<b>6</b>	437
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	-3,623,625.
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34 .....	<b>7b</b>	-5,774,323.
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	256,318,103.	254,388,263.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	1,776,045,308.	1,781,319,192.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	185,696,335.	231,903,102.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	5,015,104.	12,435,591.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	2,223,074,850.	2,280,046,148.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	233,798,758.	231,667,138.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	1,246,529,171.	1,087,908,257.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	219,702.	218,201.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 15,927,960.		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	677,734,489.	679,461,199.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	2,158,282,120.	1,999,254,795.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	64,792,730.	280,791,353.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) .....	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26) .....	5,361,647,509.	5,784,337,078.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	1,961,241,515.	1,981,222,920.
		3,400,405,994.	3,803,114,158.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer ARTHUR G. RAMICONE, CFO <i>Arthur Ramicone</i>	Date May 13, 2014	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name WILLIAM J. ADAMS	Preparer's signature <i>William Adams</i>	Date 5/13/14
	Firm's name ▶ URISH POPECK & CO., LLC.	Firm's EIN ▶ 25-1306171	Check if self-employed <input type="checkbox"/> PTIN
	Firm's address ▶ THREE GATEWAY CENTER SUITE 2400 PITTSBURGH, PA 15222-1015	Phone no. 412-391-1994	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: SEE SCHEDULE O

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 645,182,027. including grants of \$ 72,828,612. ) (Revenue \$ 801,452,698. ) RESEARCH - INCLUDES EXPENDITURES FOR ACTIVITIES SPECIFICALLY ORGANIZED TO PRODUCE RESEARCH OUTCOMES WHETHER COMMISSIONED BY AN EXTERNAL AGENCY OR BUDGETED BY A UNIT.

4b (Code: ) (Expenses \$ 501,712,742. including grants of \$ ) (Revenue \$ 703,914,344. ) INSTRUCTION - INCLUDES EXPENDITURES FOR ACTIVITIES OF THE INSTITUTION'S INSTRUCTION PROGRAMS.

4c (Code: ) (Expenses \$ 167,760,137. including grants of \$ ) (Revenue \$ 159,667,989. ) ACADEMIC SUPPORT - INCLUDES EXPENDITURES IN SUPPORT OF THE UNIVERSITY'S PRIMARY MISSIONS - INSTRUCTION, RESEARCH, AND PUBLIC SERVICE.

4d Other program services (Describe in Schedule O.) (Expenses \$ 521,958,718. including grants of \$ 158,838,526. ) (Revenue \$ 119,260,250. )

4e Total program service expenses 1,836,613,624.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
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> .....		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
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? <i>If "Yes," complete Schedule C, Part III</i> .....		X
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? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States? .....	X	
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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....	X	
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> .....	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		

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

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

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

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

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed PA; 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: THURMAN D. WINGROVE - (412)624-6050 3015 CATHEDRAL OF LEARNING, PITTSBURGH, PA 15260-6471

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN A. BARBOUR TRUSTEE	5.00	X						0.	0.	0.
(2) EVA TANSKY BLUM TRUSTEE	5.00	X						0.	0.	0.
(3) SUZANNE W. BROADHURST TRUSTEE	5.00	X						0.	0.	0.
(4) DOUGLAS M. BROWNING TRUSTEE	1.00	X						0.	0.	0.
(5) MICHAEL A. BRYSON TRUSTEE	5.00	X						0.	0.	0.
(6) CHARLES E. BUNCH TRUSTEE	5.00	X						0.	0.	0.
(7) JAY COSTA, JR. TRUSTEE	5.00	X						0.	0.	0.
(8) CATHERINE D. DEANGELIS TRUSTEE	5.00	X						0.	0.	0.
(9) BRIAN GENERALOVICH TRUSTEE	5.00	X						0.	0.	0.
(10) IRA J. GUMBERG TRUSTEE	5.00	X						0.	0.	0.
(11) ROBERT M. HERNANDEZ TRUSTEE	5.00	X						0.	0.	0.
(12) DAWNE S. HICKTON TRUSTEE	5.00	X						0.	0.	0.
(13) SY HOLZER TRUSTEE	5.00	X						0.	0.	0.
(14) THOMAS O. JOHNSON TRUSTEE	5.00	X						0.	0.	0.
(15) WILLIAM K. LIEBERMAN TRUSTEE	5.00	X						0.	0.	0.
(16) ROBERT G. LOVETT TRUSTEE	5.00	X						0.	0.	0.
(17) JOHN A. MAHER III TRUSTEE	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) F. JAMES MCCARL III TRUSTEE	5.00	X					0.	0.	0.	
(19) MARTHA HARTLE MUNSCHE TRUSTEE	5.00	X					0.	0.	0.	
(20) MARLEE S. MYERS TRUSTEE	5.00	X					0.	0.	0.	
(21) MARK A. NORDENBERG CHANCELLOR / CEO	40.00 2.00	X		X			592,836.	0.	137,347.	
(22) MORGAN K. O'BRIEN TRUSTEE	5.00	X					0.	0.	0.	
(23) ROBERT P. RANDALL TRUSTEE	5.00	X					0.	0.	0.	
(24) THOMAS E. RICHARDS TRUSTEE	5.00	X					0.	0.	0.	
(25) BRYANT J. SALTER TRUSTEE	5.00	X					0.	0.	0.	
(26) KEITH E. SCHAEFER TRUSTEE	5.00	X					0.	0.	0.	
<b>1b Sub-total</b>							592,836.	0.	137,347.	
<b>c Total from continuation sheets to Part VII, Section A</b>							8,223,485.	0.	663,229.	
<b>d Total (add lines 1b and 1c)</b>							8,816,321.	0.	800,576.	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1,776**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
PJ DICK INC., 225 NORTH SHORE DRIVE PO BOX 6774, PITTSBURGH, PA 15212	CONSTRUCTION	36,893,915.
SODEXO PO BOX 536922, ATLANTA, GA 30353-6922	FOOD SERVICE	30,299,500.
MASCARO CONSTRUCTION CO. LP, 1720 METROPOLITAN ST, PITTSBURGH, PA 15233-2232	CONSTRUCTION	29,154,447.
BPA II LTD, 1468 WEST NINTH STREET SUITE 135, CLEVELAND, OH 44113	CONSTRUCTION	9,480,813.
RYCON CONSTRUCTION INC 2525 LIBERTY AVENUE, PITTSBURGH, PA 15222	CONSTRUCTION	9,345,200.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **623**

SEE PART VII, SECTION A CONTINUATION SHEETS



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) HERBERT S. SHEAR TRUSTEE	5.00	X						0.	0.	0.
(28) JACK SMITH TRUSTEE	5.00	X						0.	0.	0.
(29) JOHN A. SWANSON TRUSTEE	5.00	X						0.	0.	0.
(30) STEPHEN R. TRITCH CHAIRPERSON OF THE BOARD OF TRUSTEES	5.00	X		X				0.	0.	0.
(31) THOMAS L. VANKIRK TRUSTEE	5.00	X						0.	0.	0.
(32) PETER C. VARISCHETTI TRUSTEE	5.00	X						0.	0.	0.
(33) JOHN J. VERBANAC TRUSTEE	5.00	X						0.	0.	0.
(34) SAM S. ZACHARIAS TRUSTEE	5.00	X						0.	0.	0.
(35) P. JEROME RICHEY GENERAL COUNSEL	40.00			X				0.	0.	0.
(36) PATRICIA E. BEESON PROVOST/SR VICE CHANCELLOR	40.00 1.00			X				375,234.	0.	54,542.
(37) JEROME COCHRAN GENERAL COUNSEL/EXEC VICE CHANCELLOR	40.00 2.00			X				507,102.	0.	83,089.
(38) B. JEAN FERKETISH SEC BRD OF TRST	40.00			X				215,249.	0.	44,809.
(39) ARTHUR S. LEVINE SR VC, HEALTH SCI/DEAN	40.00 5.00			X				842,769.	0.	43,304.
(40) JAMES V. MAHER, JR. FORMER PROVOST/SR VICE CHANCELLOR	40.00					X		282,908.	0.	14,942.
(41) AMY KRUEGER MARSH TREASURER	40.00 1.00			X				386,603.	0.	51,028.
(42) ARTHUR G. RAMICONE CFO	40.00 2.00			X				371,338.	0.	64,876.
(43) JAMES P. DIXON II HEAD BASKETBALL COACH	40.00				X			1,996,966.	0.	144,556.
(44) PAUL CHRYST HEAD FOOTBALL COACH	40.00				X			1,543,430.	0.	35,327.
(45) NANCY E. DAVIDSON DIRECTOR, UPCI	40.00				X			650,859.	0.	31,455.
(46) STEVEN C. PEDERSON ATHLETIC DIRECTOR	40.00				X			583,113.	0.	50,423.
Total to Part VII, Section A, line 1c .....										



**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	1,402,700.				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	188,304,443.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	64,681,120.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		10,507,346.				
	<b>h Total.</b> Add lines 1a-1f		254,388,263.				
	Program Service Revenue	<b>2 a</b> GRANTS/CONTRACTS	Business Code 541700	801,452,698.			801,452,698.
<b>b</b> TUITION		611710	703,914,344.	703,914,344.			
<b>c</b> SALES-EDUCATIONAL		711300	155,458,418.	154,463,621.	994,797.		
<b>d</b> SALES-AUXILIARY		900004	119,260,250.	118,394,483.	865,767.		
<b>e</b> UNIVERSITY PRESS		511130	1,233,482.	1,233,482.			
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f			1,781,319,192.				
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		67,343,785.			67,343,785.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties		6,742,612.			6,742,612.	
	<b>6 a</b> Gross rents	(i) Real	18,353,228.				
		(ii) Personal					
		<b>b</b> Less: rental expenses	10,061,595.				
		<b>c</b> Rental income or (loss)	8,291,633.				
	<b>d</b> Net rental income or (loss)		8,291,633.			8,291,633.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	1239205207.				
		(ii) Other					
		<b>b</b> Less: cost or other basis and sales expenses	1074645890.				
		<b>c</b> Gain or (loss)	164,559,317.				
	<b>d</b> Net gain or (loss)		164,559,317.			164,559,317.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 1,402,700. of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	512,020.				
		<b>b</b> Less: direct expenses	602,574.				
<b>c</b> Net income or (loss) from fundraising events			-90,554.			-90,554.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities						
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>	13,305,132.					
	<b>b</b> Less: cost of goods sold	9,577,327.					
	<b>c</b> Net income or (loss) from sales of inventory		3,727,805.	2,976,089.	751,716.		
Miscellaneous Revenue		Business Code					
<b>11 a</b> PARTNERSHIP GAIN(LOSS)		523000	-6,235,905.		-6,235,905.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			-6,235,905.			
<b>12 Total revenue.</b> See instructions.			2,280,046,148.	980,982,019.	-3,623,625.	1048299491.	

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	68,857,105.	68,857,105.		
<b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22	158,237,992.	158,237,992.		
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	4,572,041.	4,572,041.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	3,925,762.	591,668.	3,107,893.	226,201.
<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)				
<b>7</b> Other salaries and wages	863,894,443.	779,172,985.	74,911,671.	9,809,787.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	77,510,658.	75,522,133.	949,461.	1,039,064.
<b>9</b> Other employee benefits	89,887,454.	87,321,858.	644,386.	1,921,210.
<b>10</b> Payroll taxes	52,689,940.	51,143,869.	833,256.	712,815.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management	288,489.		288,489.	
<b>b</b> Legal	5,627,362.		5,627,362.	
<b>c</b> Accounting	625,335.		625,335.	
<b>d</b> Lobbying	737,896.	737,896.		
<b>e</b> Professional fundraising services. See Part IV, line 17	218,201.			218,201.
<b>f</b> Investment management fees	23,355,976.		23,355,976.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	126,138,313.	126,138,313.		
<b>12</b> Advertising and promotion	1,961,698.	1,961,698.		
<b>13</b> Office expenses	101,271,408.	99,748,498.	1,000,170.	522,740.
<b>14</b> Information technology	24,800,841.	24,421,973.	261,183.	117,685.
<b>15</b> Royalties				
<b>16</b> Occupancy	128,951,955.	118,095,482.	10,241,852.	614,621.
<b>17</b> Travel	51,818,121.	47,629,789.	3,574,932.	613,400.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	3,770,161.	3,680,514.		89,647.
<b>20</b> Interest	44,783,665.	40,843,759.	3,939,906.	
<b>21</b> Payments to affiliates	285,000.	285,000.		
<b>22</b> Depreciation, depletion, and amortization	150,420,085.	137,739,260.	12,680,825.	
<b>23</b> Insurance	5,236,237.	1,386,668.	3,848,791.	778.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> LIBRARY	5,314,698.	5,314,698.		
<b>b</b> DUES AND FEES	4,073,959.	3,210,425.	821,723.	41,811.
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	1,999,254,795.	1,836,613,624.	146,713,211.	15,927,960.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**Part X Balance Sheet**

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	675,136,972.	<b>2</b>	604,393,405.
	<b>3</b> Pledges and grants receivable, net .....	152,277,654.	<b>3</b>	124,347,749.
	<b>4</b> Accounts receivable, net .....	65,179,537.	<b>4</b>	68,562,770.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....			<b>5</b>
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....			<b>6</b>
	<b>7</b> Notes and loans receivable, net .....	48,026,738.	<b>7</b>	48,569,266.
	<b>8</b> Inventories for sale or use .....	4,855,225.	<b>8</b>	4,541,942.
	<b>9</b> Prepaid expenses and deferred charges .....	17,131,006.	<b>9</b>	18,157,836.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 3,825,370,412.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,036,895,766.	1,715,731,348.	<b>10c</b> 1,788,474,646.
	<b>11</b> Investments - publicly traded securities .....	1,060,894,219.	<b>11</b>	1,213,225,858.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	1,592,666,413.	<b>12</b>	1,800,935,291.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	29,748,397.	<b>15</b>	113,128,315.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	5,361,647,509.	<b>16</b>	5,784,337,078.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	608,980,235.	<b>17</b>	585,191,146.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	120,667,237.	<b>19</b>	115,356,965.
	<b>20</b> Tax-exempt bond liabilities .....	894,807,949.	<b>20</b>	861,062,075.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	122,325,811.	<b>24</b>	242,428,621.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	214,460,283.	<b>25</b>	177,184,113.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,961,241,515.	<b>26</b>	1,981,222,920.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	2,184,101,281.	<b>27</b>	2,506,551,884.
	<b>28</b> Temporarily restricted net assets .....	622,628,656.	<b>28</b>	674,134,341.
	<b>29</b> Permanently restricted net assets .....	593,676,057.	<b>29</b>	622,427,933.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	3,400,405,994.	<b>33</b>	3,803,114,158.	
<b>34</b> Total liabilities and net assets/fund balances .....	5,361,647,509.	<b>34</b>	5,784,337,078.	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	2,280,046,148.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,999,254,795.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	280,791,353.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	3,400,405,994.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	121,916,811.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	3,803,114,158.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

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

Form **990** (2012)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2012**

**Open to Public Inspection**

<b>Name of the organization</b> UNIVERSITY OF PITTSBURGH	<b>Employer identification number</b> 25-0965591
---	---

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

- The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)
- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
  - 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
  - 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
  - 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
  - 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
  - 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
  - 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
  - 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
  - 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
  - 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
  - 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
    - a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Non-functionally integrated
  - e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....	<b>11g(i)</b>	
(ii) A family member of a person described in (i) above? .....	<b>11g(ii)</b>	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	<b>11g(iii)</b>	
  - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	%
<b>15</b> Public support percentage from 2011 Schedule A, Part II, line 14 .....	<b>15</b>	%
<b>16a 33 1/3% support test - 2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2011.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2012.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2011.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2011 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2011 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

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

**2012**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public Inspection**

▶ **See separate instructions.**

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

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

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

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

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

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

Name of organization <p style="text-align: center;">UNIVERSITY OF PITTSBURGH</p>	Employer identification number <p style="text-align: center;">25-0965591</p>
---	---

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

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

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

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

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

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2012

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

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

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

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....	X		1,200.
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		696,703.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....	X		20,426.
<b>i</b> Other activities? .....	X		19,567.
<b>j</b> Total. Add lines 1c through 1i .....			737,896.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

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

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

LINE A: VOLUNTEERS- THE UNIVERSITY UTILIZES ALUMNI AND STUDENTS TO

ADVOCATE FOR STATE SUPPORT FOR THE UNIVERSITY, THROUGH LETTER WRITING,

EMAILS AND VISITS TO LEGISLATORS AND STATE OFFICIALS.

LINE B: STAFF MEMBERS- THE UNIVERSITY GOVERNMENTAL RELATIONS OFFICE

**Part IV** Supplemental Information (continued)

STAFF MEMBERS ADVOCATE REGARDING LEGISLATIVE OR OTHER GOVERNMENTAL

INITIATIVES WHICH ARE LIKELY TO OR MAY IMPACT UPON THE UNIVERSITY.

LINE D: MAILINGS- SENT PERIODICALLY BY THE UNIVERSITY TO LEGISLATORS

AND THEIR STAFF UPDATING THEM ON PROGRESS AT THE UNIVERSITY AND

HIGHLIGHTS OF NEWS COVERAGE AND OTHER EVENTS AT THE UNIVERSITY.

LINE G: DIRECT CONTACT WITH LEGISLATORS- THE UNIVERSITY STAFF WITHIN

THE GOVERNMENT RELATIONS OFFICE ENGAGES IN DIRECT CONTACT WITH STATE,

FEDERAL AND LOCAL LEGISLATORS AND GOVERNMENT OFFICIALS IN SUPPORT OF

UNIVERSITY ADVOCACY EFFORTS ON ISSUES WHICH ARE LIKELY TO OR MAY AFFECT

THE UNIVERSITY.

LINE H: RALLIES AND DEMONSTRATIONS- THE EXPENSE SET FORTH IN PART II-B,

1H RELATE TO THE UNIVERSITY PITT DAY IN HARRISBURG WHEN UNIVERSITY

STAFF, ALUMNI AND STUDENTS VISIT THE PENNSYLVANIA STATE CAPITOL TO

PROVIDE UPDATES ON PROGRESS, WORK AND RESEARCH AT THE UNIVERSITY, AND

TO ADVOCATE FOR STATE SUPPORT FOR THE UNIVERSITY.

LINE I: OTHER ACTIVITIES- THE EXPENSE RELATES TO THE EFFORTS OF

UNIVERSITY STAFF WHO HELP TO ORGANIZE AND TRACK THE EFFORTS OF

VOLUNTEER ALUMNI AND STUDENTS.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

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

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

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

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

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

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

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

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

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

Yes  No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1 .....	▶ \$	2,338,546.
(ii) Assets included in Form 990, Part X .....	▶ \$	17,174,280.

