

Form **990**

EXTENDED TO MAY 15, 2017

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

# 2015

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

**A** For the 2015 calendar year, or tax year beginning JUL 1, 2015 and ending JUN 30, 2016

**B** Check if applicable:

Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** 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 or town, state or province, country, and ZIP or foreign postal code  
PITTSBURGH, PA 15260-0100

**D** Employer identification number  
25-0965591

**E** Telephone number  
(412) 624-6395

**G** Gross receipts \$ 3,648,951,087.

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶

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

**J** Website: ▶ WWW.PITT.EDU

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

**L** Year of formation: 1787 **M** State of legal domicile: PA

## Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO PROVIDE HIGH QUALITY EDUCATIONAL SERVICES, RESEARCH, AND COMMUNITY SERVICE.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	<u>35</u>	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	<u>29</u>	
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	<u>26827</u>	
	6	Total number of volunteers (estimate if necessary)	<u>277</u>	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	<u>-7,605,067.</u>	
7b	Net unrelated business taxable income from Form 990-T, line 34	<u>-9,944,644.</u>		
Revenue	8	Contributions and grants (Part VIII, line 1h)	<u>266,505,362.</u>	<u>252,981,932.</u>
	9	Program service revenue (Part VIII, line 2g)	<u>1,853,219,968.</u>	<u>1,889,551,699.</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>286,364,475.</u>	<u>178,420,017.</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>15,823,831.</u>	<u>9,282,146.</u>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>2,421,913,636.</u>	<u>2,330,235,794.</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>258,962,532.</u>	<u>266,832,011.</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u>0.</u>	<u>0.</u>
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>1,176,517,410.</u>	<u>1,275,840,707.</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u>378,280.</u>	<u>565,753.</u>
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>21,572,810.</u>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>741,825,872.</u>	<u>756,593,822.</u>
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>2,177,684,094.</u>	<u>2,299,832,293.</u>	
19	Revenue less expenses. Subtract line 18 from line 12	<u>244,229,542.</u>	<u>30,403,501.</u>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	<u>6,328,823,339.</u>	<u>6,229,558,895.</u>
	21	Total liabilities (Part X, line 26)	<u>1,928,382,905.</u>	<u>2,041,885,399.</u>
	22	Net assets or fund balances. Subtract line 21 from line 20	<u>4,400,440,434.</u>	<u>4,187,673,496.</u>

## Part II Signature Block

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

**Sign Here**

Signature of officer: Arthur Ramicone Date: 5/8/17

ARTHUR G. RAMICONE, SENIOR VICE CHANCELLOR & CFO  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: D. GREG GOLLER Preparer's signature: [Signature] Date: 5/8/2017 Check if self-employed:  PTIN: P00485827

Firm's name: KPMG Firm's EIN: 13-5565207

Firm's address: 1676 INTERNATIONAL DRIVE  
MCLEAN, VA 22102 Phone no. 703-286-8000

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 or note to any line 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 \$ 692,074,829. including grants of \$ 89,213,558. ) (Revenue \$ 776,366,381. ) 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 \$ 590,888,612. including grants of \$ ) (Revenue \$ 764,499,343. ) INSTRUCTION - INCLUDES EXPENDITURES FOR ACTIVITIES OF THE INSTITUTION'S INSTRUCTION PROGRAMS.

4c (Code: ) (Expenses \$ 204,406,046. including grants of \$ ) (Revenue \$ 214,029,774. ) 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 \$ 604,273,806. including grants of \$ 177,618,453.) (Revenue \$ 137,546,167.)

4e Total program service expenses 2,091,643,293.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> 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
<b>4 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	
<b>5</b> 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
<b>6</b> 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
<b>7</b> 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
<b>8</b> 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	
<b>9</b> 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
<b>10</b> 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	
<b>11</b> 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.		
<b>a</b> 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>b</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	
<b>c</b> 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
<b>d</b> 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
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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	
<b>12a</b> 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>b</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	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	X	
<b>b</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	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	X	
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....	X	
<b>17</b> 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	
<b>18</b> 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	
<b>19</b> 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

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

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	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 25a</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</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		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> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		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> .....	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		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 or note to any line in this Part V

Input box for Schedule O check

Table with columns for question number, description, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and charitable contributions.