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

a Revenues included in Form 990, Part VIII, line 1 .....	▶ \$	_____
b Assets included in Form 990, Part X .....	▶ \$	_____

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

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

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	<b>1c</b>
d Additions during the year	<b>1d</b>
e Distributions during the year	<b>1e</b>
f Ending balance	<b>1f</b>

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,635,486,831.	2,545,092,295.	2,048,023,903.	1,868,203,535.	2,392,359,008.
b Contributions	175,799,000.	150,002,000.	76,578,000.	36,816,000.	69,745,726.
c Net investment earnings, gains, and losses	272,742,000.	45,818,000.	489,200,000.	235,092,000.	-499,820,344.
d Grants or scholarships	11,943,973.	11,088,373.	10,777,284.	11,003,066.	10,592,846.
e Other expenditures for facilities and programs	68,389,130.	85,749,068.	49,816,797.	73,734,421.	75,440,142.
f Administrative expenses	9,488,001.	8,588,023.	8,115,527.	7,350,145.	8,047,867.
g End of year balance	2,994,206,727.	2,635,486,831.	2,545,092,295.	2,048,023,903.	1,868,203,535.

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

- a Board designated or quasi-endowment  57.90 %
- b Permanent endowment  41.50 %
- c Temporarily restricted endowment  .60 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  **3a(i)**
- (ii) related organizations  **3a(ii)**

	Yes	No
<b>3a(i)</b>	X	
<b>3a(ii)</b>		X
<b>3b</b>		

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

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

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	51,352,236.			51,352,236.
b Buildings	2,586,824,410.		1,382,361,055.	1,204,463,355.
c Leasehold improvements				
d Equipment	663,045,027.		442,499,126.	220,545,901.
e Other	524,148,739.		212,035,585.	312,113,154.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,788,474,646.

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) PRIVATE INVESTMENTS	1,001,047,331.	END-OF-YEAR MARKET VALUE
(B) COMMINGLED INVESTMENTS IN PUBLIC SEC.	798,183,468.	END-OF-YEAR MARKET VALUE
(C) INSURANCE CSV & INSURANCE SURPLUS	1,704,492.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,800,935,291.	

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) REFUNDABLE US GOVERNMENT STUDENT LOANS	32,928,060.
(3) PRESENT VALUE OF SPLIT INTEREST AGREEMENTS	8,957,908.
(4) OTHER LIABILITIES	3,142,182.
(5) CONDITIONAL ASSET REMEDIATION OBLIGATION	40,571,360.
(6) INTEREST RATE SWAP AGREEMENTS	67,961,007.
(7) AMOUNTS HELD IN CUSTODY	9,698,706.
(8) LEASE CONSTRUCTION/CAPITAL LEASE OBLIGATION	13,924,890.
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	177,184,113.

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



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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	2,240,029,452.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	121,916,811.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	19,638,922.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	141,555,733.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,098,473,719.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	23,355,976.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	158,216,453.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	181,572,429.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	2,280,046,148.

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	1,837,321,288.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	19,638,922.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	19,638,922.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	1,817,682,366.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	23,355,976.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	158,216,453.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	181,572,429.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	1,999,254,795.

**Part XIII Supplemental Information**

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

PART III, LINE 4: THE UNIVERSITY'S COLLECTIONS OF ART, HISTORICAL

TREASURES, AND OTHER SIMILAR ASSETS INCLUDE A VARIETY OF PAINTINGS,

SCULPTURES, PHOTOGRAPHS, ANTIQUES, AND FURNISHINGS AS WELL AS SCHOLARLY

PAPERS AND ARCHIVES. THESE ITEMS ARE HOUSED IN VARIOUS FACILITIES AROUND

CAMPUS INCLUDING THE FRICK FINE ARTS BUILDING, THE HILLMAN LIBRARY, AND

THE NATIONALITY ROOMS. THE WORKS OF ART, HISTORICAL TREASURES, AND OTHER

SIMILAR ASSETS ARE USED FOR PUBLIC EXHIBITION AND THE PRESERVATION OF

ARTIFACTS AND ANTIQUES FOR THE BENEFIT OF FUTURE GENERATIONS. THE

**Part XIII** Supplemental Information (continued)

SCHOLARLY PAPERS AND ARCHIVES ARE USED FOR BOTH ACADEMIC RESEARCH AND THE  
 PRESERVATION OF DOCUMENTS RELATED TO KEY HISTORICAL FIGURES AND EVENTS.

PART V, LINE 4: ENDOWMENT PURPOSE:

OPERATING FUNDS QUASI ENDOWMENT

CHAIRS, PROFESSORSHIPS AND INSTRUCTION

SCHOLARSHIPS, FELLOWSHIPS AND AWARDS

POST RETIREMENT RESERVES

GENERAL AND UNDESIGNATED FUNDS

RESEARCH, LIBRARY AND PUBLIC SERVICE

DEVELOPMENT AND INSTITUTIONAL SUPPORT

PART X, LINE 2: THE UNIVERSITY ANNUALLY REVIEWS ITS TAX POSITIONS AND

HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT

REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS. NO PROVISION

FOR INCOME TAXES WAS REQUIRED FOR 2013 OR 2012.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF COST OF SALES-AUX FROM EXPENSE	9,577,327.
---	------------

RECLASS OF EXTERNAL TENANT RENTAL EXPS FROM EXPENSE	10,061,595.
---	-------------

TOTAL TO SCHEDULE D, PART XI, LINE 2D	19,638,922.
---------------------------------------	-------------

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TUITION DISCOUNTS TO FINANCIAL AID EXPENSE	158,216,453.
---	--------------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF COST OF SALES-AUX TO REVENUE	9,577,327.
---	------------

RECLASS OF EXTERNAL TENANT RENTAL EXPS TO REVENUE	10,061,595.
---	-------------

**Part XIII** Supplemental Information (continued)

TOTAL TO SCHEDULE D, PART XII, LINE 2D 19,638,922.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TUITION DISCOUNTS TO FINANCIAL AID EXPENSE 158,216,453.

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

**Schools**

OMB No. 1545-0047

**2012**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ **Attach to Form 990 or Form 990-EZ.**

Name of the organization  
**UNIVERSITY OF PITTSBURGH**

Employer identification number  
**25-0965591**

**Part I**

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II .....	X	
OUR NONDISCRIMINATION POLICY STATEMENT WAS PUBLISHED IN THE UNIVERSITY TIMES IN FALL 2012.		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff? .....	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	X	
d Copies of all material used by the organization or on its behalf to solicit contributions? .....	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? .....		X
b Admissions policies? .....		X
c Employment of faculty or administrative staff? .....		X
d Scholarships or other financial assistance? .....		X
e Educational policies? .....		X
f Use of facilities? .....		X
g Athletic programs? .....		X
h Other extracurricular activities? .....		X
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? .....	X	
b Has the organization's right to such aid ever been revoked or suspended? .....		X
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 .....	X	

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

Schedule E (Form 990 or 990-EZ) (2012)

**Part II Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information.

SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

AS AN INSTRUMENTALITY OF THE COMMONWEALTH OF PENNSYLVANIA, THE UNIVERSITY

OF PITTSBURGH RECEIVES FUNDS FROM THE COMMONWEALTH. IN ADDITION, THE

UNIVERSITY RECEIVES FEDERAL PELL GRANTS AND COMMONWEALTH PHEAA GRANTS THAT

ARE APPLIED TO STUDENTS' ACCOUNTS.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization  UNIVERSITY OF PITTSBURGH	Employer identification number  25-0965591
--	--

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	199,571.
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	1,784,035.
EUROPE	1	3	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	10,372,655.
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	267,383.
NORTH AMERICA			PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	1,931,174.
RUSSIA			PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	173,162.
SOUTH AMERICA	1	3	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	2,274,792.
SOUTH ASIA			PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	270,245.
<b>3 a</b> Sub-total .....	2	6			17,273,017.
<b>b</b> Total from continuation sheets to Part I .....	0	0			22,133,847.
<b>c Totals</b> (add lines 3a and 3b) .....	2	6			39,406,864.

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

Schedule F (Form 990) 2012

**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA			PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	238,534.
EUROPE			INVESTMENTS.		13,115,499.
NORTH AMERICA			INVESTMENTS.		3,024,850.
EAST ASIA AND THE PACIFIC			INVESTMENTS.		5,754,964.
<b>Totals</b> .....					22,133,847.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH SUBCONTRACT.	817,606.	WIRE/CHECK	0.		
		EUROPE	RESEARCH SUBCONTRACT.	2,200,594.	WIRE/CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	RESEARCH SUBCONTRACT.	191,830.	WIRE/CHECK	0.		
		NORTH AMERICA	RESEARCH SUBCONTRACT.	588,382.	WIRE/CHECK	0.		
		SOUTH AMERICA	RESEARCH SUBCONTRACT.	595,598.	WIRE/CHECK	0.		
		SOUTH ASIA	RESEARCH SUBCONTRACT.	32,140.	WIRE/CHECK	0.		
		SUB-SAHARAN AFRICA	RESEARCH SUBCONTRACT	10,568.	WIRE/CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ..... 50

3 Enter total number of other organizations or entities ..... 4



**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
RESEARCH SUBCONTRACT	CENTRAL AMERICA AND THE CARIBBEAN	14	130,323.	WIRE/CHECK	0.		
SCHOLARSHIPS	EUROPE	18	243,088.	TUITION REFUND	0.		
SCHOLARSHIPS	SOUTH AMERICA	9	76,950.	TUITION REFUND	0.		
RESEARCH SUBCONTRACT	SOUTH ASIA	1	5,000.	WIRE/CHECK	0.		

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* .....  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* .....  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* .....  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* .....  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* .....  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* .....  Yes  No

Schedule F (Form 990) 2012

**Part V Supplemental Information**

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

SCHEDULE F, PART I, LINE 2: THE INITIAL DETERMINATION OF ELIGIBILITY AND

APPROPRIATENESS OF THE ENTITY LIES JOINTLY BETWEEN THE PRINCIPAL

INVESTIGATOR (PI)/DEPARTMENT AND THE OFFICE OF RESEARCH. THE

PI/DEPARTMENT IDENTIFIES THE ENTITY USUALLY BASED UPON THE UNIQUE NEEDS

OF THE PI EVIDENCED IN THE SCOPE OF WORK. DOCUMENTATION IS OBTAINED FROM

THE ENTITY WHICH IS REVIEWED. UPON SUBMISSION, THE OFFICE OF RESEARCH

LOOKS FOR THIS DOCUMENTATION SO THAT IT MEETS SPONSOR AND UNIVERSITY

REQUIREMENTS. IF AND WHEN THE PROJECT IS FUNDED, THE DEPARTMENT

INITIATES A SUBCONTRACT REQUEST. THE SUBCONTRACT TERMS INCLUDE PROVISIONS

FOR REGULAR WRITTEN PROGRESS REPORTS AS WELL AS INVOICING.



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		KOCD DAVID C. KOCH TOURNAMENT	CAMEOS OF CARING DINNER	31	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	<b>1</b> Gross receipts .....	343,480.	343,300.	1,195,444.	1,882,224.
	<b>2</b> Less: Contributions .....	191,370.	233,215.	956,253.	1,380,838.
	<b>3</b> Gross income (line 1 minus line 2) .....	152,110.	110,085.	239,191.	501,386.
Direct Expenses	<b>4</b> Cash prizes .....			800.	800.
	<b>5</b> Noncash prizes .....			10,624.	10,624.
	<b>6</b> Rent/facility costs .....		10,864.	53,744.	64,608.
	<b>7</b> Food and beverages .....		91,347.	230,323.	321,670.
	<b>8</b> Entertainment .....		1,500.	22,215.	23,715.
	<b>9</b> Other direct expenses .....		84,051.	97,106.	181,157.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				(602,574)
	<b>11</b> Net income summary. Combine line 3, column (d), and line 10 .....				-101,188.

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

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

**9** Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_

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

**b** If "No," explain: \_\_\_\_\_

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

**b** If "Yes," explain: \_\_\_\_\_

- 11 Does the organization operate gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity operated in:
 

<b>13a</b>		%
<b>13b</b>		%

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: GRIZZARD COMMUNICATIONS GROUP, INC.

(I) ADDRESS OF FUNDRAISER:

229 PEACHTREE STREET NE STE 1400, ATLANTA, GA 30303

(I) NAME OF FUNDRAISER: GRENZEBACH GLIER & ASSOCIATES, INC.

(I) ADDRESS OF FUNDRAISER:

401 N. MICHIGAN AVE SUITE 2800, CHICAGO, IL 60611

**Part IV** Supplemental Information (continued)

SCHEDULE G, PART I

EXPLANATION OF CONSULTING FEES

THE UNIVERSITY RETAINS GRENZEBACH GLIER & ASSOCIATES (GG&A) FOR  
 FUNDRAISING CONSULTATION. DUE TO THE NATURE OF THE SERVICES PROVIDED,  
 IN THAT NO DIRECT SOLICITATIONS OR FUNDRAISING EVENTS ARE CONDUCTED BY  
 GG&A, IT IS NOT POSSIBLE TO REPORT GROSS RECEIPTS DIRECTLY RELATED TO  
 THEIR SPECIFIC CONSULTING SERVICES.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ **Attach to Form 990.**

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization **UNIVERSITY OF PITTSBURGH** Employer identification number **25-0965591**

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

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

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH, PA 15213	25-0969449	501(C)(3)	6,008,969.	0.			RESEARCH-SUBCONTRACT
REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1111 FRANKLIN ST 10 FL - OAKLAND, CA 94607	94-3067788	501(C)(3)	4,629,922.	0.			RESEARCH-SUBCONTRACT
JOHNS HOPKINS UNIVERSITY 1101 EAST 33RD ST BALTIMORE, MD 21218	52-0595110	501(C)(3)	3,717,124.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF WASHINGTON GERBERDING HALL G80 SEATTLE, WA 98195	91-6001537	501(C)(3)	1,885,076.	0.			RESEARCH-SUBCONTRACT
MAGEE WOMENS RESEARCH INSTITUTE 3339 WARD STREET PITTSBURGH, PA 15213	25-1462312	501(C)(3)	1,677,527.	0.			RESEARCH-SUBCONTRACT
REGENTS OF THE UNIVERSITY OF MINNESOTA - 2221 UNIVERSITY AVE SE - MINNEAPOLIS, MN 55414	41-6007513	501(C)(3)	1,640,301.	0.			RESEARCH-SUBCONTRACT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **288.**
- 3** Enter total number of other organizations listed in the line 1 table **53.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2012)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSORTIUM FOR PUBLIC EDUCATION 410 9TH STREET MCKEESPORT, PA 15132	25-1533592	501(C)(3)	1,576,134.	0.			RESEARCH-SUBCONTRACT
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND, OH 44106	34-1018992	501(C)(3)	1,249,074.	0.			RESEARCH-SUBCONTRACT
NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES - 6610 ROCKLEDGE DRIVE SUITE 2800 MSC 6006 - BETHESDA, MD 20892-6606	52-0858115	N/A	1,241,000.	0.			RESEARCH-SUBCONTRACT
REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S STATE STREET - ANN ARBOR, MI 48109	38-6006309	501(C)(3)	1,241,902.	0.			RESEARCH-SUBCONTRACT
BETH ISRAEL DEACONESS MEDICAL CENTER - 300 BROOKLINE AVE - BOSTON, MA 02215	04-2103881	501(C)(3)	1,154,040.	0.			RESEARCH-SUBCONTRACT
WVU RESEARCH CORPORATION PO BOX 6005 MORGANTOWN, WV 26506	55-0665758	501(C)(3)	974,781.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MARYLAND BALTIMORE PO BOX 41428 BALTIMORE, MD 21203-6248	52-6002036	N/A	888,924.	0.			RESEARCH-SUBCONTRACT
VANDERBILT UNIVERSITY VU STATION B BOX 356310 NASHVILLE, TN 37235	62-0476822	501(C)(3)	986,891.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MARYLAND 1201 TURNER HALL COLLEGE PARK, MD 20742	52-6002033	501(C)(3)	858,532.	0.			RESEARCH-SUBCONTRACT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGETOWN UNIVERSITY 37TH & O STREETS NW SUITE 400 WASHINGTON, DC 20057	53-0196603	501(C)(3)	842,411.	0.			RESEARCH-SUBCONTRACT
COMMUNITY HUMAN SERVICES CORP. 374 LAWN STREET PITTSBURGH, PA 15213	25-1219610	501(C)(3)	812,321.	0.			RESEARCH-SUBCONTRACT
BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM - 700 REGENT STREET, SUITE 301 - MADISON, WI 53715	39-6006492	501(C)(3)	786,236.	0.			RESEARCH-SUBCONTRACT
VIRGINIA COMMONWEALTH UNIVERSITY 800 EAST LEHIGH STREET RICHMOND, VA 23219	54-6001758	501(C)(3)	776,197.	0.			RESEARCH-SUBCONTRACT
OHIO STATE UNIVERSITY 154 WEST 12TH AVENUE COLUMBUS, OH 43210	31-6025986	501(C)(3)	730,865.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF LOUISVILLE OFFICE OF THE CONTROLLER 223 SERVICE COMPLEX - LOUISVILLE, KY 40292	61-1014882	501(C)(3)	695,763.	0.			RESEARCH-SUBCONTRACT
WASHINGTON UNIVERSITY IN ST. LOUIS 7425 FORSYTH WEST CAMPUS CLAYTON, MO 63105	43-0653611	501(C)(3)	656,570.	0.			RESEARCH-SUBCONTRACT
TRUSTEES OF PRINCETON UNIVERSITY 701 CARNEGIE CENTER SUITE 445 PRINCETON, NJ 08544-5292	21-0634501	501(C)(3)	609,108.	0.			RESEARCH-SUBCONTRACT
WAKE FOREST UNIVERSITY 1834 WAKE FOREST RD WINSTON-SALEM, NC 27106	56-0532138	501(C)(3)	601,944.	0.			RESEARCH-SUBCONTRACT

Schedule I (Form 990)

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UNIVERSITY OF VIRGINIA BOX 4001953 CHARLOTTESVILLE, VA 22904	54-6001786	501(C)(3)	550,171.	0.			RESEARCH-SUBCONTRACT
TULANE UNIVERSITY 6823 ST CHARLES AVENUE NEW ORLEANS, LA 70118	72-0432889	501(C)(3)	499,566.	0.			RESEARCH-SUBCONTRACT
MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE L LEVY PLACE NEW YORK, NY 10029	13-6171197	501(C)(3)	442,964.	0.			RESEARCH-SUBCONTRACT
ALLEGHENY SINGER RESEARCH INSTITUTE - C/O TAX DEPT TWO ALLEGHENY CENTER - PITTSBURGH, PA 15212	25-1320493	501(C)(3)	439,207.	0.			RESEARCH-SUBCONTRACT
FOCUS ON RENEWAL 701 CHARTIERS AVENUE MCKEES ROCKS, PA 15136	23-7181440	501(C)(3)	431,167.	0.			RESEARCH-SUBCONTRACT
CHRISTIANA CARE HEALTH SERVICES PO BOX 2653 WILMINGTON, DE 19805	51-0103684	501(C)(3)	420,438.	0.			RESEARCH-SUBCONTRACT
HOWARD UNIVERSITY 576 W ST NW WASHINGTON, DC 20059	53-0204707	501(C)(3)	418,392.	0.			RESEARCH-SUBCONTRACT
GEORGIA TECH RESEARCH GROUP 550 TENTH STREET NW ATLANTA, GA 30332	58-0603146	501(C)(3)	406,345.	0.			RESEARCH-SUBCONTRACT
PPD DEVELOPMENT LP 26361 NETWORK PLACE CHICAGO, IL 60693-1263	74-2325267	501(C)(3)	404,480.	0.			RESEARCH-SUBCONTRACT