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 or note to any line 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 (35); 1b Enter the number of voting members included in line 1a, above, who are independent (29); 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? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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? (X); 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? (X); 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 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

- 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, address, and telephone number of the person who possesses the organization's books and records: 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 or note to any line in this Part VII

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

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

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

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

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

(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) JANE BILEWICZ ALLRED TRUSTEE	5.00	X					0.	0.	0.	
(2) JOHN A. BARBOUR TRUSTEE	5.00	X					0.	0.	0.	
(3) EVA TANSKY BLUM CHAIRPERSON OF THE BOARD OF TRUSTEES	5.00	X		X			0.	0.	0.	
(4) SUZANNE W. BROADHURST TRUSTEE	5.00	X					0.	0.	0.	
(5) MICHAEL A. BRYSON TRUSTEE	5.00	X					0.	0.	0.	
(6) MARY ELLEN CALLAHAN TRUSTEE	5.00	X					0.	0.	0.	
(7) JAY COSTA, JR. TRUSTEE	5.00	X					0.	0.	0.	
(8) JAMES P. COVERT TRUSTEE	5.00	X					0.	0.	0.	
(9) BRADLEY J. FRANCO TRUSTEE	5.00	X					0.	0.	0.	
(10) PATRICK D. GALLAGHER CHANCELLOR / CEO	40.00	X		X			527,895.	0.	213,590.	
(11) EDWARD J. GREFFENSTETTE TRUSTEE	5.00	X					0.	796,068.	547,822.	
(12) IRA J. GUMBERG TRUSTEE	5.00	X					0.	0.	0.	
(13) DAWNE S. HICKTON TRUSTEE	5.00	X					0.	0.	0.	
(14) SY HOLZER TRUSTEE	5.00	X					0.	0.	0.	
(15) PATRICIA D. HOROHO TRUSTEE	5.00	X					0.	0.	0.	
(16) THOMAS O. JOHNSON TRUSTEE	5.00	X					0.	0.	0.	
(17) S. JEFFREY KONDIS 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) TERRY LAUGHLIN TRUSTEE	5.00	X						0.	0.	0.
(19) WILLIAM K. LIEBERMAN TRUSTEE	5.00	X						0.	0.	0.
(20) ROBERT G. LOVETT TRUSTEE	5.00	X						0.	0.	0.
(21) JOHN A. MAHER III TRUSTEE	5.00	X						0.	0.	0.
(22) F. JAMES MCCARL III TRUSTEE	5.00	X						0.	0.	0.
(23) MARTHA HARTLE MUNSCH TRUSTEE	5.00	X						0.	0.	0.
(24) JOHN H. PELUSI, JR. TRUSTEE	5.00	X						0.	0.	0.
(25) ROBERT P. RANDALL TRUSTEE	5.00	X						0.	0.	0.
(26) THOMAS E. RICHARDS TRUSTEE	5.00	X						0.	0.	0.
<b>1b Sub-total</b>								527,895.	796,068.	761,412.
<b>c Total from continuation sheets to Part VII, Section A</b>								11,143,367.	0.	797,288.
<b>d Total (add lines 1b and 1c)</b>								11,671,262.	796,068.	1,558,700.

**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 **1,853**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
SODEXO PO BOX 536922, ATLANTA, GA 30353-6922	FOOD SERVICE	35,020,173.
BPA II LTD, 1468 WEST NINTH STREET SUITE 135, CLEVELAND, OH 44113	CONSTRUCTION	9,767,101.
EBS CO SUBSCRIPTION SERVICES PO BOX 204661, DALLAS, TX 75320-4661	RESEARCH DATABASE	9,276,879.
MASCARO CONSTRUCTION CO. LP, 1720 METROPOLITAN ST, PITTSBURGH, PA 15233-2232	CONSTRUCTION	9,123,772.
REGENTS OF THE UNIVERSITY OF MINNESOTA, NW 957 PO BOX 1450, MINNEAPOLIS, MN	RESEARCH SUBCONTRACTS	8,885,129.