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UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE - 92001 UNIVERSITY CITY BLVD - CHARLOTTE, NC 28223	56-0791228	501(C)(3)	400,359.	0.			RESEARCH-SUBCONTRACT
BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA NO T100 HOUSTON, TX 77030	74-1613878	501(C)(3)	397,149.	0.			RESEARCH-SUBCONTRACT
DUKE UNIVERSITY 324 BLACKWELL STREET DURHAM, NC 27708	56-0532129	501(C)(3)	397,080.	0.			RESEARCH-SUBCONTRACT
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT STREET BOSTON, MA 02114	04-1564655	501(C)(3)	386,571.	0.			RESEARCH-SUBCONTRACT
PENNSYLVANIA STATE UNIVERSITY ONE OLD MAIN UNIVERSITY PARK, PA 16802	24-6000376	N/A	381,597.	0.			RESEARCH-SUBCONTRACT
KUAKINI MEDICAL CENTER 347 NORTH KUAKINI STREET HONOLULU, HI 96817	99-0074139	501(C)(3)	365,238.	0.			RESEARCH-SUBCONTRACT
COLUMBIA UNIVERSITY 615 WEST 131ST ST MC 8741 NEW YORK, NY 10027	13-5598093	501(C)(3)	364,205.	0.			RESEARCH-SUBCONTRACT
HARVARD UNIVERSITY 1033 MASS AVE STE 3 CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	361,744.	0.			RESEARCH-SUBCONTRACT
WEST VIRGINIA UNIVERSITY PO BOX 6003 CHARLESTON, WV 25321	21-5920034	501(C)(3)	356,186.	0.			RESEARCH-SUBCONTRACT

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UNIVERSITY OF VERMONT 85 SO. PROSPECT STREET BURLINGTON, VT 05405	03-0179440	501(C)(3)	354,865.	0.			RESEARCH-SUBCONTRACT
HEALTH FEDERATION OF PHILADELPHIA 1211 CHESTNUT STREET SUITE 801 PHILADELPHIA, PA 19107	23-2244355	501(C)(3)	341,619.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF ILLINOIS 1901 S FIRST ST CHAMPAIGN, IL 61820	37-6000511	501(C)(3)	339,913.	0.			RESEARCH-SUBCONTRACT
TURTLE CREEK VALLEY MH/MR INC. 723 BRADDOCK AVENUE BRADDOCK, PA 15104	25-1250510	N/A	336,633.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF TEXAS 1 UNIVERSITY STATION AUSTIN, TX 78712	74-6001118	N/A	336,418.	0.			RESEARCH-SUBCONTRACT
PRINCETON UNIVERSITY WASHINGTON ROAD PRINCETON, NJ 08544	21-0634501	501(C)(3)	332,001.	0.			RESEARCH-SUBCONTRACT
BRIGHAM & WOMEN'S HOSPITAL 75 FRANCIS ST BOSTON, MA 02115	04-2312909	501(C)(3)	331,975.	0.			RESEARCH-SUBCONTRACT
FRED HUTCHINSON CANCER RESEARCH 1100 FAIRVIEW AVE NORTH SEATTLE, WA 98109	23-7156071	501(C)(3)	329,965.	0.			RESEARCH-SUBCONTRACT
SCIENCE MUSEUM OF MINNESOTA 120 WEST KELLOGG BOULEVARD ST. PAUL, MN 55102	41-0706172	501(C)(3)	322,414.	0.			RESEARCH-SUBCONTRACT

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YALE UNIVERSITY 47 COLLEGE ST STE 203 NEW HAVEN, CT 06520	06-0646973	501(C)(3)	321,242.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF CINCINNATI 2600 CLIFTON AVE CINCINNATI, OH 45221	31-6000989	N/A	320,180.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF IOWA 201 GILMORE HALL IOWA CITY, IA 52242	42-6004813	N/A	319,830.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION - 301 PETERSON SERVICE BUILDING - LEXINGTON, KY 40506	61-6033693	501(C)(3)	317,134.	0.			RESEARCH-SUBCONTRACT
BOSTON CHILDREN'S HOSPITAL P.O. BOX 414413 RESEARCH FINANCE- BOSTON, MA 02241-4413	04-2774441	501(C)(3)	312,723.	0.			RESEARCH-SUBCONTRACT
RESEARCH INSTITUTE AT NATIONWIDE CHILDREN'S HOSPITAL - PO BOX 715245 - COLUMBUS, OH 43271	31-6056230	501(C)(3)	309,668.	0.			RESEARCH-SUBCONTRACT
RAND CORPORATION 1776 MAIN STREET SANTA MONICA, CA 90407	95-1958142	501(C)(3)	305,554.	0.			RESEARCH-SUBCONTRACT
INOVA JUNPIER PROGRAM 2832 JUNIPER STREET STE 104 FAIRFAX, VA 22031	54-0620889	501(C)(3)	294,032.	0.			RESEARCH-SUBCONTRACT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT STREET - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	339,942.	0.			RESEARCH-SUBCONTRACT

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BROWN UNIVERSITY 164 ANGELL ST PROVIDENCE, RI 02912	05-0258809	501(C)(3)	279,110.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF CENTRAL FLORIDA 4000 CENTRAL FLORIDA BLVD ORLANDO, FL 32816	59-2924021	N/A	278,083.	0.			RESEARCH-SUBCONTRACT
IRETA 425 SIXTH AVENUE PITTSBURGH, PA 15219	25-1857820	501(C)(3)	264,039.	0.			RESEARCH-SUBCONTRACT
KENTUCKY PEDIATRIC/ADULT RESEARCH 201 SOUTH 5TH STREET BARDSTOWN, KY 40004	61-1206931	501(C)(3)	258,148.	0.			RESEARCH-SUBCONTRACT
GENEVA FOUNDATION 917 PACIFIC AVENUE SUITE 600 TACOMA, WA 98402	91-1593913	501(C)(3)	247,773.	0.			RESEARCH-SUBCONTRACT
INDIANA UNIVERSITY 107 S INDIANA AVENUE BLOOMINGTON, IN 47405	35-6001673	501(C)(3)	247,626.	0.			RESEARCH-SUBCONTRACT
OREGON HEALTH & SCIENCE UNIVERSITY 1121 SW SALMON ST PORTLAND, OR 97205	23-7083114	501(C)(3)	243,798.	0.			RESEARCH-SUBCONTRACT
NYU SCHOOL OF MEDICINE PO BOX 415026 BOSTON, MA 02241	13-5562309	N/A	241,803.	0.			RESEARCH-SUBCONTRACT
NORTHWESTERN UNIVERSITY 619 CLARK ST RM 217 EVANSTON, IL 60208	36-2167817	501(C)(3)	240,051.	0.			RESEARCH-SUBCONTRACT

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DREXEL UNIVERSITY 3201 ARCH STREET NO. 420 PHILADELPHIA, PA 19104-2875	23-1352630	501(C)(3)	239,200.	0.			RESEARCH-SUBCONTRACT
TEMPLE UNIVERSITY 1805 NORTH BROAD ST 11 FL WASCHMAN HALL RM 1108 - PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	234,203.	0.			RESEARCH-SUBCONTRACT
SEATTLE CHILDREN'S RESEARCH HOSPITAL - PO BOX 5371 - SEATTLE, WA 98145	91-0564748	501(C)(3)	234,131.	0.			RESEARCH-SUBCONTRACT
SRI INTERNATIONAL 333 RAVENSWOOD AVENUE MENLO PARK, CA 94025	94-1160950	501(C)(3)	231,945.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MIAMI PO BOX 016960 SPONSORED PROGRAMS MIAMI, FL 33101-5405	59-0624458	501(C)(3)	230,613.	0.			RESEARCH-SUBCONTRACT
FLORIDA STATE UNIVERSITY 874 TRADITIONS WAY TALLAHASSEE, FL 32306	59-6001138	501(C)(3)	230,376.	0.			RESEARCH-SUBCONTRACT
JACKSON LABORATORY 600 MAIN STREET PO BOX 9741 BAR HARBOR, ME 04609	01-0211513	501(C)(3)	222,537.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES - 4301 WEST MARKHAM - LITTLE ROCK, AR 72205	71-6046242	501(C)(3)	213,930.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MASSACHUSETTS 225 FRANKLIN ST BOSTON, MA 02110	04-3167352	501(C)(3)	213,527.	0.			RESEARCH-SUBCONTRACT

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NEMOURS 10140 CENTURION PARKWAY NORTH JACKSONVILLE, FL 32256	59-0634433	501(C)(3)	212,078.	0.			RESEARCH-SUBCONTRACT
EAST CAROLINA UNIVERSITY 2200 SOUTH CHARLES BLVD GREENVILLE, NC 27858	56-6000403	501(C)(3)	206,695.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER - 7703 FLOYD CURL DRIVE - SAN ANTONIO, TX 78284	74-1586031	501(C)(3)	205,466.	0.			RESEARCH-SUBCONTRACT
ALBERT EINSTEIN COLLEGE OF MEDICINE - 500 WEST 185TH STREET - NEW YORK, NY 10033	23-7075620	501(C)(3)	204,634.	0.			RESEARCH-SUBCONTRACT
ANN & ROBERT H. LURIE CHILDREN'S HOSPITAL - 225 EAST CHICAGO AVENUE BOX #205 - CHICAGO, IL 60611	36-2170833	501(C)(3)	204,419.	0.			RESEARCH-SUBCONTRACT
CHILDRENS HOSPITAL OF PHILADELPHIA 3615 CIVIC CENTER BLVD PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	201,776.	0.			RESEARCH-SUBCONTRACT
UT-BATTELLE LLC 1201 OAK RIDGE TURNPIKE OAK RIDGE, TN 37830	62-1788235	N/A	200,875.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF COLORADO 3100 MARINE ST RM 479 BOULDER, CO 80309	39-1481425	501(C)(3)	196,178.	0.			RESEARCH-SUBCONTRACT
RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORK - PO BOX 9 - ALBANY, NY 12201	14-1368361	501(C)(3)	195,798.	0.			RESEARCH-SUBCONTRACT

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UNIVERSITY OF KENTUCKY 130 LEADER AVE LEXINGTON, KY 40506	61-6001218	501(C)(3)	192,361.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY GARDENS LOS ANGELES, CA 90089	95-1642394	501(C)(3)	191,166.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF TENNESSEE 201 ANDY HOLT TOWER KNOXVILLE, TN 37996	62-6001636	501(C)(3)	189,287.	0.			RESEARCH-SUBCONTRACT
BRENTWOOD BIOMEDICAL RESEARCH INSTITUTE - PO BOX 25027 - LOS ANGELES, CA 90025	95-4183712	501(C)(3)	183,463.	0.			RESEARCH-SUBCONTRACT
REHABILITATION INSTITUTE OF CHICAGO - 345 E SUPERIOR ST - CHICAGO, IL 60611	36-2256036	501(C)(3)	176,239.	0.			RESEARCH-SUBCONTRACT
FLORIDA INTERNATIONAL UNIVERSITY GREEN LIBRARY ROOM 273 MIAMI, FL 33199	65-0177616	501(C)(3)	171,013.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF DELAWARE OFFICE OF THE VP FOR FINANCE NEWARK, DE 19716	51-6000297	501(C)(3)	167,902.	0.			RESEARCH-SUBCONTRACT
REVIVICOR INC. 1700 KRAFT DR SUITE 2400 BLACKSBURG, VA 24060	81-0604263	501(C)(3)	167,772.	0.			RESEARCH-SUBCONTRACT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVE - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	164,200.	0.			RESEARCH-SUBCONTRACT

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RITE AID HEADQUARTERS 30 HUNTER LANE CAMP HILL, PA 17011	23-2308342	501(C)(3)	163,220.	0.			RESEARCH-SUBCONTRACT
PONCE SCHOOL OF MEDICINE PO BOX 7004 PONCE, PR 00732-7004	66-0379122	501(C)(3)	163,202.	0.			RESEARCH-SUBCONTRACT
EMORY UNIVERSITY 201 DOWAN DRIVE ATLANTA, GA 30322	58-0566256	501(C)(3)	163,023.	0.			RESEARCH-SUBCONTRACT
INTERMOUNTAIN HEALTHCARE CME 36 S STATE ST STE 2200 SALT LAKE CITY, UT 84111	94-2853320	501(C)(3)	162,754.	0.			RESEARCH-SUBCONTRACT
SUMMA HEALTH SYSTEM 525 EAST MARKET STREET AKRON, OH 44309	34-1887844	501(C)(3)	162,628.	0.			RESEARCH-SUBCONTRACT
PUBLIC HEALTH RESEARCH INSTITUTE 225 WARREN STREET NEWARK, NJ 07103	13-5563402	N/A	161,834.	0.			RESEARCH-SUBCONTRACT
CENTER FOR ORGAN RECOVERY AND EDUCATION - 204 SIGMA DRIVE - PITTSBURGH, PA 15238	23-1332885	501(C)(3)	161,684.	0.			RESEARCH-SUBCONTRACT
TRUSTEES OF DARTMOUTH COLLEGE 37 DEWEY FIELD ROAD HANOVER, NH 03755	02-0222111	501(C)(3)	158,918.	0.			RESEARCH-SUBCONTRACT
RHODE ISLAND HOSPITAL 593 EDDY ST PROVIDENCE, RI 02903	05-0258954	501(C)(3)	156,034.	0.			RESEARCH-SUBCONTRACT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANA-FARBER CANCER INSTITUTE 44 BINNER ST STE BP600 BOSTON, MA 02115	04-2263040	501(C)(3)	152,029.	0.			RESEARCH-SUBCONTRACT
STANFORD UNIVERSITY 3145 PORTER DRIVE PALO ALTO, CA 94304	94-1156365	501(C)(3)	172,924.	0.			RESEARCH-SUBCONTRACT
MAYO CLINIC ROCHESTER 200 FIRST ST SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	151,406.	0.			RESEARCH-SUBCONTRACT
CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVENUE CINCINNATI, OH 45229	31-0833936	501(C)(3)	148,004.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF OREGON PO BOX 3237 EUGENE, OR 97403	93-6001786	501(C)(3)	145,332.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF WISCONSIN 600 HIGHLAND AVE MADISON, WI 53792	39-1805963	501(C)(3)	145,109.	0.			RESEARCH-SUBCONTRACT
LAUNCHPOINT TECHNOLOGIES 5735 HOLLISTER AVE SUITE B GOLETA, CA 93117	86-1154993	501(C)(3)	140,671.	0.			RESEARCH-SUBCONTRACT
CORNELL UNIVERSITY 341 PINE STREET ITHACA, NY 14850	15-0532082	501(C)(3)	140,033.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF SOUTH FLORIDA PO BOX 917590 ORLANDO, FL 32891	59-6001874	501(C)(3)	138,747.	0.			RESEARCH-SUBCONTRACT

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WORLD HEART 4750 WILEY POST WAY STE 120 SALT LAKE CITY, UT 84116-7622	52-2250843	501(C)(3)	135,147.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MASSACHUSETTS MEDICAL CENTER - 55 LAKE AVENUE N - WORCESTER, MA 01655	04-3167352	N/A	134,793.	0.			RESEARCH-SUBCONTRACT
CONTINUUM HEALTH PARTNERS INC. 555 WEST 57TH STREET NEW YORK, NY 10019	13-3939476	501(C)(3)	130,372.	0.			RESEARCH-SUBCONTRACT
PTEI 450 TECHNOLOGY DRIVE PITTSBURGH, PA 15219	25-1789285	501(C)(3)	126,494.	0.			RESEARCH-SUBCONTRACT
BANYAN BIOMARKERS INC. 12085 RESEARCH DR ALACHUA, FL 32615	20-1449566	N/A	124,007.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MEMPHIS 3720 ALUMNI AVENUE MEMPHIS, TN 38152	62-0648618	501(C)(3)	123,732.	0.			RESEARCH-SUBCONTRACT
THOMAS JEFFERSON UNIVERSITY 1020 WALNUT STREET PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	120,258.	0.			RESEARCH-SUBCONTRACT
TUFTS UNIVERSITY 169 HOLLAND ST ATTN TAX DEPT SOMERVILLE, MA 02144	04-2103634	501(C)(3)	117,336.	0.			RESEARCH-SUBCONTRACT
CINCINNATI CHILDREN'S HOSPITAL 3333 BURNET AVENUE CINCINNATI, OH 45229	31-0537130	501(C)(3)	113,777.	0.			RESEARCH-SUBCONTRACT

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THE NEW SCHOOL 79 FIFTH AVENUE, 16TH FLOOR NEW YORK, NY 10003	13-3297197	501(C)(3)	108,656.	0.			RESEARCH-SUBCONTRACT
CHESTER COUNTY DEPT OF HUMAN SERVICES - 601 WESTTOWN ROAD SUITE 330 PO BOX 2747 - WEST CHESTER, PA 19380-0990	23-6003040	N/A	107,826.	0.			RESEARCH-SUBCONTRACT
NEW YORK UNIVERSITY 726 BROADWAY- 9TH FLOOR NEW YORK, NY 10003	13-5562308	501(C)(3)	107,626.	0.			RESEARCH-SUBCONTRACT
PENNSYLVANIA FAMILIES INCORPORATED 431 DEVER HOLLOW RD TEMPLETON, PA 16259	26-3237097	501(C)(3)	106,466.	0.			RESEARCH-SUBCONTRACT
TEXAS A&M UNIVERSITY 1470 WILLIAM D FITCH PARKWAY COLLEGE STATION, TX 77845	74-1974733	501(C)(3)	102,104.	0.			RESEARCH-SUBCONTRACT
GENOCEA BIOSCIENCES 161 FIRST STREET CAMBRIDGE, MA 02142	51-0596811	N/A	101,819.	0.			RESEARCH-SUBCONTRACT
WEST HARLEM ENVIRONMENTAL ACTION INC. - 1854 AMSTERDAM AVENUE 2ND FLOOR - NEW YORK, NY 10031	13-3800068	501(C)(3)	100,003.	0.			RESEARCH-SUBCONTRACT
ALLEN INTERACTIONS INC. 1120 CENTRE POINT DR SUITE 800 MENDOLA HEIGHTS, MN 55120	41-1756542	N/A	100,000.	0.			RESEARCH-SUBCONTRACT
DUQUENSE UNIVERSITY OF THE HOLY SPIRIT - 600 FORBES AVENUE - PITTSBURGH, PA 15282	25-1035663	501(C)(3)	96,361.	0.			RESEARCH-SUBCONTRACT

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MOSS REHAB HOSPITAL 60 E. TOWNSHIP LINE ROAD ELKINS PARK, PA 19027	22-2290323	N/A	94,999.	0.			RESEARCH-SUBCONTRACT
ARIZONA STATE UNIVERSITY UNIVERSITY BOX 873503 TEMPE, AZ 85287	86-0196696	501(C)(3)	94,535.	0.			RESEARCH-SUBCONTRACT
HENRY M. JACKSON FOUNDATION FOR THE ADVANCEMENT OF MILITARY MEDICINE INC - 1401 ROCKVILLE PIKE - ROCKVILLE, MD 20852	52-1313011	501(C)(3)	94,013.	0.			RESEARCH-SUBCONTRACT
CHILDREN'S RESEARCH INSTITUTE 9000 W WISCONSIN AVE PO BOX 1997 MILWAUKEE, WI 53201	20-2180646	501(C)(3)	93,524.	0.			RESEARCH-SUBCONTRACT
MICHIGAN STATE UNIVERSITY 301 ADMIN BLDG EAST LANSING, MI 48824	38-6005984	501(C)(3)	92,449.	0.			RESEARCH-SUBCONTRACT
NATIONAL OPINION RESEARCH CENTER 55 E MONROE STREET 20TH FLOOR CHICAGO, IL 60603	36-2167808	501(C)(3)	90,364.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF MISSOURI 15 JESSE HALL COLUMBIA, MO 65211	43-6003859	501(C)(3)	88,793.	0.			RESEARCH-SUBCONTRACT
CONEMAUGH HEALTH SYSTEM 1086 FRANKLIN STREET JOHNSTOWN, PA 15905	23-2801799	501(C)(3)	87,703.	0.			RESEARCH-SUBCONTRACT
CHILDRENS HOSPITAL OF BOSTON 300 LONGWOOD AVE BOSTON, MA 02115	04-2774441	501(C)(3)	87,427.	0.			RESEARCH-SUBCONTRACT

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HEALTH RESEARCH INC. 150 BROADWAY STE 560 MENANDS, NY 12204	14-1402155	501(C)(3)	87,250.	0.			RESEARCH-SUBCONTRACT
SOUTHWEST PA AHEC LEXINGTON TECHNOLOGY PARK 400 N LEXINGTON AVE - PITTSBURGH, PA 15208	25-1791450	501(C)(3)	84,009.	0.			RESEARCH-SUBCONTRACT
LOS ALAMOS NATIONAL LABORATORY P.O. BOX 1663, MAIL STOP P245 LOS ALAMOS, NM 87545	85-6004458	N/A	82,441.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF UTAH 201 PRESIDENTS CIRCLE SALT LAKE CITY, UT 84112	87-6000525	N/A	82,399.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF NEBRASKA 312 N 14TH ST LINCOLN, NE 68588-0430	47-0049123	501(C)(3)	80,438.	0.			RESEARCH-SUBCONTRACT
PHARMACY QUALITY ALLIANCE 6213 OLD KEENE MILL COURT SPRINGFIELD, VA 22152	26-2968498	501(C)(3)	80,255.	0.			RESEARCH-SUBCONTRACT
CE CITY 285 WATERFRONT DRIVE E SUITE 100 PITTSBURGH, PA 15120	25-1798854	N/A	80,000.	0.			RESEARCH-SUBCONTRACT
BAYLOR RESEARCH INSTITUTE P.O. BOX 846275 DALLAS, TX 75284-6275	75-1921898	501(C)(3)	78,930.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF HAWAII 2530 DOLE STREET HONOLULU, HI 96822	99-6000354	501(C)(3)	76,398.	0.			RESEARCH-SUBCONTRACT

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GATEWAY REHABILITATION CENTER MOFFETT RUN ROAD ALIQUIPPA, PA 15001	25-1204418	501(C)(3)	74,504.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF ALASKA 3700 SHARON GAGNON LANE ANCHORAGE, AK 99508	92-6000147	501(C)(3)	74,127.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF CHICAGO 5801 SOUTH ELLIS AVENUE CHICAGO, IL 60637	36-2177139	501(C)(3)	72,979.	0.			RESEARCH-SUBCONTRACT
LA BIOMEDICAL RESEARCH INSTITUTE 1124 W CARSON STREET BLDG N-14 TORRANCE, CA 90502	95-2138184	501(C)(3)	72,689.	0.			RESEARCH-SUBCONTRACT
3-C INSTITUTE FOR SOCIAL DEVELOPMENT - 21901 N HARRISON AVENUE STE 200 - CARY, NC 27513	56-2237463	N/A	71,984.	0.			RESEARCH-SUBCONTRACT
WAYNE STATE UNIVERSITY 5700 CASS AVENUE DETROIT, MI 48202	38-3555142	501(C)(3)	70,732.	0.			RESEARCH-SUBCONTRACT
INSTITUTE FOR URBAN FAMILY HEALTH 22 WEST 19TH ST 8TH FL NEW YORK, NY 10011	13-3273402	501(C)(3)	70,495.	0.			RESEARCH-SUBCONTRACT
IMMUNETRICS 100 TECHNOLOGY DRIVE SUITE 400 PITTSBURGH, PA 15219	25-1895963	N/A	68,021.	0.			RESEARCH-SUBCONTRACT
OHIO STATE UNIVERSITY RESEARCH FOUNDATION - 1960 KENNY RD - COLUMBUS, OH 43210	31-6401599	501(C)(3)	66,845.	0.			RESEARCH-SUBCONTRACT

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FUTURES WITHOUT VIOLENCE 100 MONTGOMERY STREET SAN FRANCISCO, CA 94129	94-3110973	501(C)(3)	64,295.	0.			RESEARCH-SUBCONTRACT
KANSAS STATE UNIVERSITY 10 ANDERSON HALL MANHATTAN, KS 66506-5015	48-0771751	501(C)(3)	62,763.	0.			RESEARCH-SUBCONTRACT
TEXAS TECH UNIVERSITY BOX 41023 LUBBOCK, TX 79409-1023	75-6002622	501(C)(3)	62,391.	0.			RESEARCH-SUBCONTRACT
OREGON RESEARCH INSTITUTE 1715 FRANKLIN BLVD EUGENE, OR 97403	93-0495655	501(C)(3)	60,634.	0.			RESEARCH-SUBCONTRACT
GEORGE WASHINGTON UNIVERSITY TAX DEPT ROME HALL 801 22ND ST NW WASHINGTON, DC 20052	53-0196584	501(C)(3)	59,211.	0.			RESEARCH-SUBCONTRACT
TUFTS NEW ENGLAND MEDICAL CENTER 750 WASHINGTON STREET NEMC #231 BOSTON, MA 02111	04-3400617	501(C)(3)	58,959.	0.			RESEARCH-SUBCONTRACT
INTEGRIS BAPTIST MEDICAL CENTER 3330 NW EXPRESSWAY BLDG C STE 806 OKLAHOMA CITY, OK 73112	73-1427611	501(C)(3)	58,280.	0.			RESEARCH-SUBCONTRACT
BATTELLE MEMORIAL INSTITUTE P.O. BOX 84391 SEATTLE, WA 98124-5691	31-4379427	501(C)(3)	57,663.	0.			RESEARCH-SUBCONTRACT
CARE NEW ENGLAND HEALTHCARE SYSTEM 345 BLACKSTONE BLVD 214 POTTER BLD PROVIDENCE, RI 02906	05-0258937	501(C)(3)	57,343.	0.			RESEARCH-SUBCONTRACT

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AURITEC PHARMACEUTICALS 15 BRAEBURN ROAD HYDE PARK, MA 02136	84-1629188	N/A	57,171.	0.			RESEARCH-SUBCONTRACT
BAYER BUSINESS & TECHNOLOGY SERVICES - P.O. BOX 223091 - PITTSBURGH, PA 15251	06-1653779	N/A	57,000.	0.			RESEARCH-SUBCONTRACT
UPMC 600 GRANT STREET 58TH FLOOR C/O CORPORATE TAX DEPT. - PITTSBURGH, PA 15219	25-1423657	501(C)(3)	51,578.	0.			RESEARCH-SUBCONTRACT
CHILDRENS HOSPITAL LOS ANGELES 4650 SUNSET BLVD LOS ANGELES, CA 90027	95-1690977	501(C)(3)	49,626.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF GEORGIA 424 BROAD ST ATHENS, GA 30602	58-6001998	501(C)(3)	48,482.	0.			RESEARCH-SUBCONTRACT
SAN DIEGO STATE UNIVERSITY FOUNDATION - 5250 CAMPANILE DR - SAN DIEGO, CA 92182	95-6042721	501(C)(3)	46,394.	0.			RESEARCH-SUBCONTRACT
SPAULDING REHABILITATION HOSPITAL P.O. BOX 3903 BOSTON, MA 02241	04-3071419	501(C)(3)	45,899.	0.			RESEARCH-SUBCONTRACT
NORTHERN BIOMEDICAL RESEARCH INC. 1210 PONTALUNA ROAD SPRING LAKE, MI 49456	38-3097741	N/A	44,594.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF ALABAMA AT BIRMINGHAM - 1530 3RD AVENUE SOUTH - BIRMINGHAM, AL 35294	63-6005396	501(C)(3)	44,426.	0.			RESEARCH-SUBCONTRACT

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UNIVERSITY OF MINNESOTA PHYSICIANS OUTREACH LABS - 720 WASHINGTON AVENUE SE SUITE 200 - MINNEAPOLIS, MN 55414	41-1843943	501(C)(3)	43,601.	0.			RESEARCH-SUBCONTRACT
CARNEGIE MUSEUMS OF PITTSBURGH 4400 FOBRES AVENUE PITTSBURGH, PA 15213	25-0965280	501(C)(3)	42,981.	0.			RESEARCH-SUBCONTRACT
RUSH UNIVERSITY HOSPITAL 1700 W VAN BUREN ROOM 150 CHICAGO, IL 60612	36-2174823	501(C)(3)	42,732.	0.			RESEARCH-SUBCONTRACT
HORIZON RESEARCH INC. 326 CLOISTER COURT CHAPEL HILL, NC 27514	56-1550276	501(C)(3)	42,210.	0.			RESEARCH-SUBCONTRACT
OREGON STATE UNIVERSITY PO BOX 1086 OFFICE OF POST AWARD ADMINISTRATION - CORVALLIS, OR 97339	48-1278540	N/A	42,170.	0.			RESEARCH-SUBCONTRACT
WEILL MEDICAL COLLEGE 1300 YORK AVENUE, BOX 9 NEW YORK, NY 10065-4805	13-1623978	501(C)(3)	41,750.	0.			RESEARCH-SUBCONTRACT
MEDICAL UNIVERSITY OF SOUTH CAROLINA - 17 ASHLEY AVENUE - CHARLESTON, SC 29403	57-6007222	N/A	41,480.	0.			RESEARCH-SUBCONTRACT
CHILDREN'S HOSPITAL AND RESEARCH CENTER AT OAKLAND - 747 52ND STREET - OAKLAND, CA 94609	94-0382330	501(C)(3)	41,311.	0.			RESEARCH-SUBCONTRACT
MEDSTAR RESEARCH INSTITUTE 5565 STERRETT PLACE 5TH FLOOR COLUMBIA, MD 21044	52-6056274	501(C)(3)	40,906.	0.			RESEARCH-SUBCONTRACT

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STATE UNIVERSITY OF NEW YORK 450 CLARKSON AVE BROOKLYN, NY 11203	11-2418771	501(C)(3)	40,825.	0.			RESEARCH-SUBCONTRACT
YOUNGOV AMERICA INC. 285 HAMILTON AVENUE SUITE 200 PALO ALTO, CA 94301	98-0547173	N/A	40,600.	0.			RESEARCH-SUBCONTRACT
INSTITUTE FOR FAMILY HEALTH 19 W 21ST ST RM 504 NEW YORK, NY 10010	13-3273402	501(C)(3)	40,568.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF TEXAS MEDICAL BRANCH OFFICE OF SPONSORED PROGRAMS PO BOX 4786-750 - HOUSTON, TX 77210-4786	74-6000949	501(C)(3)	40,330.	0.			RESEARCH-SUBCONTRACT
CONSOL ENERGY INC. PO BOX 643355 RESEARCH & DEV. PITTSBURGH, PA 15264	51-0337383	N/A	40,037.	0.			RESEARCH-SUBCONTRACT
SURVEY SAMPLING INTERNATIONAL 6 RESEARCH DRIVE SHELTON, CT 06484	92-0188807	N/A	38,824.	0.			RESEARCH-SUBCONTRACT
MOUNT SINAI MEDICAL CENTER ONE GUSTAVE L LEVY PLACE NEW YORK, NY 10029	13-6271888	501(C)(3)	38,571.	0.			RESEARCH-SUBCONTRACT
GEORGIA STATE UNIVERSITY PO BOX 3999 ATLANTA, GA 30302	58-1845423	501(C)(3)	38,522.	0.			RESEARCH-SUBCONTRACT
BOSTON UNIVERSITY 881 COMMONWEALTH AVENUE 4TH FLOOR BOSTON, MA 02215	04-2103547	501(C)(3)	38,444.	0.			RESEARCH-SUBCONTRACT

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CHILDREN'S MEMORIAL HOSPITAL 2300 CHILDREN'S PLAZA CHICAGO, IL 60614	36-2170833	501(C)(3)	38,284.	0.			RESEARCH-SUBCONTRACT
GEORGE MASON UNIVERSITY 4400 UNIVERSITY DRIVE FAIRFAX, VA 22030	54-0836354	N/A	38,142.	0.			RESEARCH-SUBCONTRACT
CHILDRENS HOSPITAL NATIONAL MEDICAL CENTER - 111 MICHIGAN AVENUE - WASHINGTON, DC 20010	52-1640402	501(C)(3)	37,576.	0.			RESEARCH-SUBCONTRACT
MOGIME INC. PO BOX 10783 PITTSBURGH, PA 15203	27-0493699	N/A	37,000.	0.			RESEARCH-SUBCONTRACT
BAYSTATE MEDICAL CENTER 759 CHESTNUT ST SPRINGFIELD, MA 01199	04-2790311	501(C)(3)	35,508.	0.			RESEARCH-SUBCONTRACT
NORTHWESTERN HEALTH SCIENCES UNIVERSITY - 2501 WEST 84TH STREET - BLOOMINGTON, MN 55431-1599	41-0684657	501(C)(3)	34,144.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF NEW MEXICO 900 CAMINO DE SALUD NE ALBUQUERQUE, NM 87131	85-6000642	501(C)(3)	33,784.	0.			RESEARCH-SUBCONTRACT
HEALTH OFFICERS ASSOCIATION OF CALIFORNIA - 100 11TH STREET SUITE 323 - SACRAMENTO, CA 95814	23-7103860	N/A	33,333.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF OKLAHOMA 1700 ASP AVE ROOM B-1 NORMAN, OK 73072	73-6017987	501(C)(3)	33,044.	0.			RESEARCH-SUBCONTRACT

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ALBERT EINSTEIN MEDICAL CENTER 5501 OLD YORK ROAD PHILADELPHIA, PA 19141	23-1396794	501(C)(3)	32,472.	0.			RESEARCH-SUBCONTRACT
UPMC MERCY 1400 LOCUST STREET PITTSBURGH, PA 15219	25-0965429	501(C)(3)	32,384.	0.			RESEARCH-SUBCONTRACT
WEAVE INC. 1900 K STREET SACRAMENTO, CA 95811	94-2493158	501(C)(3)	32,199.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF TEXAS AT SAN ANTONIO ONE UTSA CIRCLE SAN ANTONIO, TX 78249	74-1717115	501(C)(3)	32,171.	0.			RESEARCH-SUBCONTRACT
COLD SPRING HARBOR LABORATORY ONE BUNGTOWN RD COLD SPRING HARBOR, NY 11724	11-2013303	501(C)(3)	31,698.	0.			RESEARCH-SUBCONTRACT
BRONX VETERANS MEDICAL RESEARCH FOUNDATION - 130 W KINGSBRIDGE RD - BRONX, NY 10468	13-3699250	501(C)(3)	31,301.	0.			RESEARCH-SUBCONTRACT
COLORADO STATE UNIVERSITY CASHIER'S OFFICE FORT COLLINS, CO 80523	84-6000545	501(C)(3)	30,363.	0.			RESEARCH-SUBCONTRACT
MARINE BIOLOGICAL LABORATORY P.O. BOX 3218 BOSTON, MA 02241-3218	04-2104690	501(C)(3)	30,255.	0.			RESEARCH-SUBCONTRACT
STEVENS INSTITUTE OF TECHNOLOGY CASTLE POINT ON HUDSON HOBOKEN, NJ 07030	22-1487354	501(C)(3)	29,120.	0.			RESEARCH-SUBCONTRACT

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ROCHESTER 910 GENESEE STREET ROCHESTER, NY 14611	16-0743209	501(C)(3)	27,958.	0.			RESEARCH-SUBCONTRACT
MARSHFIELD CLINICAL RESEARCH FOUNDATION - 1000 N OAK AVE - MARSHFIELD, WI 54449	39-0452970	501(C)(3)	27,415.	0.			RESEARCH-SUBCONTRACT
DATABANQUE 8150 PERRY HWY SUITE 102 PITTSBURGH, PA 15237	25-1670935	N/A	27,200.	0.			RESEARCH-SUBCONTRACT
LOUISIANA STATE UNIVERSITY 117D DAVID BOYD HALL BATON ROUGE, LA 70803	72-6000848	501(C)(3)	27,082.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF SOUTH CAROLINA P.O. BOX 751475 CHARLOTTE, NC 28275-1475	57-6001153	N/A	26,712.	0.			RESEARCH-SUBCONTRACT
MONTEFIORE MEDICAL CENTER 111 EAST 210TH ST BRONX, NY 10467	13-1740114	501(C)(3)	26,556.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - UCSF BOX 0248 - SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	26,367.	0.			RESEARCH-SUBCONTRACT
CLEVELAND CLINIC 3000 W CYPRESS CREEK RD FORT LAUDERDALE, FL 33309	65-0003177	501(C)(3)	25,694.	0.			RESEARCH-SUBCONTRACT
SALK INSTITUTE 10010 N TORREY PINES ROAD LA JOLLA, CA 92037-1099	95-2160097	501(C)(3)	25,564.	0.			RESEARCH-SUBCONTRACT