**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 **652**

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) BRYANT J. SALTER TRUSTEE	5.00	X					0.	0.	0.	
(28) KEITH E. SCHAEFER TRUSTEE	5.00	X					0.	0.	0.	
(29) HERBERT S. SHEAR TRUSTEE	5.00	X					0.	0.	0.	
(30) JACK SMITH TRUSTEE	5.00	X					0.	0.	0.	
(31) WILLIAM E. STRICKLAND, JR. TRUSTEE	5.00	X					2,000.	0.	0.	
(32) STEPHEN R. TRITCH TRUSTEE	5.00	X					0.	0.	0.	
(33) THOMAS L. VANKIRK TRUSTEE	5.00	X					0.	0.	0.	
(34) PETER C. VARISCHETTI TRUSTEE	5.00	X					0.	0.	0.	
(35) JOHN J. VERBANAC TRUSTEE	5.00	X					0.	0.	0.	
(36) KEVIN WASHO, JR. TRUSTEE	5.00	X					0.	0.	0.	
(37) DOUGLAS M. BROWNING TRUSTEE- VOTING TERM ENDED 6/24/16	5.00	X					0.	0.	0.	
(38) BRIAN GENERALOVICH TRUSTEE- VOTING TERM ENDED 6/24/16	5.00	X					0.	0.	0.	
(39) MARLEE S. MYERS TRUSTEE- VOTING TERM ENDED 6/24/16	5.00	X					0.	0.	0.	
(40) PATRICIA E. BEESON PROVOST/SR VICE CHANCELLOR	40.00 1.00			X			445,868.	0.	63,522.	
(41) KATHY S. HUMPHREY SR VICE CHANCELLOR, ENGAGEMENT	40.00			X			403,075.	0.	48,893.	
(42) ARTHUR S. LEVINE SR VICE CHANCELLOR, HEALTH SCI/DEAN	40.00 5.00			X			1,104,494.	0.	46,864.	
(43) AMY KRUEGER MARSH TREASURER	40.00 1.00			X			458,003.	0.	55,272.	
(44) ARTHUR G. RAMICONE SR VICE CHANCELLOR & CFO	40.00 2.00			X			426,907.	0.	30,636.	
(45) GEOVETTE E. WASHINGTON GENERAL COUNSEL	40.00			X			142,621.	0.	9,962.	
(46) GREGORY A. SCOTT SR VICE CHANCELLOR, BUSINESS OPS.	40.00			X			0.	0.	0.	
Total to Part VII, Section A, line 1c .....										



**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line 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 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<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>	1,054,030.			
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>	175,624,254.			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	76,303,648.			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		7,712,228.			
	<b>h Total.</b> Add lines 1a-1f		252,981,932.			
<b>Program Service Revenue</b>	<b>2 a</b> GRANTS/CONTRACTS	Business Code 541700	776,366,381.		776,366,381.	
	<b>b</b> TUITION	611710	764,499,343.	764,499,343.		
	<b>c</b> SALES-EDUCATIONAL	711300	210,116,731.	209,453,956.	662,775.	
	<b>d</b> SALES-AUXILIARY	900004	137,546,167.	136,310,705.	1,235,462.	
	<b>e</b> UNIVERSITY PRESS	511130	1,023,077.	1,023,077.		
	<b>f</b> All other program service revenue					
	<b>g Total.</b> Add lines 2a-2f		1,889,551,699.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		80,164,223.		80,164,223.	
	<b>4</b> Income from investment of tax-exempt bond proceeds		33,392.		33,392.	
	<b>5</b> Royalties		7,330,101.		7,330,101.	
	<b>6 a</b> Gross rents	(i) Real	18,350,544.			
		(ii) Personal				
		<b>b</b> Less: rental expenses	9,582,988.			
		<b>c</b> Rental income or (loss)	8,767,556.			
	<b>d</b> Net rental income or (loss)		8,767,556.		8,767,556.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	1397459241.			
		(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses	1299236839.			
		<b>c</b> Gain or (loss)	98,222,402.			
	<b>d</b> Net gain or (loss)		98,222,402.		98,222,402.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 1,054,030. of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	239,977.			
		<b>b</b> Less: direct expenses	442,150.			
<b>c</b> Net income or (loss) from fundraising events			-202,173.		-202,173.	
<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>	12,986,766.				
	<b>b</b> Less: cost of goods sold	9,453,316.				
	<b>c</b> Net income or (loss) from sales of inventory		3,533,450.	2,889,966.	643,484.	
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b> PARTNERSHIP GAIN(LOSS)	523000	-10,146,788.		-10,146,788.		
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total.</b> Add lines 11a-11d		-10,146,788.				
<b>12 Total revenue.</b> See instructions.		2,330,235,794.	1,114,177,047.	-7,605,067.	970,681,882.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	86,313,867.	86,313,867.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	176,430,341.	176,430,341.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	4,087,803.	4,087,803.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	4,140,096.	984,204.	2,862,578.	293,314.
<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)	2,330,303.	1,880,441.	449,862.	
<b>7</b> Other salaries and wages	900,232,226.	803,618,803.	84,831,599.	11,781,824.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	83,544,858.	80,449,972.	1,907,642.	1,187,244.
<b>9</b> Other employee benefits	228,553,192.	218,943,873.	7,186,638.	2,422,681.
<b>10</b> Payroll taxes	57,040,032.	54,778,961.	1,406,020.	855,051.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management	300,046.		300,046.	
<b>b</b> Legal	5,952,404.		5,952,404.	
<b>c</b> Accounting	629,870.		629,870.	
<b>d</b> Lobbying	740,855.	740,855.		
<b>e</b> Professional fundraising services. See Part IV, line 17	565,753.			565,753.
<b>f</b> Investment management fees	43,539,912.		43,539,912.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	147,717,910.	146,386,342.		1,331,568.
<b>12</b> Advertising and promotion	2,617,342.	2,588,708.		28,634.
<b>13</b> Office expenses	100,095,265.	99,263,053.	74,469.	757,743.
<b>14</b> Information technology	27,391,635.	26,852,714.	349,136.	189,785.
<b>15</b> Royalties				
<b>16</b> Occupancy	132,995,889.	121,232,791.	10,634,384.	1,128,714.
<b>17</b> Travel	58,010,836.	53,115,626.	4,027,418.	867,792.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	4,121,803.	4,044,881.		76,922.
<b>20</b> Interest	42,212,096.	38,802,991.	3,409,105.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	174,073,230.	159,707,009.	14,366,221.	
<b>23</b> Insurance	4,963,988.	1,264,756.	3,687,356.	11,876.
<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	7,249,639.	7,249,639.		
<b>b</b> DUES AND FEES	3,981,102.	2,905,663.	1,001,530.	73,909.
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,299,832,293.	2,091,643,293.	186,616,190.	21,572,810.
<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 or note to any line 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 .....	619,388,206.	<b>2</b>	565,200,468.
	<b>3</b> Pledges and grants receivable, net .....	120,795,043.	<b>3</b>	137,333,775.
	<b>4</b> Accounts receivable, net .....	57,248,180.	<b>4</b>	82,878,253.
	<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 .....	45,851,880.	<b>7</b>	47,610,549.
	<b>8</b> Inventories for sale or use .....	5,312,521.	<b>8</b>	5,212,190.
	<b>9</b> Prepaid expenses and deferred charges .....	15,233,379.	<b>9</b>	15,772,295.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 4,251,897,804.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,477,833,012.	1,785,749,406.	<b>10c</b> 1,774,064,792.
	<b>11</b> Investments - publicly traded securities .....	1,423,470,642.	<b>11</b>	1,303,971,421.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	2,210,064,182.	<b>12</b>	2,264,565,458.
	<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 .....	45,709,900.	<b>15</b>	32,949,694.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	6,328,823,339.	<b>16</b>	6,229,558,895.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	649,966,266.	<b>17</b>	759,393,222.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	105,848,148.	<b>19</b>	113,489,458.
	<b>20</b> Tax-exempt bond liabilities .....	881,365,952.	<b>20</b>	848,647,840.
	<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 .....	100,265,963.	<b>24</b>	100,301,648.
	<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 .....	190,936,576.	<b>25</b>	220,053,231.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	1,928,382,905.	<b>26</b>	2,041,885,399.
<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 .....	2,911,881,744.	<b>27</b>	2,764,269,073.
	<b>28</b> Temporarily restricted net assets .....	804,388,497.	<b>28</b>	714,738,032.
	<b>29</b> Permanently restricted net assets .....	684,170,193.	<b>29</b>	708,666,391.
	<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 .....	4,400,440,434.	<b>33</b>	4,187,673,496.
	<b>34</b> Total liabilities and net assets/fund balances .....	6,328,823,339.	<b>34</b>	6,229,558,895.

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	2,330,235,794.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,299,832,293.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	30,403,501.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	4,400,440,434.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-243,170,439.
<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>	4,187,673,496.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		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** (2015)

**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.

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

OMB No. 1545-0047

**2015**

Open to Public Inspection

<b>Name of the organization</b> UNIVERSITY OF PITTSBURGH	<b>Employer identification number</b> 25-0965591
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	249,606,525.	280,524,868.	262,013,513.	266,296,975.	255,591,396.	1314033277.
<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 .....	249,606,525.	280,524,868.	262,013,513.	266,296,975.	255,591,396.	1314033277.
<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.						1314033277.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>7</b> Amounts from line 4 .....	249,606,525.	280,524,868.	262,013,513.	266,296,975.	255,591,396.	1314033277.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	101,384,712.	92,439,625.	118,278,396.	97,949,398.	105,878,260.	515,930,391.
<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 VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						1829963668.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	10,682,705,997.
<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 2015 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	71.81 %
<b>15</b> Public support percentage from 2014 Schedule A, Part II, line 14 .....	<b>15</b>	73.36 %
<b>16a 33 1/3% support test - 2015.</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 checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2014.</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 - 2015.</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 VI 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 - 2014.</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 VI 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 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 2015 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2014 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2015.** 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 - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

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

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

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

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

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2015

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

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2015 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
<b>1</b> Distributable amount for 2015 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> From 2013			
<b>e</b> From 2014			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<b>i</b> Carryover from 2010 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2015 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b> Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7 Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b> Excess from 2013			
<b>d</b> Excess from 2014			
<b>e</b> Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015



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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

- ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
- ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

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

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

Name of organization <b>UNIVERSITY OF PITTSBURGH</b>	Employer identification number <b>25-0965591</b>
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**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) 2015

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10-05-15

**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>1a</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.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<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? .....														