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ASSOC FOR PROFESSIONALS IN INFECTION CONTROL & EPIDEMIOLOGY INC. - 1275 K ST NW SUITE 1000 - WASHINGTON, DC 20005	23-7256856	N/A	25,500.	0.			RESEARCH-SUBCONTRACT
IUP RESEARCH INSTITUTE 660 SOUTH 11TH STREET MEMORIAL FIELD HOUSE - INDIANA, PA 15705-1077	25-1470695	501(C)(3)	25,245.	0.			RESEARCH-SUBCONTRACT
FLORIDA INSTITUTE FOR HUMAN & MACHINE COGNITION - 40 S ALCANIZ ST - PENSACOLA, FL 32502	20-0760849	501(C)(3)	24,925.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER - PO BOX 4930 - HOUSTON, TX 77210-4390	74-6001118	501(C)(3)	24,910.	0.			RESEARCH-SUBCONTRACT
NORWALK HOSPITAL 24 STEVENS ST ACCOUNTING DEPT NORWALK, CT 06856	06-6068853	501(C)(3)	24,362.	0.			RESEARCH-SUBCONTRACT
WAKE FOREST UNIVERSITY HEALTH SERVICES - MEDICAL CENTER BLVD - WINSTON-SALEM, NC 27157	22-3849199	501(C)(3)	24,308.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF LOUISVILLE- RESEARCH FOUNDATION - 520 STEVENSON HALL - LOUISVILLE, KY 40292	61-1029626	501(C)(3)	23,568.	0.			RESEARCH-SUBCONTRACT
AARON DIAMOND AIDS RESEARCH CENTER 2025 WINDSOR DR OAK BROOK, IL 60523	36-2169147	501(C)(3)	23,071.	0.			RESEARCH-SUBCONTRACT
INTERMOUNTAIN MEDICAL CENTER 5121 COTTONWOOD STREET 6TH FLOOR MURRAY, UT 84157	94-2853320	501(C)(3)	22,862.	0.			RESEARCH-SUBCONTRACT

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ZAP SOLUTIONS 700 RIVER AVENUE SUITE 321 PITTSBURGH, PA 15212	25-1841943	N/A	22,500.	0.			RESEARCH-SUBCONTRACT
MIRIAM HOSPITAL 164 SUMMIT AVENUE PROVIDENCE, RI 02906	05-0258905	501(C)(3)	21,348.	0.			RESEARCH-SUBCONTRACT
URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD STREET PITTSBURGH, PA 15222	25-0965592	501(C)(3)	21,239.	0.			RESEARCH-SUBCONTRACT
METHODIST RESEARCH INSTITUTE 950 N MERIDIAN ST STE 800 INDIANAPOLIS, IN 46204	35-2023710	501(C)(3)	21,229.	0.			RESEARCH-SUBCONTRACT
EMMES FOUNDATION INC. 11325 SEVEN LOCKS ROAD SUITE 214 POTOMAC, MD 20854	26-1622663	501(C)(3)	21,054.	0.			RESEARCH-SUBCONTRACT
GRIFFIN HOSPITAL 130 DIVISION ST DERBY, CT 06418	06-0647014	501(C)(3)	20,896.	0.			RESEARCH-SUBCONTRACT
HEALTH SCIENCES LIBRARY ASSOCIATION OF NEW JERSEY - PO BOX 7908 C/O HEALTH CARE RESEARCH - PRINCETON, NJ 08543	22-2405226	501(C)(3)	20,629.	0.			RESEARCH-SUBCONTRACT
MONTGOMERY COUNTY 1430 DEKALB STREET NORRISTOWN, PA 19404	23-6003126	N/A	20,404.	0.			RESEARCH-SUBCONTRACT
ROCHESTER REGIONAL LIBRARY COUNCIL 390 PACKETT'S LANDING FAIRPORT, NY 14450	16-0926628	501(C)(3)	20,000.	0.			RESEARCH-SUBCONTRACT

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GEISINGER CLINIC N ACADEMY AVE DANVILLE, PA 17822	23-6291113	501(C)(3)	17,933.	0.			RESEARCH-SUBCONTRACT
MAGEE-WOMENS HOSPITAL OF UPMC 300 HALKET STREET PITTSBURGH, PA 15213	25-0965420	501(C)(3)	17,802.	0.			RESEARCH-SUBCONTRACT
BECK RADIOLOGICAL INNOVATIONS INC 922 RAMBLING DR CATONSVILLE, MD 21228	45-2276816	N/A	17,432.	0.			RESEARCH-SUBCONTRACT
VASSAR COLLEGE 124 RAYMOND AVENUE BOX 12 POUGHKEEPSIE, NY 12604	14-1338587	501(C)(3)	17,171.	0.			RESEARCH-SUBCONTRACT
KAISER FOUNDATION RESEARCH INSTITUTE - 2000 BROADWAY - OAKLAND, CA 94612	94-1105628	N/A	16,856.	0.			RESEARCH-SUBCONTRACT
HEALTH RESEARCH ASSOCIATION INC 1640 MARENGO ST 7TH FL LOS ANGELES, CA 90033	95-1683862	501(C)(3)	16,855.	0.			RESEARCH-SUBCONTRACT
YORK COUNTY DEPARTMENT OF HUMAN SERVICES - 100 W MARKET STREET - YORK, PA 17401	23-6003050	N/A	16,638.	0.			RESEARCH-SUBCONTRACT
MARICOPA INTEGRATED HEALTH SYSTEMS 2619 E PIERCE STREET 1ST FLOOR PHOENIX, AZ 85008	86-0830701	501(C)(3)	16,330.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF FLORIDA PO BOX 115500 GAINESVILLE, FL 32611	59-6002052	N/A	16,318.	0.			RESEARCH-SUBCONTRACT

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WILLIAMSPORT HOSPITAL AND MEDICAL CENTER - 1001 GRAMPIAN BOULEVARD - WILLIAMSPORT, PA 17701	24-0795508	501(C)(3)	16,198.	0.			RESEARCH-SUBCONTRACT
ROSE-HULMAN INSTITUTE OF TECHNOLOGY - 500 WABASH AVENUE BOX 21 - TERRE HAUTE, IN 47803-3999	35-0868149	501(C)(3)	16,171.	0.			RESEARCH-SUBCONTRACT
TUSKEGEE UNIVERSITY KRESGE CENTER 112 TUSKEGEE INSTITUTE, AL 36088	63-0288878	501(C)(3)	15,828.	0.			RESEARCH-SUBCONTRACT
CONEMAUGH MEMORIAL HOSPITAL 1086 FRANKLIN STREET JOHNSTOWN, PA 15905	25-0965307	501(C)(3)	15,648.	0.			RESEARCH-SUBCONTRACT
MERIDIAN SERVICES INC. 527 MERIDIAN ROAD YOUNGSTOWN, OH 44509	34-1138485	501(C)(3)	14,733.	0.			RESEARCH-SUBCONTRACT
CHILDRENS HOSPITAL NEW ORLEANS 200 HENRY CLAY AVE NEW ORLEANS, LA 70118	72-0467503	501(C)(3)	14,667.	0.			RESEARCH-SUBCONTRACT
SOUTHERN METHODIST UNIVERSITY P.O. BOX 750259 DALLAS, TX 75275-0259	75-0800689	501(C)(3)	14,528.	0.			RESEARCH-SUBCONTRACT
AT SCIENCES LLC 160 N CRAIG ST SUITE 117 PITTSBURGH, PA 15213	11-3655805	N/A	14,512.	0.			RESEARCH-SUBCONTRACT
OPEN MINDS LLC 390 ALTERMOOR DRIVE NATRONA HEIGHTS, PA 15065	94-3445558	N/A	14,385.	0.			RESEARCH-SUBCONTRACT

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SOUTHWEST BEHAVIORAL HEALTHCARE INC - 3131 SANGUINET STREET - FORT WORTH, TX 76107	75-2625595	501(C)(3)	14,240.	0.			RESEARCH-SUBCONTRACT
NATIONAL JEWISH HEALTH 1400 JACKSON STREET DENVER, CO 80206	74-2044647	501(C)(3)	14,218.	0.			RESEARCH-SUBCONTRACT
CHILDRENS NATIONAL MEDICAL CENTER 111 MICHIGAN AVE NW WASHINGTON, DC 20010-2970	52-1640403	501(C)(3)	14,128.	0.			RESEARCH-SUBCONTRACT
HOUSE OF THE CROSSROADS 2012 CENTRE AVENUE PITTSBURGH, PA 15230	25-1206373	501(C)(3)	13,744.	0.			RESEARCH-SUBCONTRACT
HUGO MOSER RESEARCH INSTITUTE 707 N BROADWAY BALTIMORE, MD 21205	52-1524967	501(C)(3)	12,929.	0.			RESEARCH-SUBCONTRACT
JAMES MADISON UNIVERSITY MSC 5715 HARRISONBURG, VA 22807	54-6001756	501(C)(3)	12,805.	0.			RESEARCH-SUBCONTRACT
DEPAUL UNIVERSITY 1 E JACKSON BLVD CHICAGO, IL 60604	36-2167048	501(C)(3)	12,792.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - 104 AIRPORT DRIVE - CHAPEL HILL, NC 27599	31-4379427	501(C)(3)	12,668.	0.			RESEARCH-SUBCONTRACT
CHATHAM UNIVERSITY WOODLAND ROAD PITTSBURGH, PA 15232	25-0717890	501(C)(3)	12,015.	0.			RESEARCH-SUBCONTRACT

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ALBANY MEDICAL COLLEGE 43 NEW SCOTLAND AVENUE ALBANY, NY 12208-3412	14-1338310	501(C)(3)	11,543.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF CALIFORNIA DAVIS ONE SHIELDS AVE DAVIS, CA 95616	94-6036494	501(C)(3)	11,431.	0.			RESEARCH-SUBCONTRACT
ATLANTA RESEARCH & EDUCATION FOUNDATION - 1670 CLAIRMONT RD NO. 151F - DECATUR, GA 30033	58-1857346	501(C)(3)	11,218.	0.			RESEARCH-SUBCONTRACT
DEKA INTEGRATED SOLUTIONS 340 COMMERCIAL STREET MANCHESTER, NH 03101	20-5085384	N/A	11,043.	0.			RESEARCH-SUBCONTRACT
PLANETARY SCIENCE INSTITUTE 1700 E FORT LOWELL ROAD SUITE 106 TUCSON, AZ 85719-2395	33-1075263	501(C)(3)	11,021.	0.			RESEARCH-SUBCONTRACT
PUGET SOUND BLOOD CENTER 921 TERRY AVENUE SEATTLE, WA 98104-1256	91-1019655	501(C)(3)	10,857.	0.			RESEARCH-SUBCONTRACT
AIDS COALITION OF SOUTHWESTERN PA 907 WEST STREET FIFTH FLOOR PITTSBURGH, PA 15221	25-1701085	501(C)(3)	10,000.	0.			RESEARCH-SUBCONTRACT
CAPITAL DISTRICT LIBRARY COUNCIL 28 ESSEX ST ALBANY, NY 12206	14-1501684	501(C)(3)	10,000.	0.			RESEARCH-SUBCONTRACT
CORNELL COOPERATIVE EXTENSION 64 FERNDAL-LOOMIS RD LIBERTY, NY 12754	16-6072895	501(C)(3)	10,000.	0.			RESEARCH-SUBCONTRACT

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PA BEHAVIORAL HEALTH & AGING COALITION - 525 SOUTH 29TH STREET - HARRISBURG, PA 17104	61-1511344	501(C)(3)	10,000.	0.			RESEARCH-SUBCONTRACT
UNITED METHODIST CHURCH UNION P.O. BOX 100086 PITTSBURGH, PA 15233	25-0965431	N/A	10,000.	0.			RESEARCH-SUBCONTRACT
YESHIVA UNIVERSITY 1300 MORRIS PARK AVENUE BRONX, NY 10461	13-1624225	501(C)(3)	10,000.	0.			RESEARCH-SUBCONTRACT
EASTERN UNIVERSITY 1300 EAGLE ROAD ST. DAVIDS, PA 19087	23-1409675	501(C)(3)	9,999.	0.			RESEARCH-SUBCONTRACT
NEW YORK MEDICAL COLLEGE 420 SUNSHINE COTTAGE ROAD VALHALLA, NY 10595	13-1099420	501(C)(3)	9,971.	0.			RESEARCH-SUBCONTRACT
WASHINGTON COUNTY HEALTH PARTNERS 190 N MAIN STREET SUITE 208 WASHINGTON, PA 15301	25-1872584	501(C)(3)	9,896.	0.			RESEARCH-SUBCONTRACT
LUTHERAN MEDICAL CENTER 150 55TH STREET BROOKLYN, NY 11220	11-1839567	501(C)(3)	9,730.	0.			RESEARCH-SUBCONTRACT
SLIPPERY ROCK UNIVERSITY ROOM 002A OLD MAIN SLIPPERY ROCK, PA 16057	25-1513539	501(C)(3)	9,661.	0.			RESEARCH-SUBCONTRACT
TOURO COLLEGE 230 WEST 125TH STREET SUITE 316 NEW YORK, NY 10027	13-2676570	501(C)(3)	9,612.	0.			RESEARCH-SUBCONTRACT

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CENTRAL NEW YORK LIBRARY RESOURCES COUNCIL - 6493 RIDINGS ROAD - SYRACUSE, NY 13206	16-0957462	501(C)(3)	9,573.	0.			RESEARCH-SUBCONTRACT
NEW JERSEY STATE LIBRARY 185 WEST STATE STREET P.O. BOX 520 TRENTON, NJ 08625	22-2942727	501(C)(3)	9,000.	0.			RESEARCH-SUBCONTRACT
ERIE COUNTY 140 WEST NINTH STREET ERIE, PA 16505	25-6001027	N/A	8,912.	0.			RESEARCH-SUBCONTRACT
YORK CITY BUREAU OF HEALTH 227 W. MARKET STREET YORK, PA 17401	23-6001908	N/A	8,873.	0.			RESEARCH-SUBCONTRACT
PSYCHOLOGY SOFTWARE TOOLS INC. 311 23RD STREET EXTENSION STE 200 PITTSBURGH, PA 15215	25-1551170	N/A	8,700.	0.			RESEARCH-SUBCONTRACT
SAMARITAN MEDICAL CENTER 830 WASHINGTON ST WATERTOWN, NY 13601	15-0533577	501(C)(3)	8,652.	0.			RESEARCH-SUBCONTRACT
COPELAND CENTER FOR WELLNESS AND RECOVERY INC. - P.O. BOX 6471 - BRATTLEBORO, VT 05302	20-3409257	501(C)(3)	8,250.	0.			RESEARCH-SUBCONTRACT
INSTITUTE FOR CLINICAL RESEARCH INC. - PO BOX 29545 - WASHINGTON, DC 20017	52-1336656	501(C)(3)	8,239.	0.			RESEARCH-SUBCONTRACT
VISITOR STUDIES ASSOCIATION 2885 SANFORD AVENUE SW #18100 GRANDVILLE, MI 49418	58-2015580	501(C)(3)	8,143.	0.			RESEARCH-SUBCONTRACT

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KOESTER PERFORMANCE RESEARCH 2408 ANTIETAM DR. ANN ARBOR, MI 48105	10-1362391	N/A	7,500.	0.			RESEARCH-SUBCONTRACT
CROUSE HEALTH FOUNDATION 736 IRVING AVENUE SYRACUSE, NY 13210	16-1035427	501(C)(3)	7,485.	0.			RESEARCH-SUBCONTRACT
BEEBE MEDICAL CENTER 424 SAVANNAH ROAD LEWES, DE 19958	51-0067938	501(C)(3)	7,099.	0.			RESEARCH-SUBCONTRACT
MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK ROAD MILWAUKEE, WI 53226	39-0806261	501(C)(3)	7,039.	0.			RESEARCH-SUBCONTRACT
TREASURER OF VIRGINIA TECH 301 BURRUSS HALL MAIL CODE 0244 BLACKSBURG, VA 24061	54-6001805	N/A	6,895.	0.			RESEARCH-SUBCONTRACT
MISSISSIPPI STATE UNIVERSITY PO DRAWER 5227 MISSISSIPPI ST, MS 39762	64-6000814	501(C)(3)	6,862.	0.			RESEARCH-SUBCONTRACT
LOGAN COLLEGE OF CHIROPRACTIC 1851 SCHOETTLE ROAD CHESTERFIELD, MO 63017	43-0746185	501(C)(3)	6,416.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF ARIZONA PO BOX 3607 TUCSON, AZ 85722-3607	74-2652689	501(C)(3)	6,263.	0.			RESEARCH-SUBCONTRACT
MIND RESEARCH NETWORK 1101 YALE BOULEVARD N E ALBUQUERQUE, NM 87106	85-0457562	501(C)(3)	5,868.	0.			RESEARCH-SUBCONTRACT

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IHC HEALTH SERVICES INC. 36 S STATE ST STE 1000 SALT LAKE CITY, UT 84111	94-2854057	501(C)(3)	5,699.	0.			RESEARCH-SUBCONTRACT
UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER - 1100 N LINDSAY SCB ROOM 228 - OKLAHOMA CITY, OK 73190-2010	73-6017987	N/A	5,142.	0.			RESEARCH-SUBCONTRACT
NEW YORK INSTITUTE OF TECHNOLOGY NORTHERN BOULEVARD CONTROLLERS OFFICE- GRANTS - OLD WESTBURY, NY 11568-8000	11-1788788	501(C)(3)	5,129.	0.			RESEARCH-SUBCONTRACT
MATTRESS FACTORY 500 SAMPSONIA WAY PITTSBURGH, PA 15212	25-1338941	501(C)(3)	5,000.	0.			RESEARCH-SUBCONTRACT
ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3)	76,637.	0.			RESEARCH-SUBCONTRACT
NEGRO EDUCATIONAL EMERGENCY DRIVE WARNER CENTER 332 FIFTH AVENUE PITTSBURGH, PA 15222	25-6070821	501(C)(3)	167,750.	0.			SPONSORSHIP
PITTSBURGH AREA MIDDLE EAST INSTITUTE INC. - 5 VON LENT PLACE - PITTSBURGH, PA 15232	26-3562819	501(C)(3)	50,000.	0.			SPONSORSHIP
WESTERN PENNSYLVANIA CONSERVANCY 800 WATERFRONT DRIVE PITTSBURGH, PA 15222	25-1053485	501(C)(3)	35,000.	0.			SPONSORSHIP
CIVIC LIGHT OPERA ASSOCIATION OF PITTSBURGH - 719 LIBERTY AVENUE - PITTSBURGH, PA 15222	25-6000890	501(C)(3)	32,500.	0.			SPONSORSHIP