Yes  No

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(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 on 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		1,300.
<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		694,712.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....	X		26,175.
<b>i</b> Other activities? .....	X		18,668.
<b>j</b> Total. Add lines 1c through 1i .....			740,855.
<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**

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

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'S 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, STAFF AND STUDENTS.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2015

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" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, Held at the End of the Tax Year. Rows include purpose(s) of conservation easements, total number and acreage, number of easements on historic structures, and monitoring details.

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

Table with 3 columns: Question, Revenue, Assets. Rows include reporting requirements for art collections and specific amounts for revenue and assets.

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

Schedule D (Form 990) 2015

532051 11-02-15

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

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

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

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,610,394,535.	3,514,182,929.	2,994,206,727.	2,635,486,831.	2,545,092,295.
b Contributions	146,232,000.	170,666,000.	72,154,000.	175,799,000.	150,002,000.
c Net investment earnings, gains, and losses	-92,997,000.	28,750,000.	544,698,000.	272,742,000.	45,818,000.
d Grants or scholarships	15,121,076.	13,682,152.	12,523,742.	11,943,973.	11,088,373.
e Other expenditures for facilities and programs	89,565,299.	77,593,656.	73,337,472.	68,389,130.	85,749,068.
f Administrative expenses	12,485,658.	11,928,586.	11,014,584.	9,488,001.	8,588,023.
g End of year balance	3,546,457,502.	3,610,394,535.	3,514,182,929.	2,994,206,727.	2,635,486,831.

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

- a Board designated or quasi-endowment  60.80 %
- b Permanent endowment  38.60 %
- c Temporarily restricted endowment  .60 %

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

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 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.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		61,546,324.		61,546,324.
b Buildings		3,048,431,578.	1,705,494,095.	1,342,937,483.
c Leasehold improvements				
d Equipment		750,760,744.	529,539,740.	221,221,004.
e Other		391,159,158.	242,799,177.	148,359,981.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,774,064,792.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other		
(A) PRIVATE INVESTMENTS	1,170,261,075.	END-OF-YEAR MARKET VALUE
(B) COMMINGLED INVESTMENTS IN PUBLIC SEC.	1,092,387,264.	END-OF-YEAR MARKET VALUE
(C) INSURANCE CSV & INSURANCE SURPLUS	1,917,119.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	2,264,565,458.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) REFUNDABLE US GOVERNMENT STUDENT LOANS	33,897,023.
(3) PRESENT VALUE OF SPLIT INTEREST AGREEMENTS	11,474,006.
(4) OTHER LIABILITIES	3,617,228.
(5) CONDITIONAL ASSET REMEDIATION OBLIGATION	37,345,560.
(6) INTEREST RATE SWAP AGREEMENTS	111,140,861.
(7) AMOUNTS HELD IN CUSTODY	10,738,374.
(8) LEASE CONSTRUCTION/CAPITAL LEASE OBLIGATION	10,840,179.
(9) BIG EAST EXIT FEE	1,000,000.
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	220,053,231.

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	1,886,149,497.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-243,170,439.
<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>	19,036,304.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-224,134,135.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,110,283,632.
<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>	43,539,912.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	176,412,250.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	219,952,162.
<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>	2,330,235,794.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	2,098,916,435.
<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>	19,036,304.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	19,036,304.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,079,880,131.
<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>	43,539,912.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	176,412,250.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	219,952,162.
<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>	2,299,832,293.

**Part XIII Supplemental Information.**

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

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

**Part XIII** Supplemental Information (continued)

PART V, LINE 4:

ENDOWMENT PURPOSE:

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 2016 OR 2015.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF COST OF SALES-AUX FROM EXPENSE	9,453,316.
RECLASS OF EXTERNAL TENANT RENTAL EXPS FROM EXPENSE	9,582,988.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	19,036,304.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TUITION DISCOUNTS TO FINANCIAL AID EXPENSE	176,412,250.
---	--------------

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF COST OF SALES-AUX TO REVENUE	9,453,316.
RECLASS OF EXTERNAL TENANT RENTAL EXPS TO REVENUE	9,582,988.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	19,036,304.