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AMERICAN HEART ASSOCIATION 7777 PENN CENTER BOULEVARD PITTSBURGH, PA 15235	13-5613797	501(C)(3)	31,200.	0.			SPONSORSHIP
ELTON JOHN AIDS FOUNDATION INC. 584 BROADWAY RM 906 NEW YORK, NY 10012	58-2033460	501(C)(3)	25,000.	0.			SPONSORSHIP
WORLD AFFAIRS COUNCIL 2640 BNY MELLON CTR 500 GRANT ST PITTSBURGH, PA 15219	25-1064871	501(C)(3)	24,000.	0.			SPONSORSHIP
CATHOLIC YOUTH ASSOC OF PITTSBURGH 286 MAIN STREET PITTSBURGH, PA 15201	25-0984596	501(C)(3)	17,250.	0.			SPONSORSHIP
HILLEL JEWISH UNIVERSITY CENTER 4607 FORBES AVENUE PITTSBURGH, PA 15213	25-6065236	501(C)(3)	15,000.	0.			SPONSORSHIP
SENATOR JOHN HEINZ PITTSBURGH REGIONAL HISTORY CENTER - 1212 SMALLMAN STREET - PITTSBURGH, PA 15222	25-0965391	501(C)(3)	15,000.	0.			SPONSORSHIP
AMERICAN NATIONAL RED CROSS 225 BOULEVARD OF THE ALLIES PITTSBURGH, PA 15222	53-0196605	501(C)(3)	9,050.	0.			SPONSORSHIP
BIG BROTHERS BIG SISTERS OF GREATER PITTSBURGH INC. - 5989 PENN CIRCLE SOUTH - PITTSBURGH, PA 15206	25-6074707	501(C)(3)	8,900.	0.			SPONSORSHIP
PITTSBURGH OPERA INC. 2425 LIBERTY AVENUE PITTSBURGH, PA 15222	25-1073139	501(C)(3)	8,500.	0.			SPONSORSHIP

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PITTSBURGH SYMPHONY INC. 600 PENN AVENUE PITTSBURGH, PA 15222	25-0986052	501(C)(3)	7,816.	0.			SPONSORSHIP
AMERICAN IRELAND FUND 211 CONGRESS STREET 10TH FLOOR BOSTON, MA 02110	25-1306992	501(C)(3)	7,500.	0.			SPONSORSHIP
JEWISH COMMUNITY CENTER OF GREATER PITTSBURGH - 5738 FORBES AVENUE BOX 81980 - PITTSBURGH, PA 15217	25-1094514	501(C)(3)	7,500.	0.			SPONSORSHIP
PG CHARITIES 234 BLVD OF THE ALLIES PITTSBURGH, PA 15222	23-7216540	501(C)(3)	7,500.	0.			SPONSORSHIP
COMMUNITY HUMAN SERVICES CORP. 374 LAWN STREET PITTSBURGH, PA 15213	25-1219610	501(C)(3)	6,500.	0.			SPONSORSHIP
THREE RIVERS YOUTH 6117 BROAD STREET PITTSBURGH, PA 15206	25-1206924	501(C)(3)	6,500.	0.			SPONSORSHIP
CARNEGIE MUSEUMS OF PITTSBURGH 4400 FORBES AVENUE PITTSBURGH, PA 15213	25-0965280	501(C)(3)	6,000.	0.			SPONSORSHIP
GIRL SCOUTS OF WESTERN PA 30 ISABELLA STREET SUITE 107 PITTSBURGH, PA 15212	25-1126094	501(C)(3)	6,000.	0.			SPONSORSHIP
NEW PITTSBURGH COURIER 315 EAST CARSON STREET PITTSBURGH, PA 15219	25-1181398	N/A	6,000.	0.			SPONSORSHIP

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD STREET PITTSBURGH, PA 15222	25-0965592	501(C)(3)	5,500.	0.			SPONSORSHIP
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT - 425 SIXTH AVENUE - PITTSBURGH, PA 15219	25-0965213	501(C)(3)	5,000.	0.			SPONSORSHIP
FAMILY HOUSE 233 MCKEE PLACE PITTSBURGH, PA 15213	25-1519959	501(C)(3)	5,000.	0.			SPONSORSHIP
NAACP- PITTSBURGH BRANCH 2203 WYLIE AVENUE PITTSBURGH, PA 15219	25-6086867	501(C)(3)	5,000.	0.			SPONSORSHIP
PITTSBURGH PARKS CONSERVANCY 2000 TECHNOLOGY DRIVE NO 300 PITTSBURGH, PA 15219	23-2882145	501(C)(3)	5,000.	0.			SPONSORSHIP
PITTSBURGH VINTAGE GRAND PRIX ASSOCIATION - 1008 MANOR COMPLEX 564 FORBES AVENUE - PITTSBURGH, PA 15219	25-1427238	501(C)(3)	5,000.	0.			SPONSORSHIP
RIVER CITY BRASS BAND 500 GRANT STREET SUITE 2720 PITTSBURGH, PA 15219	25-1401329	501(C)(3)	5,000.	0.			SPONSORSHIP
UNITED WAY OF ALLEGHENY COUNTY 1250 PENN AVENUE PO BOX 735 PITTSBURGH, PA 15230	25-1043578	501(C)(3)	5,000.	0.			SPONSORSHIP
VETERANS LEADERSHIP PROGRAM OF WESTERN PENNSYLVANIA INC - 2417 EAST CARSON STREET - PITTSBURGH, PA 15203	25-1434643	501(C)(3)	5,000.	0.			SPONSORSHIP

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMENS AND GIRLS FOUNDATION OF SOUTHWEST PENNSYLVANIA - 100 WEST STATION SQUARE DRIVE - PITTSBURGH, PA 15219	74-3055311	501(C)(3)	5,000.	0.			SPONSORSHIP
YWCA 305 WOOD ST PITTSBURGH, PA 15222-1982	25-0965639	501(C)(3)	5,000.	0.			SPONSORSHIP

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INSTITUTIONAL AID TO STUDENTS	14726	162,653,596.	0.		
TUITION REMISSION	2333	21,117,017.	0.		
TUITION REMISSION- STUDENTS ATTENDING OTHER UNIVERSITIES	478	7,573,085.	0.		

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2: MONITORING PROCEDURES PART II: GRANTS AND

ASSISTANCE TO GOVERNMENTS AND ORGANIZATIONS IN THE UNITED STATES:

THE UNIVERSITY HAS ESTABLISHED POLICIES AND PROCEDURES FOR FINANCIAL

AFFAIRS. RESPONSIBILITY CENTER HEADS WITHIN THE UNIVERSITY ARE RESPONSIBLE

FOR MONITORING THE GENERAL USE OF UNIVERSITY FUNDS FOR APPROVED USES.

DISBURSEMENT REQUESTS FOR GRANT FUNDS MUST BE APPROVED BY THE FINANCIAL

ACCOUNTING INFORMATION SYSTEM (FAIS) ACCOUNT ADMINISTRATOR OR THE HEAD OF

THE RESPONSIBILITY CENTER. WHEN THE REQUESTOR IS ALSO THE FAIS ACCOUNT

**Part IV Supplemental Information**

ADMINISTRATOR OR THE HEAD OF THE RESPONSIBILITY CENTER, THE GRANT FUNDING

REQUEST MUST BE SIGNED BY THE NEXT HIGHER LEVEL ADMINISTRATOR. THE

UNIVERSITY'S DISBURSEMENT PROCESS IDENTIFIES AND RECORDS PAYMENTS TO BOTH

U.S. AND FOREIGN INDIVIDUALS/ENTITIES. THE UNIVERSITY EMPLOYS APPROPRIATE

MEASURES TO REDUCE THE RISK THAT ANY GRANT FUNDING PROVIDED IS NOT USED FOR

NON-CHARITABLE PURPOSES OR EXPLOITATION BY TERRORIST ORGANIZATIONS,

INCLUDING, BUT NOT LIMITED TO, UNIVERSITY ATTENDANCE AND/OR PARTICIPATION

AT SPONSORED EVENTS AND ONGOING REVIEWS OF THE SPECIALLY DESIGNATED

NATIONALS LIST PUBLISHED BY THE US DEPARTMENT OF THE TREASURY.

FOR RESEARCH SUBCONTRACTS, THE INITIAL DETERMINATION OF ELIGIBILITY AND

APPROPRIATENESS OF THE ENTITY LIES JOINTLY BETWEEN THE PRINCIPAL

INVESTIGATOR (PI)/DEPARTMENT AND THE OFFICE OF RESEARCH. THE PI/DEPARTMENT

IDENTIFIES THE ENTITY USUALLY BASED UPON THE UNIQUE NEEDS OF THE PI

EVIDENCED IN THE SCOPE OF WORK. DOCUMENTATION IS OBTAINED FROM THE ENTITY

WHICH IS REVIEWED. UPON SUBMISSION, THE OFFICE OF RESEARCH LOOKS FOR THIS

DOCUMENTATION SO THAT IT MEETS SPONSOR AND UNIVERSITY REQUIREMENTS. IF AND

WHEN THE PROJECT IS FUNDED, THE DEPARTMENT INITIATES A SUBCONTRACT REQUEST.

SCHEDULE I, PART I, LINE 2: MONITORING PROCEDURES PART III GRANTS AND OTHER

ASSISTANCE TO INDIVIDUALS IN THE UNITED STATES:

THE INSTITUTION DOES MAINTAIN RECORDS TO SUBSTANTIATE THE AMOUNT OF GRANTS

OR ASSISTANCE. THE RECORDS, ELIGIBILITY AND SELECTION CRITERIA ARE

MAINTAINED BY EITHER THE OFFICE OF ADMISSIONS AND FINANCIAL AID, THE

STUDENTS' SCHOOL DEPARTMENT, THE BENEFITS SECTION OF HUMAN RESOURCES, OR

THE FACULTY RECORDS OFFICE.



**Part IV Supplemental Information**

GRANT FUNDS THAT ARE RESTRICTED IN THEIR USE AND ARE NOT REFUNDABLE IN CASH

TO THE STUDENTS ARE MONITORED THROUGH THE UNIVERSITY'S STUDENT SYSTEM.

GRANTS THAT ARE NOT RESTRICTED IN THEIR USE AND ARE REFUNDABLE TO THE

STUDENTS ARE NOT MONITORED.

SCHEDULE I, PART III, COLUMN B:

THE NUMBER OF RECIPIENTS REFLECTS THE ACTUAL NUMBER OF STUDENTS AND

EMPLOYEES WHO RECEIVED THE ASSISTANCE.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2012**

Open to Public Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p><b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....</p>	X									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....</p>	X									
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p><b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p><b>a</b> Receive a severance payment or change-of-control payment? .....</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>										
		X								
		X								
		X								
<p><b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b></p> <p><b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p><b>a</b> The organization? .....</p> <p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>										
		X								
		X								
<p><b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization? .....</p> <p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>										
		X								
		X								
<p><b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....</p>		X								
<p><b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....</p>		X								
<p><b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....</p>										

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

Schedule J (Form 990) 2012

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MARK A. NORDENBERG CHANCELLOR / CEO	(i)	565,652.	0.	27,184.	68,490.	68,857.	730,183.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PATRICIA E. BEESON PROVOST/SR VICE CHANCELLOR	(i)	354,259.	0.	20,975.	42,852.	11,690.	429,776.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JEROME COCHRAN GENERAL COUNSEL/EXEC VICE CHANCELLOR	(i)	480,736.	0.	26,366.	70,186.	12,903.	590,191.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) B. JEAN FERKETISH SEC BRD OF TRST	(i)	206,558.	0.	8,691.	30,748.	14,061.	260,058.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ARTHUR S. LEVINE SR VC, HEALTH SCI/DEAN	(i)	771,085.	0.	71,684.	30,000.	13,304.	886,073.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JAMES V. MAHER, JR. FORMER PROVOST/SR VICE CHANCELLOR	(i)	280,666.	0.	2,242.	0.	14,942.	297,850.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) AMY KRUEGER MARSH TREASURER	(i)	372,378.	0.	14,225.	36,251.	14,777.	437,631.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ARTHUR G. RAMICONE CFO	(i)	346,198.	0.	25,140.	50,815.	14,061.	436,214.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JAMES P. DIXON II HEAD BASKETBALL COACH	(i)	1,293,040.	670,388.	33,538.	130,001.	14,555.	2,141,522.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) PAUL CHRYST HEAD FOOTBALL COACH	(i)	1,020,881.	500,000.	22,549.	23,252.	12,075.	1,578,757.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) NANCY E. DAVIDSON DIRECTOR, UPCI	(i)	650,259.	0.	600.	26,250.	5,205.	682,314.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) STEVEN C. PEDERSON ATHLETIC DIRECTOR	(i)	529,798.	41,667.	11,648.	36,251.	14,172.	633,536.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) AGNUS BERENATO FORMER WOMEN'S BASKETBALL COACH	(i)	449,398.	0.	18,516.	30,003.	14,875.	512,792.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

Complete this part to 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.

PART I, LINE 1A: FIRST-CLASS OR CHARTER TRAVEL:

THE UNIVERSITY USES CHARTER AIR TRAVEL PRIMARILY TO TRANSPORT THE FOOTBALL

TEAM AND THE MEN'S AND WOMEN'S BASKETBALL TEAMS TO AWAY GAME VENUES.

OCCASIONALLY, DUE TO TIME CONSTRAINTS, WEATHER CONCERNS, OR CLOSELY

SEQUENCED COMMITMENTS, SENIOR MANAGEMENT MAY USE CHARTER AIR TRAVEL TO MEET

PROFESSIONAL RESPONSIBILITIES.

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS:

CERTAIN SENIOR OFFICERS AT THE UNIVERSITY ARE ELIGIBLE FOR A HEALTH CARE

PACKAGE UP TO A MAXIMUM AMOUNT OF \$5,000 PER YEAR. THE REIMBURSEMENT IS

"GROSSED-UP" FOR INCOME TAX PURPOSES.

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE:

AS A CONDITION OF EMPLOYMENT, THE CHANCELLOR IS REQUIRED TO LIVE IN A

RESIDENCE PROVIDED BY THE UNIVERSITY TO MEET WITH AND ENTERTAIN DONORS,

**Part III Supplemental Information**

Complete this part to 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.

PROSPECTIVE DONORS, INSTITUTIONAL SUPPORTERS, AND BUSINESS ASSOCIATES.

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES:

BECAUSE CERTAIN OFFICERS OF THE UNIVERSITY ARE REQUIRED TO ENTERTAIN

DONORS, PROSPECTIVE DONORS, INSTITUTIONAL SUPPORTERS, AND BUSINESS

ASSOCIATES, CLUB MEMBERSHIPS ARE PROVIDED.

PERSONAL SERVICES:

FINANCIAL CONSULTING SERVICES UP TO A MAXIMUM AMOUNT OF \$5,000 PER YEAR ARE

PROVIDED TO CERTAIN SENIOR OFFICERS OF THE UNIVERSITY.

**Supplemental Information on Tax-Exempt Bonds**

ENTITY

1

OMB No. 1545-0047

**2012**  
Open to Public  
Inspection

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

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> SEE SCHEDULE K, PART VI	25-0965591	91335VHP4	03/31/09	452,532,151.	SEE SCHEDULE K, PART VI		X		X		X
<b>B</b> SEE SCHEDULE K, PART VI	25-0965591	91335VFL5	12/17/08	306,735,020.	SEE SCHEDULE K, PART VI		X		X		X
<b>C</b> SEE SCHEDULE K, PART VI	25-0965591	91335VPU5	01/27/09	44,309,750.	SEE SCHEDULE K, PART VI		X		X		X
<b>D</b> SEE SCHEDULE K, PART VI	25-0965591	91335VDH6	07/10/09	401,451,947.	SEE SCHEDULE K, PART VI		X		X		X

**Part II Proceeds**

	A		B		C		D	
<b>1</b> Amount of bonds retired								
<b>2</b> Amount of bonds legally defeased								
<b>3</b> Total proceeds of issue	453,185,799.		306,735,927.		44,316,041.		401,460,622.	
<b>4</b> Gross proceeds in reserve funds								
<b>5</b> Capitalized interest from proceeds								
<b>6</b> Proceeds in refunding escrows								
<b>7</b> Issuance costs from proceeds	2,375,498.		744,124.		221,250.		1,004,898.	
<b>8</b> Credit enhancement from proceeds								
<b>9</b> Working capital expenditures from proceeds								
<b>10</b> Capital expenditures from proceeds	300,459,691.		1,792,598.		4,111,766.		1,234,685.	
<b>11</b> Other spent proceeds	150,379,000.		304,200,000.		40,000,000.		400,447,049.	
<b>12</b> Other unspent proceeds								
<b>13</b> Year of substantial completion	2013		2008		2008		2009	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>14</b> Were the bonds issued as part of a current refunding issue?	X		X		X		X	
<b>15</b> Were the bonds issued as part of an advance refunding issue?		X		X		X		X
<b>16</b> Has the final allocation of proceeds been made?	X		X		X		X	
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

**Part III Private Business Use**

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

**Supplemental Information on Tax-Exempt Bonds**

ENTITY

2

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

OMB No. 1545-0047

**2012**  
**Open to Public Inspection**

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> SEE SCHEDULE K, PART VI	25-0965591	91335VJK3	06/12/12	122,262,000.	SEE SCHEDULE K, PART VI		X		X		X
<b>B</b> SEE SCHEDULE K, PART VI	25-0965591	91335VJL1	06/18/13	122,318,400.	SEE SCHEDULE K, PART VI		X		X		X
<b>C</b>											
<b>D</b>											

**Part II Proceeds**

	A		B		C		D	
<b>1</b> Amount of bonds retired								
<b>2</b> Amount of bonds legally defeased								
<b>3</b> Total proceeds of issue	116,025,249.		122,071,019.					
<b>4</b> Gross proceeds in reserve funds								
<b>5</b> Capitalized interest from proceeds								
<b>6</b> Proceeds in refunding escrows								
<b>7</b> Issuance costs from proceeds	222,883.		247,583.					
<b>8</b> Credit enhancement from proceeds								
<b>9</b> Working capital expenditures from proceeds								
<b>10</b> Capital expenditures from proceeds	32,034,409.		31,671,636.					
<b>11</b> Other spent proceeds	90,000,000.		70,000,000.					
<b>12</b> Other unspent proceeds			20,402,729.					
<b>13</b> Year of substantial completion	2012		2013					
	Yes	No	Yes	No	Yes	No	Yes	No
<b>14</b> Were the bonds issued as part of a current refunding issue?	X		X					
<b>15</b> Were the bonds issued as part of an advance refunding issue?		X		X				
<b>16</b> Has the final allocation of proceeds been made?	X			X				
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

**Part III Private Business Use**

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

**Part III Private Business Use (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....	X		X		X		X	
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? .....	X		X		X		X	
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....	X		X		X		X	
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? .....	X		X		X		X	
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....	4.02 %		.14 %				.23 %	
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....								
<b>6</b> Total of lines 4 and 5 .....	4.02 %		.14 %				.23 %	
<b>7</b> Does the bond issue meet the private security or payment test? .....	X		X		X		X	
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		X		X		X		X
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....								
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	X		X		X		X	

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T? .....		X		X		X		X
<b>2</b> If "No" to line 1, did the following apply? .....								
<b>a</b> Rebate not due yet? .....		X		X		X		X
<b>b</b> Exception to rebate? .....	X		X		X		X	
<b>c</b> No rebate due? .....		X		X		X		X
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		X	X			X	X	
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X	X			X	X	
<b>b</b> Name of provider .....	N/A		BARCLAYS BANK		N/A		BARCLAYS BANK	
<b>c</b> Term of hedge .....			26.0000000				32.7500000	
<b>d</b> Was the hedge superintegrated? .....		X		X		X		X
<b>e</b> Was the hedge terminated? .....		X		X		X		X



**Part III Private Business Use** (Continued)

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

**Part IV Arbitrage**

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



**Part IV Arbitrage** (Continued)

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

**Part V Procedures To Undertake Corrective Action**

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

**Part VI Supplemental Information.** Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE K PART I BOND ISSUES

COLUMN (F)- DESCRIPTION OF PURPOSE

A-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION- UNIVERSITY REFUNDING BONDS, SERIES A OF 2009 AND UNIVERSITY CAPITAL PROJECT BONDS, SERIES B OF 2009

B-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION- UNIV. CAPITAL PROJECT AND REFUNDING BONDS SERIES 2000A, 2002B, 2005ABC; DECEMBER 2008 CONVERSION BONDS

C-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION- UNIVERSITY CAPITAL PROJECT AND REFUNDING BONDS, SERIES A OF 2002; JANUARY 2009 CONVERSION BONDS

D-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION-2009 INTEREST RATE MODE CONVERSION BONDS; JULY 2009 CONVERSION BONDS

E-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION- PITT ASSET NOTES- TAX-EXEMPT HIGHER EDUCATION REGISTERED SERIES OF 2012; PANTHERS

F-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION- PITT ASSET NOTES- TAX-EXEMPT HIGHER EDUCATION REGISTERED SERIES OF 2013; PANTHERS

SCHEDULE K PART I BOND ISSUES

COLUMN (F)- DESCRIPTION OF PURPOSE

A-FINANCE CAPITAL PROJECTS; REFUNDING OF SERIES 2007 A BONDS ISSUED

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

3/8/2007

B-UNIV. CAPITAL PROJECT AND REFUNDING BONDS SERIES 2000A,SERIES

2002B,SERIES 2005ABC; 12/17/2008.

PAR: 84,700,000

NAME: SERIES A OF 2000

ORIGINAL PURPOSE: REFUNDED SERIES 1985 B, 1985 C AND 1989 A BONDS

STATUS: REISSUED ON 07/10/09 "2009 INTEREST RATE CONVERSION"

PAR: 40,000,000

NAME: SERIES A OF 2002

ORIGINAL PURPOSE:REFUNDED 35% OF THE SERIES 1992 A AND 1992 B BONDS

STATUS: REISSUED ON 01/27/09 "UNIVERSITY CAPITAL PROJECT AND REFUNDING

BONDS, SERIES A OF 2002"

PAR: 29,500,000

NAME: SERIES B OF 2002

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

STATUS: REISSUED ON 07/10/09 "2009 INTEREST RATE CONVERSION"

PAR: 75,000,000

NAME: SERIES A OF 2005

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

STATUS: REISSUED ON 07/10/09 "2009 INTEREST RATE CONVERSION"

PAR: 45,000,000

NAME: SERIES B OF 2005

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

**Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.**

STATUS: N/A

PAR: 30,000,000

NAME: SERIES C OF 2005

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

STATUS: N/A

C-INTEREST RATE MODE CHANGE FOR SERIES 2002 A BONDS

D-2009 INTEREST RATE CONVERSION BONDS; 07/10/09.

PAR: 84,700,000

NAME: SERIES A OF 2000

ORIGINAL PURPOSE: REFUNDED SERIES 1985 B, 1985 C AND 1989 A BONDS

PAR: 50,000,000

NAME: SERIES B OF 2000

ORIGINAL PURPOSE: REFUNDED SERIES 1985 B, 1985 C AND 1989 A BONDS

PAR: 50,000,000

NAME: SERIES C OF 2000

ORIGINAL PURPOSE: CAPITAL BOND PROJECTS

PAR: 29,500,000

NAME: SERIES B OF 2002

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

PAR: 75,000,000

NAME: SERIES A OF 2005

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

PAR: 104,621,000

NAME: SERIES B OF 2007

ORIGINAL PURPOSE: CAPITAL PROJECT BONDS

E-FINANCE CAPITAL EQUIPMENT

F-FINANCE CAPITAL EQUIPMENT

SCHEDULE K PART III, LINE 4

PERCENTAGE OF PROPERTY USED IN A PRIVATE BUSINESS USE

PRIVATE BUSINESS USE AT THE UNIVERSITY IS TRACKED BY SERIES.

DEBT DESCRIPTION: SERIES 2005 A/B/C BONDS

ISSUED DATE:3/23/2005

ORIGINAL AMOUNT OF ISSUE: \$150,000,000

AMOUNT OF ISSUE OUTSTANDING:

AS OF JUNE 30, 2013: \$150,000,000

PERCENTAGE OF PRIVATE BUSINESS USE: 0.14%

DEBT DESCRIPTION: SERIES 2007 A/B BONDS

ISSUED DATE:3/8/2007

ORIGINAL AMOUNT OF ISSUE: \$255,000,000

AMOUNT OF ISSUE OUTSTANDING:

AS OF JUNE 30, 2013: \$104,621,000

PERCENTAGE OF PRIVATE BUSINESS USE: 0.23%

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

SCHEDULE K PART IV, LINE 3B & 3C,

HEDGE PROVIDER AND TERM OF HEDGE

COLUMN B:

SWAPS WERE IDENTIFIED ON 12/17/08; AND REIDENTIFIED ON 07/10/09.

NOTIONAL	MATURITY DATE	EFFECTIVE DATE	COUNTERPARTY
\$7,500,000	9/15/2031	9/15/2013	BARCLAYS BANK
\$7,500,000	9/15/2036	9/15/2013	BARCLAYS BANK
\$20,000,000	9/15/2037	9/15/2013	BARCLAYS BANK
\$20,000,000	9/15/2039	9/15/2013	BARCLAYS BANK

COLUMN D:

SWAPS WERE IDENTIFIED ON 12/17/08; AND REIDENTIFIED ON 07/10/09.

NOTIONAL	MATURITY DATE	EFFECTIVE DATE	COUNTERPARTY
\$7,500,000	9/15/2031	9/15/2013	BARCLAYS BANK
\$7,500,000	9/15/2036	9/15/2013	BARCLAYS BANK
\$20,000,000	9/15/2037	9/15/2013	BARCLAYS BANK
\$20,000,000	9/15/2039	9/15/2013	BARCLAYS BANK
\$20,000,000	9/15/2040	12/5/2008	BARCLAYS BANK
\$24,621,000	9/15/2041	12/5/2008	BARCLAYS BANK





**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
SEE SCH. L PART V	N/A	0	N/A		X

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L PART IV

**BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS**

(A) NAME OF INTERESTED PERSON: JOSHUA COCHRAN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF JEROME COCHRAN, GENERAL COUNSEL/ EXECUTIVE VICE CHANCELLOR

(C) AMOUNT OF TRANSACTION: \$67,431

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: ERIN NORDENBERG

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF MARK NORDENBERG, CHANCELLOR

(C) AMOUNT OF TRANSACTION: \$38,503

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: ANITA P. COURCOULAS, MD

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF IRA J. GUMBERG, TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$202,448

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: MARYJEAN LOVETT

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF ROBERT G. LOVETT, MEMBER OF THE BOARD OF TRUSTEES

(C) AMOUNT OF TRANSACTION: \$37,348

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: WERNER TROESKEN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF PATRICIA E. BEESON, PROVOST AND SENIOR VICE CHANCELLOR.

(C) AMOUNT OF TRANSACTION: \$174,468

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: ROBIN MAIER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF JAMES V. MAHER, JR., A FORMER OFFICER.

(C) AMOUNT OF TRANSACTION: \$60,398

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: JOHN MAIER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF JAMES V. MAHER, JR., A FORMER OFFICER.

(C) AMOUNT OF TRANSACTION: \$51,500

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: KATHERINE COSTA

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF MARTHA HARTLE MUNSCHE, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$20,393

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: BANK OF NEW YORK MELLON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

CHANCELLOR MARK NORDENBERG SERVES ON THE BOARD OF DIRECTORS OF BANK OF

NEW YORK MELLON

(C) AMOUNT OF TRANSACTION: \$1,492,431

(D) DESCRIPTION OF TRANSACTION: BANKING SERVICES (PRIMARILY CUSTODIAL

ARRANGEMENTS)

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: PEOPLE'S NATURAL GAS COMPANY

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: TRUSTEE

MORGAN O'BRIEN IS THE CEO AND SERVES ON THE BOARD OF DIRECTORS AT

PEOPLE'S NATURAL GAS COMPANY.

(C) AMOUNT OF TRANSACTIONS: \$1,173,508

(D) DESCRIPTION OF TRANSACTION: UTILITY SERVICE

(E) SHARING OF ORGANIZATION'S REVENUES? NO

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

(A) NAME OF INTERESTED PERSON: PARKHURST DINING SERVICES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: TRUSTEE

SUZANNE W. BROADHURST SERVES ON THE BOARD OF DIRECTORS OF PARKHURST  
DINING SERVICES.

(C) AMOUNT OF TRANSACTION: \$751,449

(D) DESCRIPTION OF TRANSACTION: FOOD SERVICE

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: PNC BANK

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: TRUSTEE

EVA TANSKY BLUM SERVES AS THE SENIOR VICE PRESIDENT. TRUSTEE CHARLES E.  
BUNCH SERVES AS A DIRECTOR OF PNC. TRUSTEE SY HOLZER SERVES AS  
PRESIDENT OF PNC BANK - PITTSBURGH.

(C) AMOUNT OF TRANSACTION: \$523,776

(D) DESCRIPTION OF TRANSACTION: BANKING SERVICE

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: BUCHANAN, INGERSOLL, AND ROONEY

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: TRUSTEE

JOHN A. BARBOUR IS CEO AND CHAIRMAN AT BUCHANAN, INGERSOLL, AND ROONEY .

(C) AMOUNT OF TRANSACTION: \$614,808

(D) DESCRIPTION OF TRANSACTION: LEGAL COUNSEL

(E) SHARING OF ORGANIZATION'S REVENUES? NO

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

(A) NAME OF INTERESTED PERSON: CDW GOVERNMENT, INC.

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: TRUSTEE

THOMAS E. RICHARDS IS CEO AT CDW.

(C) AMOUNT OF TRANSACTION: \$2,608,922

(D) DESCRIPTION OF TRANSACTION: IT PRODUCTS AND SERVICES

(E) SHARING OF ORGANIZATION'S REVENUES? NO

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organizations answered "Yes" on Form  
990, Part IV, lines 29 or 30.  
▶ Attach to Form 990.**

Name of the organization **UNIVERSITY OF PITTSBURGH** Employer identification number **25-0965591**

<b>Part I Types of Property</b>		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of determining noncash contribution amounts
1	Art - Works of art .....	X	2	69,830.	WRITTEN APPRAISAL
2	Art - Historical treasures .....				
3	Art - Fractional interests .....				
4	Books and publications .....	X		2,222,035.	WRITTEN APPRAISAL
5	Clothing and household goods .....				
6	Cars and other vehicles .....				
7	Boats and planes .....				
8	Intellectual property .....				
9	Securities - Publicly traded .....	X	96	7,901,962.	MEAN VALUE DATE REC'D
10	Securities - Closely held stock .....				
11	Securities - Partnership, LLC, or trust interests .....				
12	Securities - Miscellaneous .....				
13	Qualified conservation contribution - Historic structures .....				
14	Qualified conservation contribution - Other .....				
15	Real estate - Residential .....				
16	Real estate - Commercial .....				
17	Real estate - Other .....				
18	Collectibles .....				
19	Food inventory .....				
20	Drugs and medical supplies .....				
21	Taxidermy .....				
22	Historical artifacts .....				
23	Scientific specimens .....				
24	Archeological artifacts .....				
25	Other ▶ ( DENTAL EQUIPM )	X	1	159,960.	FMV
26	Other ▶ ( NEW EQUIPMENT )	X	2	62,620.	FMV
27	Other ▶ ( MOTOMAN ROBOT )	X	1	20,000.	FMV
28	Other ▶ ( MEDICAL ARTIF )	X	1	14,339.	FMV

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... **29** 17

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? .....	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2012)

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

PART I, OTHER TYPES OF PROPERTY:

METEORITE COLLECTION

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 12346.

(D) METHOD OF DETERMINING REVENUE: FMV

TRAVEL EXPENSES

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10157.

(D) METHOD OF DETERMINING REVENUE: FMV

DRILL ATTACHMENTS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10081.

(D) METHOD OF DETERMINING REVENUE: FMV

MEALS LODGING TRANSPORTATION

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 9950.

(D) METHOD OF DETERMINING REVENUE: FMV

ALUMINUM SHEET TUBING AND PLATE

(A) CHECK IF APPLICABLE = X

**Part II**

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

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 5000.

(D) METHOD OF DETERMINING REVENUE: FMV

STUDENT HOUSING

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 5000.

(D) METHOD OF DETERMINING REVENUE: FMV

LAW SCHOOL DEAN RECEPTION

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 2676.

(D) METHOD OF DETERMINING REVENUE: FMV

MEMORIAL GOLF OUTING

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1200.

(D) METHOD OF DETERMINING REVENUE: FMV

LOTTERY TICKETS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 100.

(D) METHOD OF DETERMINING REVENUE: FMV



**Part II**

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

BONUS CERTIFICATES

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII § 90.

(D) METHOD OF DETERMINING REVENUE: FMV

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization **UNIVERSITY OF PITTSBURGH** Employer identification number **25-0965591**

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE UNIVERSITY OF PITTSBURGH, FOUNDED IN 1787, IS ONE OF THE OLDEST  
INSTITUTIONS OF HIGHER EDUCATION IN THE UNITED STATES AND ONE OF THE  
NATION'S TOP PUBLIC RESEARCH UNIVERSITIES. FOR MORE THAN TWO  
CENTURIES, THE UNIVERSITY OF PITTSBURGH HAS SERVED THE NEEDS OF ITS  
HOME REGION, THE COMMONWEALTH OF PENNSYLVANIA, AND THE NATION AS A  
LEADER IN EDUCATION, A PIONEER IN RESEARCH AND A PARTNER IN COMMUNITY  
SERVICE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

	EXPENSES	GRANTS	REVENUE
STUDENT SERVICES	120,565,493		
SCHOLARSHIPS AND FELLOWSHIPS	158,216,453	158,216,453	
AUXILIARY ENTERPRISES	112,802,770		119,260,250
LIBRARIES	46,936,696		
PUBLIC SERVICE	83,437,306	622,073	
EXP. \$ 521,958,718. INCL GRANTS OF \$ 158,838,526. REVENUE \$ 119,260,250.			

FORM 990, PART VI, SECTION A, LINE 2:

EVA TANSKY BLUM, CHARLES E. BUNCH, AND SY HOLZER HAVE A BUSINESS  
RELATIONSHIP (ALL ARE OFFICERS AND/OR SERVE ON THE SAME BOARD OF DIRECTORS  
OF AN OUTSIDE ORGANIZATION).

ROBERT M. HERNANDEZ AND DAWNE S. HICKTON HAVE A BUSINESS RELATIONSHIP (ONE

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--	--

ON THE BOARD OF DIRECTORS OF OTHER'S EMPLOYER).

WILLIAM K. LIEBERMAN AND HERBERT S. SHEAR HAVE A BUSINESS RELATIONSHIP (ONE

ON THE BOARD OF DIRECTORS OF OTHER'S EMPLOYER).

EVA TANSKY BLUM AND BURTON M. TANSKY HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 7A: YES. UNDER THE COMMONWEALTH ACT OF

1966 (THE "ACT"), TWELVE OF THE TRUSTEES ARE DESIGNATED AS COMMONWEALTH

TRUSTEES. FOUR ARE APPOINTED BY THE GOVERNOR, WITH ADVICE AND CONSENT OF

TWO-THIRDS OF ALL MEMBERS OF THE SENATE. FOUR ARE APPOINTED BY THE

PRESIDENT PRO TEMPORE OF THE SENATE. FOUR ARE APPOINTED BY THE SPEAKER OF

THE HOUSE OF REPRESENTATIVES.

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO THE MAY 12, 2014 MEETING OF

THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, A COPY OF THE DRAFT IRS FORMS

990 AND 990-T FOR FISCAL YEAR 2013 WAS DISTRIBUTED TO EACH COMMITTEE

MEMBER. AT THE MAY 12 MEETING, THE CHIEF FINANCIAL OFFICER OF THE

UNIVERSITY REVIEWED BOTH FORMS WITH THE AUDIT COMMITTEE. VOTING MEMBERS OF

THE COMMITTEE INCLUDE OUTSIDE DIRECTORS, WHILE NONVOTING MEMBERS INCLUDE

SENIOR UNIVERSITY ADMINISTRATORS AS WELL AS STUDENT, FACULTY, AND STAFF

REPRESENTATIVES. THE REVIEW INCLUDED A DISCUSSION OF EACH SIGNIFICANT

SECTION OF THE TWO FORMS, HIGHLIGHTING RELEVANT CHANGES IN REQUIRED

REPORTING AND ANY SIGNIFICANT VARIATIONS FROM PREVIOUS FILINGS. COMMITTEE

MEMBERS WERE FREE TO ASK QUESTIONS AND PROVIDE FEEDBACK. SUBSEQUENT TO THE

AUDIT COMMITTEE'S REVIEW, A COPY OF FORM 990 WAS MADE AVAILABLE TO EACH

MEMBER OF THE ENTIRE BOARD OF TRUSTEES AND ALSO MADE AVAILABLE FOR PUBLIC

INSPECTION.