**Part XIII** Supplemental Information (continued)

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TUITION DISCOUNTS TO FINANCIAL AID EXPENSE 176,412,250.

Multiple horizontal lines for supplemental information.

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

Department of the Treasury  
Internal Revenue Service

**Schools**

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

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

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

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

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

		YES	NO
<b>1</b> 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? .....	1	X	
<b>2</b> 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? .....	2	X	
<b>3</b> 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 .....	3	X	
THE STATEMENT OF NONDISCRIMINATION AND LINKS TO RELATED POLICY AND PROCEDURES ARE PRINTED ANNUALLY IN THE UNIVERSITY TIMES AND PITT NEWS (AUGUST 2015).			
<b>4</b> Does the organization maintain the following?			
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? .....	4a	X	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	4b	X	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	4c	X	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? .....	4d	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
<b>5</b> Does the organization discriminate by race in any way with respect to:			
<b>a</b> Students' rights or privileges? .....	5a		X
<b>b</b> Admissions policies? .....	5b		X
<b>c</b> Employment of faculty or administrative staff? .....	5c		X
<b>d</b> Scholarships or other financial assistance? .....	5d		X
<b>e</b> Educational policies? .....	5e		X
<b>f</b> Use of facilities? .....	5f		X
<b>g</b> Athletic programs? .....	5g		X
<b>h</b> Other extracurricular activities? .....	5h		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
<b>6a</b> Does the organization receive any financial aid or assistance from a governmental agency? .....	6a	X	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? .....	6b		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
<b>7</b> 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 .....	7	X	

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

Schedule E (Form 990 or 990-EZ) (2015)

**Part II** **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.

Also provide any other additional information.

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" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

Name of the organization  UNIVERSITY OF PITTSBURGH	Employer identification number  25-0965591
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**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on 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	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	233,038.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	2,904,599.
EUROPE	1	2	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	10,638,007.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	248,222.
NORTH AMERICA	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	2,429,236.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	74,797.
SOUTH AMERICA	1	3	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	820,792.
SOUTH ASIA	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	402,605.
<b>3 a</b> Sub-total .....	2	5			17,751,296.
<b>b</b> Total from continuation sheets to Part I .....	0	0			40,742,849.
<b>c Totals</b> (add lines 3a and 3b) .....	2	5			58,494,145.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2015

**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	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	609,967.
EAST ASIA AND THE PACIFIC	0	0	INVESTMENTS.		14,346,680.
EUROPE	0	0	INVESTMENTS.		18,612,233.
NORTH AMERICA	0	0	INVESTMENTS.		7,173,969.
<b>Totals</b> .....					40,742,849.

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on 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.	722,398.	WIRE/CHECK	0.		
		EUROPE	RESEARCH SUBCONTRACT.	2,175,596.	WIRE/CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	RESEARCH SUBCONTRACT.	124,814.	WIRE/CHECK	0.		
		NORTH AMERICA	RESEARCH SUBCONTRACT.	332,037.	WIRE/CHECK	0.		
		SOUTH AMERICA	RESEARCH SUBCONTRACT.	128,247.	WIRE/CHECK	0.		
		SOUTH ASIA	RESEARCH SUBCONTRACT.	152,623.	WIRE/CHECK	0.		
		SUB-SAHARAN AFRICA	RESEARCH SUBCONTRACT	327,748.	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 ..... 27

3 Enter total number of other organizations or entities ..... 28

**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on 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	17	106,341.	WIRE/CHECK	0.		
RESEARCH SUBCONTRACT	EAST ASIA AND THE PACIFIC	1	18,000.	WIRE/CHECK	0.		
SCHOLARSHIPS	EUROPE	22	153,365.	TUITION REFUND	0.		
SCHOLARSHIPS	SOUTH AMERICA	20	86,624.	TUITION REFUND	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 separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)* .....  Yes  No
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* .....  Yes  No
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* .....  Yes  No
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* .....  Yes  No
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* .....  Yes  No

Schedule F (Form 990) 2015

**Part V Supplemental Information**

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

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.

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

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
GRIZZARD COMMUNICATIONS GROUP, INC. - 229 PEACHTREE	DIRECT MAIL SOLICITATION AND CONSULTING		X	125,891.	226,370.	-100,479.
GRENZEBACH GLIER & ASSOCIATES, INC. - 401 N.	CONSULTING-SEE PART IV		X	0.	284,285.	-284,285.
DAVID GEARHART - 3789 E. NATCHEZ TRACE, FAYETTEVILLE,	CONSULTING-SEE PART IV		X	0.	47,500.	-47,500.
RICHARD T. VAIL ASSOCIATES - 3390 RODMAN DRIVE,	CONSULTING-SEE PART IV		X	0.	7,598.	-7,598.
<b>Total</b>				125,891.	565,753.	-439,862.