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FORM 990, PART VI, SECTION B, LINE 12C: THE UNIVERSITY'S CONFLICT OF INTEREST POLICY FOR TRUSTEES APPLIES TO MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES ("BOARD") WHO ARE ENTITLED TO VOTE AT BOARD MEETINGS. SUCH MEMBERS OF THE BOARD ARE REQUIRED ANNUALLY TO DISCLOSE AFFILIATIONS THEY (OR THEIR SPOUSE, ANCESTORS, BROTHERS AND SISTERS (WHETHER WHOLE OR HALF BLOOD), CHILDREN (WHETHER NATURAL OR ADOPTED), GRANDCHILDREN, GREAT-GRANDCHILDREN, AND SPOUSES OF BROTHERS, SISTERS, CHILDREN, GRANDCHILDREN, AND GREAT-GRANDCHILDREN) HAVE WITH ANY ORGANIZATION WITH WHICH THERE IS A REASONABLE POSSIBILITY THE UNIVERSITY MAY HAVE BUSINESS DEALINGS. FURTHER, SUCH MEMBERS OF THE BOARD ARE REQUIRED TO DISCLOSE TRANSACTIONS AND PROPOSED TRANSACTIONS (EXCLUSIVE OF TRANSACTIONS BETWEEN THE UNIVERSITY AND ITSELF OR A CLOSE AFFILIATE, OR FOR WHICH THE UNIVERSITY WILL RECEIVE COMPETITIVE BIDS FROM TWO OR MORE COMPANIES, OR THAT INVOLVE THE RENDERING OF SERVICES OF A COMMON CARRIER, CONTRACT CARRIER OR PUBLIC UTILITY AT RATES/CHARGES FIXED IN CONFORMITY WITH LAW OR GOVERNMENTAL AUTHORITY, OR THAT INVOLVE SERVICES OF A BANK DEPOSITARY OF FUNDS, TRANSFER AGENT, REGISTRAR OR TRUSTEE UNDER TRUST INDENTURE, OR SIMILAR SERVICES) WHEN THEY FIRST RECEIVE KNOWLEDGE OF THE SAME AND AS THEY ARISE BETWEEN THE UNIVERSITY, ON THE ONE HAND, AND, ON THE OTHER HAND, THE TRUSTEE (OR THEIR SPOUSE, ANCESTORS, BROTHERS AND SISTERS (WHETHER WHOLE OR HALF BLOOD), CHILDREN (WHETHER NATURAL OR ADOPTED), GRANDCHILDREN, GREAT-GRANDCHILDREN, AND SPOUSES OF BROTHERS, SISTERS, CHILDREN, GRANDCHILDREN, AND GREAT-GRANDCHILDREN) OR AN ORGANIZATION WITH WHICH THE TRUSTEE (OR THEIR SPOUSE, ANCESTORS, BROTHERS AND SISTERS (WHETHER WHOLE OR HALF BLOOD), CHILDREN (WHETHER NATURAL OR ADOPTED), GRANDCHILDREN, GREAT-GRANDCHILDREN, AND SPOUSES OF BROTHERS, SISTERS, CHILDREN, GRANDCHILDREN, AND GREAT-GRANDCHILDREN) IS AFFILIATED WHEN THE AMOUNT

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INVOLVED DOES OR IS LIKELY TO EXCEED \$50,000. IF POSSIBLE, DISCLOSURES ARE TO BE MADE PRIOR TO ANY SUCH TRANSACTION.

THE REQUIRED ANNUAL DISCLOSURES ARE SUBMITTED TO THE UNIVERSITY'S OFFICE OF SECRETARY AND FORWARDED TO THE UNIVERSITY'S OFFICE OF GENERAL COUNSEL. THE OFFICE OF GENERAL COUNSEL THEN CONDUCTS AN EXTENSIVE REVIEW, WHICH REVIEW INCLUDES A SURVEY OF VARIOUS OFFICES OF THE UNIVERSITY, WITH REGARD TO RELEVANT BUSINESS RELATIONSHIPS OF THE UNIVERSITY AND THE MEANS BY WHICH THOSE RELATIONSHIPS WERE FORMULATED AND CONTINUE. THE RESULTS OF THAT EXTENSIVE REVIEW ARE SHARED BY THE OFFICE OF SECRETARY WITH THE BOARD'S CONFLICT OF INTEREST COMMITTEE. THE BOARD'S CONFLICT OF INTEREST COMMITTEE CONSISTS OF THREE MEMBERS OF THE BOARD, AND INCLUDES THE CHAIRPERSON OF THE BOARD, THE CHAIRPERSON OF THE BOARD'S BUDGET COMMITTEE AND THE CHAIRPERSON OF THE BOARD'S AUDIT COMMITTEE.

THOSE DISCLOSURES OF TRANSACTIONS AND PROPOSED TRANSACTIONS MADE BY BOARD MEMBERS, AS THEY ARISE, HAVE BEEN DIRECTED TO THE OFFICE OF SECRETARY. THAT OFFICE, IN CONSULTATION WITH OTHER UNIVERSITY OFFICES- INCLUDING THE UNIVERSITY'S OFFICE OF GENERAL COUNSEL- AS NECESSARY, HAS REVIEWED THEM FOR POTENTIAL CONFLICTS.

ANY APPLICABLE MEMBER OF THE BOARD WHO IS A PARTY TO, OR IS AFFILIATED WITH AN ORGANIZATION THAT IS A PARTY TO, AN APPLICABLE TRANSACTION WITH THE UNIVERSITY MAY NOT PARTICIPATE IN ANY CONSIDERATION OR ACTION BY THE BOARD RELATING TO THE MATTER, OTHER THAN TO MAKE A BRIEF POSITION STATEMENT AND ANSWER PERTINENT QUESTIONS OTHER BOARD MEMBERS MIGHT HAVE. ADDITIONALLY, THOSE UNIVERSITY EMPLOYEES WHO ARE RESPONSIBLE FOR ACQUIRING GOODS OR

SERVICES ON THE UNIVERSITY'S BEHALF - TO THE EXTENT THEY ARE AWARE, AT ALL,

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OF A RELEVANT BOARD MEMBER'S AFFILIATION - DO SO EXCLUSIVELY BASED UPON THE UNIVERSITY'S BEST BUSINESS INTERESTS, INCLUDING CONSIDERATION OF SUCH FACTORS AS EVALUATION AND RE-EVALUATION OF THE COST AND QUALITY AND ARMS-LENGTH NEGOTIATION OF THE TERMS.

THOUGH NOT FORMALLY ADOPTED BY THE BOARD, THE UNIVERSITY HAS SEPARATE CONFLICT OF INTEREST POLICIES APPLICABLE TO EMPLOYEES, INCLUDING THOSE WHO ARE OFFICERS OF THE UNIVERSITY. ALL UNIVERSITY EMPLOYEES ARE REQUIRED TO DISCLOSE TRANSACTIONS AND PROPOSED TRANSACTIONS AS THEY ARISE BETWEEN THE UNIVERSITY, ON THE ONE HAND, AND, ON THE OTHER HAND, THE EMPLOYEE (OR AN IMMEDIATE FAMILY MEMBER OF THE EMPLOYEE) OR AN ORGANIZATION IN WHICH THE EMPLOYEE (OR AN IMMEDIATE FAMILY MEMBER OF THE EMPLOYEE) HAS A FINANCIAL INTEREST, WHEN THE AMOUNT INVOLVED DOES OR IS LIKELY TO EXCEED \$500.

ADDITIONALLY, UNIVERSITY STAFF AND ADMINISTRATORS ABOVE A CERTAIN JOB CLASSIFICATION LEVEL - WHICH, AS A PRACTICAL MATTER, INCLUDES ALL OF THE UNIVERSITY'S EMPLOYEE/OFFICERS - MUST MAKE ADDITIONAL DISCLOSURES. FIRST, THOSE INDIVIDUALS MUST DISCLOSE TRANSACTIONS AND PROPOSED TRANSACTIONS AS THEY ARISE BETWEEN THE UNIVERSITY, ON THE ONE HAND, AND, ON THE OTHER HAND, THE EMPLOYEE (OR SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILD, AS WELL AS SIBLINGS, PARENTS, AND NON-DEPENDENT CHILDREN - INCLUDING STEP AND IN-LAW VARIANTS - IF THE EMPLOYEE HAS ACTUAL KNOWLEDGE SUCH A RELATIVE IS LIKELY TO OR WILL BENEFIT) OR AN ORGANIZATION IN WHICH ANY OF THE FOREGOING IS AFFILIATED WHEN THE AMOUNT INVOLVED DOES OR IS LIKELY TO EXCEED \$500.

FURTHER, THOSE EMPLOYEES MUST ANNUALLY DISCLOSE AFFILIATIONS THEY (OR SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILD, AS WELL AS SIBLINGS, PARENTS, AND NON-DEPENDENT CHILDREN - INCLUDING STEP AND IN-LAW VARIANTS -

IF THE EMPLOYEE HAS ACTUAL KNOWLEDGE SUCH A RELATIVE IS LIKELY TO OR WILL

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BENEFIT) HAVE WITH ANY ORGANIZATION WITH WHICH THE UNIVERSITY HAD BUSINESS

DEALINGS IN THE PAST YEAR OR WITH WHICH THERE IS A REASONABLE POSSIBILITY

THE UNIVERSITY MAY HAVE BUSINESS DEALINGS IN THE NEXT YEAR.

ALL DISCLOSURES REQUIRED OF UNIVERSITY EMPLOYEES ARE TO BE MADE TO THE NEXT

HIGHER ADMINISTRATOR IN THE EMPLOYEE'S SUPERVISORY LINE (IN THE CASE OF THE

UNIVERSITY'S CHANCELLOR, SUCH DISCLOSURES ARE MADE TO THE UNIVERSITY

SECRETARY). THE RECIPIENT OF SUCH INFORMATION REVIEWS SUCH DISCLOSURES FOR

REAL, APPARENT OR POTENTIAL CONFLICTS OF INTEREST AND THEN RECOMMENDS AND

INITIATES SUCH ACTION AS IS NECESSARY TO RESOLVE THE SAME. ANY RELEVANT

EMPLOYEE WHO DISAGREES WITH THE RECOMMENDATION FOR RESOLVING CONFLICTS MADE

BY HIS/HER REVIEWING ADMINISTRATOR MAY APPEAL TO THE NEXT HIGHER

ADMINISTRATOR IN THE SUPERVISORY LINE. IN ANY EVENT, EMPLOYEES ARE

PROHIBITED FROM EXERCISING ANY UNIVERSITY DECISION-MAKING AUTHORITY OR FROM

EXERTING INFLUENCE CONCERNING ANY ORGANIZATION OR TRANSACTION IN WHICH THEY

OR A FAMILY MEMBER HAVE A PERSONAL INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF TRUSTEES, BY

RESOLUTION OF JUNE 13, 1991 (AMENDED JUNE 19, 1992), ESTABLISHED THE

COMPENSATION COMMITTEE AS A STANDING COMMITTEE OF THE BOARD. THE

COMPENSATION COMMITTEE IS AUTHORIZED TO DETERMINE THE CHANCELLOR'S

COMPENSATION, INCLUDING FRINGE BENEFITS AND PERQUISITES. UPON THE

RECOMMENDATION OF THE CHANCELLOR, THE COMPENSATION COMMITTEE ALSO REVIEWS

THE COMPENSATION, INCLUDING FRINGE BENEFITS AND PERQUISITES, OF THE

OFFICERS OF THE UNIVERSITY, EXCEPT ASSISTANT TREASURERS AND ASSOCIATE

SECRETARIES.

THE COMPENSATION COMMITTEE IS COMPRISED OF THE CHAIRPERSON OF THE BOARD,

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THE CHAIR OF THE BUDGET COMMITTEE OF THE BOARD, AND OTHER TRUSTEES. NO

TRUSTEE SERVING ON THE COMPENSATION COMMITTEE HAS A CONFLICT OF INTEREST

WITH RESPECT TO THE CHANCELLOR'S OR OFFICERS' COMPENSATION ARRANGEMENTS.

TO ASSIST THE COMPENSATION COMMITTEE IN MEETING ITS RESPONSIBILITIES, THE

SERVICES OF A GLOBAL PROFESSIONAL SERVICES FIRM ARE USED FOR COMPENSATION

CONSULTING AND MARKET RESEARCH. THAT FIRM PROVIDES THE COMPENSATION

COMMITTEE WITH COMPENSATION DATA FROM A GROUP OF COMPARABLE U.S. RESEARCH

INSTITUTIONS. THE OFFICERS' COMPENSATION IS BENCHMARKED AGAINST THESE

INSTITUTIONS.

MINUTES OF THE COMPENSATION COMMITTEE'S MEETINGS ARE MAINTAINED IN THE

OFFICE OF THE SECRETARY OF THE BOARD OF TRUSTEES. ACCESS TO MINUTES OF ALL

PUBLIC MEETINGS OF THE BOARD OF TRUSTEES AND ITS COMMITTEES ARE AVAILABLE

TO THE PUBLIC.

FORM 990, PART VI, SECTION C, LINE 19: ALL RELEVANT DOCUMENTS, INCLUDING

THE CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE MADE

AVAILABLE TO THE PUBLIC VIA THE UNIVERSITY'S WEB SITE AND/OR BY REQUEST.

FORM 990, PART VI, SECTION B, LINE 13 AND 14

WHISTLEBLOWER POLICY AND DOCUMENT RETENTION AND DESTRUCTION POLICY

THE UNIVERSITY HAS A WHISTLEBLOWER AND DOCUMENT RETENTION AND

DESTRUCTION POLICY. HOWEVER, THE POLICIES HAVE NOT BEEN ADOPTED BY THE

BOARD OF TRUSTEES.



**Related Organizations and Unrelated Partnerships**  
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization **UNIVERSITY OF PITTSBURGH** Employer identification number **25-0965591**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
UNIVERSITY OF PITTSBURGH AND UPMC MEDICAL AND HEALTH SCIENCES FOUNDATION - , 3600 FORBES AVE, SUITE 8084 FORBES TOWER, BRADFORD EDUCATIONAL FOUNDATION - 25-1399653 300 CAMPUS DRIVE BRADFORD, PA 16701	TO INTEGRATE FUNDRAISING FOR THE UNIVERSITY OF PITTSBURGH AND UPMC	PENNSYLVANIA	501(C)(3)	11A			X
THE UPG FOUNDATION - 25-1571569 150 FINOLI DRIVE GREENSBURG, PA 15601	TO SUPPORT THE UNIVERSITY OF PITTSBURGH AT BRADFORD ENHANCE AND IMPROVE THE QUALITY OF THE GREENSBURG CAMPUS OF THE UNIVERSITY	PENNSYLVANIA	501(C)(3)	11C			X
JOHNSTOWN EDUCATIONAL FOUNDATION - 25-1513720, UPJ, 266 BLACKINGTON HALL, JOHNSTOWN, PA 15904	TO CONTROL FUNDS EXCLUSIVELY IN CONNECTION WITH JOHNSTOWN CAMPUS	PENNSYLVANIA	501(C)(3)	11C			X

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

Schedule R (Form 990) 2012

SEE PART VII FOR CONTINUATIONS

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
EYE AND EAR FOUNDATION - 25-1439732 BIOMEDICAL SCIENCES TOWER, 203 LOTHROP ST, PITTSBURGH, PA 15213	ADVANCE EFFORTS OF OTOLARYNGOLOGY AND OPHTHALMOLOGY DEPARTMENTS	PENNSYLVANIA	501(C)(3)	11C			X
UNIVERSITY OF PITTSBURGH TRUST - 25-1465279 5TH AVE AND BIGELOW PITTSBURGH, PA 15260	OVERSIGHT OF CERTAIN UNIVERSITY AFFILIATED ENTITIES AND ASSETS	PENNSYLVANIA	501(C)(3)	11C			X
UNIVERSITY DENTAL HEALTH SERVICES - 25-1762396, 3501 TERRACE STREET, PITTSBURGH, PA 15261	TO PROVIDE TEACHING AND PATIENT CARE IN A TEACHING AND RESEARCH SETTING	PENNSYLVANIA	501(C)(3)	3			X
PITTSBURGH SKIN & CANCER FOUNDATION - 25-0965472, 190 LOTHROP STREET STE 145, PITTSBURGH, PA 15213	SUPPORT OF PROGRAMS, RESEARCH, AND EDUCATION WITHIN DERMATOLOGY	PENNSYLVANIA	501(C)(3)	7			X
PITTSBURGH TISSUE ENGINEERING INITIATIVE INC. - 25-1789285, 100 TECHNOLOGY DRIVE NO 200, PITTSBURGH, PA 15219	FOSTER RESEARCH PERTAINING TO TISSUE ENGINEERING	PENNSYLVANIA	501(C)(3)	11A			X
MPC CORPORATION - 25-1128244 5000 FORBES AVENUE PITTSBURGH, PA 15213	RESEARCH ACTIVITIES TO AID EDUCATIONAL AND ECONOMIC DEVELOPMENT IN PA	PENNSYLVANIA	501(C)(3)	11A			X



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

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

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

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	X	
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	X	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			



**Part VII Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

UNIVERSITY OF PITTSBURGH AND UPMC MEDICAL AND HEALTH

SCIENCES FOUNDATION

EIN: 11-3708851

3600 FORBES AVE, SUITE 8084 FORBES TOWER

PITTSBURGH, PA 15213

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  X

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions <b>UNIVERSITY OF PITTSBURGH</b>	Employer identification number (EIN) or <b>25-0965591</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>116 ATWOOD STREET, SUITE 201</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>PITTSBURGH, PA 15260-0100</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**THURMAN D. WINGROVE**

• The books are in the care of **3015 CATHEDRAL OF LEARNING - PITTSBURGH, PA 15260-6471**

Telephone No. **(412) 624-6050**

FAX No.

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **MAY 15, 2014**

5 For calendar year , or other tax year beginning **JUL 1, 2012**, and ending **JUN 30, 2013**

6 If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return

Change in accounting period

7 State in detail why you need the extension **ADDITIONAL TIME IS REQUIRED TO FILE A COMPLETE AND ACCURATE TAX RETURN.**

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c	<b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **John Ramone** Title **CFO**

Date **1/14/13**

**University of Pittsburgh 25 Highest Paid Non-Officers  
For the Year Ended June 30, 2013  
Right-to-Know Disclosure**

<u>Ranking</u>	<u>Name</u>	<u>Total Gross</u>
1	Dixon, James P II	\$1,969,364
2	Chryst, Paul J	\$1,526,515
3	Davidson, Nancy E	\$651,543
4	Pederson, Steven Charles	\$577,083
5	Berenato, Agnus M	\$455,655
6	Burke, Donald S	\$450,910
7	Becich, Michael J	\$450,591
8	Kanter, Steven L	\$440,549
9	Braun, Thomas W	\$414,535
10	Denis, David J	\$405,500
11	Trucco, Massimo M	\$400,851
12	Taylor, Douglass Lansing	\$376,511
13	Malandro, Marc Shane	\$374,493
14	Inman, John Jeffrey	\$373,499
15	Denis, Diane K	\$364,878
16	Huard, Johnny	\$361,026
17	Masnack, Jeffrey L	\$360,344
18	Huxtable, David Allen	\$359,912
19	Gronenborn, Angela M	\$357,062
20	Perfetti, Charles A	\$355,458
21	Berg, Jeremy Mark	\$355,000
22	Freeman, Bruce A	\$349,702
23	Sorkin, Alexander Davidovich	\$347,581
24	Curran, Dennis P	\$342,250
25	Roth, Loren H	\$336,116