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

AL, AK, AZ, AR, CO, CT, DE, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE  
NV, NH, NM, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VT, VA, WV, WY

**Part II Fundraising Events.** Complete if the organization answered "Yes" on 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 (add col. (a) through col. (c))
		CAMEOS OF CARING DINNER (event type)	GTHMG HILLMAN CANCER CENTER GALA (event type)	25 (total number)	
Revenue	<b>1</b> Gross receipts .....	491,400.	96,275.	689,292.	1,276,967.
	<b>2</b> Less: Contributions .....	401,578.	77,275.	563,779.	1,042,632.
	<b>3</b> Gross income (line 1 minus line 2) .....	89,822.	19,000.	125,513.	234,335.
Direct Expenses	<b>4</b> Cash prizes .....	0.		21,540.	21,540.
	<b>5</b> Noncash prizes .....	0.		10,033.	10,033.
	<b>6</b> Rent/facility costs .....	12,143.		31,872.	44,015.
	<b>7</b> Food and beverages .....	87,035.		131,504.	218,539.
	<b>8</b> Entertainment .....	3,000.		5,850.	8,850.
	<b>9</b> Other direct expenses .....	92,104.		47,068.	139,172.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				442,149.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				-207,814.	

**Part III Gaming.** Complete if the organization answered "Yes" on 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))
Revenue	<b>1</b> Gross revenue .....				
	<b>2</b> Cash prizes .....				
Direct Expenses	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
Revenue	<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. Subtract line 7 from line 1, column (d) .....				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
**a** Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
**b** If "No," explain: \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No  
**b** If "Yes," explain: \_\_\_\_\_

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

a The organization's facility	<b>13a</b>	%
b An outside facility	<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.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

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)

(I) NAME OF FUNDRAISER: DAVID GEARHART

(I) ADDRESS OF FUNDRAISER: 3789 E. NATCHEZ TRACE, FAYETTEVILLE, AR 72703

(I) NAME OF FUNDRAISER: RICHARD T. VAIL ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 3390 RODMAN DRIVE, CHARLOTTESVILLE, VA 22901

SCHEDULE G, PART I

THE UNIVERSITY RETAINS GRENZEBACH GLIER & ASSOCIATES (GG&A), DAVID GEARHART, AND RICHARD T. VAIL ASSOCIATES FOR FUNDRAISING CONSULTATION.

DUE TO THE NATURE OF THE SERVICES PROVIDED, IN THAT NO DIRECT SOLICITATIONS OR FUNDRAISING EVENTS ARE CONDUCTED BY THESE FUNDRAISING CONSULTANTS, 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" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

**2015**

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

<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
REGENTS OF THE UNIVERSITY OF MINNESOTA - 2221 UNIVERSITY AVE SE - MINNEAPOLIS, MN 55414	41-6007513	115	10,917,835.	0.			RESEARCH- SUBCONTRACT
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE PITTSBURGH, PA 15213	25-0969449	501(C)(3)	6,575,354.	0.			RESEARCH- SUBCONTRACT
HEALTH RESEARCH INC EMPIRE STATE PLAZA PO BOX 509 ALBANY, NY 12201	14-1402155	501(C)(3)	4,974,961.	0.			RESEARCH- SUBCONTRACT
AMERICAN COLLEGE OF RADIOLOGY 1891 PRESTON WHITE DR RESTON, VA 20191	36-2261602	501(C)(3)	4,142,241.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1111 FRANKLIN ST 10 FL - OAKLAND, CA 94607	94-3067788	501(C)(3)	2,864,642.	0.			RESEARCH- SUBCONTRACT
JOHNS HOPKINS UNIVERSITY 1101 EAST 33RD ST BALTIMORE, MD 21218	52-0595110	501(C)(3)	2,226,278.	0.			RESEARCH- SUBCONTRACT

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **285.**

**3** Enter total number of other organizations listed in the line 1 table **30.**

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

Schedule I (Form 990) (2015)

**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
YALE UNIVERSITY 47 COLLEGE ST STE 203 NEW HAVEN, CT 06520	06-0646973	501(C)(3)	1,808,684.	0.			RESEARCH- SUBCONTRACT
CONSORTIUM FOR PUBLIC EDUCATION 410 9TH ST MCKEESPORT, PA 15132	25-1533592	501(C)(3)	1,639,586.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MARYLAND PO BOX 41428 BALTIMORE, MD 21203-6248	52-6002033	115	1,605,104.	0.			RESEARCH- SUBCONTRACT
BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM - 700 REGENT ST, STE 301 - MADISON, WI 53715	39-6006492	115	1,602,726.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF WASHINGTON GERBERDING HALL G80 SEATTLE, WA 98195	91-6001537	115	1,418,261.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S STATE ST - ANN ARBOR, MI 48109	38-6006309	501(C)(3)	1,312,226.	0.			RESEARCH- SUBCONTRACT
PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 1033 MASSACHUSETTS AVE STE 3 - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	1,227,368.	0.			RESEARCH- SUBCONTRACT
WEST VIRGINIA UNIVERSITY RESEARCH CORP - PO BOX 6005 - MORGANTOWN, WV 26506	55-0665758	501(C)(3)	1,141,349.	0.			RESEARCH- SUBCONTRACT
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE CLEVELAND, OH 44106	34-1018992	501(C)(3)	1,010,681.	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
VANDERBILT UNIVERSITY MEDICAL CENTER - 2525 WEST END AVE STE 450 - NASHVILLE, TN 37203	35-2528741	501(C)(3)	978,274.	0.			RESEARCH- SUBCONTRACT
COMMUNITY HUMAN SERVICES CORP 374 LAWN ST PITTSBURGH, PA 15213	25-1219610	501(C)(3)	926,976.	0.			RESEARCH- SUBCONTRACT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT ST RM 305 - PHILADELPHIA, PA 19104-6205	23-1352685	501(C)(3)	913,003.	0.			RESEARCH- SUBCONTRACT
OHIO STATE UNIVERSITY 154 WEST 12TH AVE COLUMBUS, OH 43210	31-6025986	501(C)(3)	784,929.	0.			RESEARCH- SUBCONTRACT
ARIZONA STATE UNIVERSITY UNIVERSITY BOX 873503 TEMPE, AZ 85287	86-0196696	115	777,716.	0.			RESEARCH- SUBCONTRACT
NEW YORK UNIVERSITY 726 BROADWAY- 9TH FL NEW YORK, NY 10003	13-5562308	501(C)(3)	767,552.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL BOSTON 300 LONGWOOD AVE BOSTON, MA 02115	04-2774441	501(C)(3)	745,259.	0.			RESEARCH- SUBCONTRACT
PENNSYLVANIA STATE UNIVERSITY ONE OLD MAIN UNIVERSITY PARK, PA 16802	24-6000376	115	714,734.	0.			RESEARCH- SUBCONTRACT
GENEVA FOUNDATION 917 PACIFIC AVE STE 600 TACOMA, WA 98402	91-1593913	501(C)(3)	707,563.	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
UNIVERSITY OF MIAMI PO BOX 248106 CORAL GABLES, FL 33101-5405	59-0624458	501(C)(3)	629,418.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF FLORIDA PO BOX 115500 GAINESVILLE, FL 32611	59-6002052	115	605,483.	0.			RESEARCH- SUBCONTRACT
NORTHWESTERN UNIVERSITY 619 CLARK ST RM 217 EVANSTON, IL 60208	36-2167817	501(C)(3)	603,084.	0.			RESEARCH- SUBCONTRACT
TUFTS UNIVERSITY 169 HOLLAND ST SOMERVILLE, MA 02144	04-2103634	501(C)(3)	572,704.	0.			RESEARCH- SUBCONTRACT
VIRGINIA COMMONWEALTH UNIVERSITY 800 EAST LEHIGH ST RICHMOND, VA 23219	54-6001758	115	556,728.	0.			RESEARCH- SUBCONTRACT
TEMPLE UNIVERSITY 1805 NORTH BROAD ST PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	554,214.	0.			RESEARCH- SUBCONTRACT
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST BOSTON, MA 02114	04-1564655	501(C)(3)	515,603.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF VIRGINIA BOX 4001953 CHARLOTTESVILLE, VA 22904	54-6001796	115	513,239.	0.			RESEARCH- SUBCONTRACT
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK - 615 WEST 131ST ST MC 8741 - NEW YORK, NY 10027	13-5598093	501(C)(3)	510,632.	0.			RESEARCH- SUBCONTRACT

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FOCUS ON RENEWAL 701 CHARTIERS AVE MCKEES ROCKS, PA 15136	23-7181440	501(C)(3)	470,776.	0.			RESEARCH- SUBCONTRACT
MAGEE-WOMENS RESEARCH INSTITUTE AND FOUNDATION - 3339 WARD ST - PITTSBURGH, PA 15213	25-1462312	501(C)(3)	465,586.	0.			RESEARCH- SUBCONTRACT
BROWN UNIVERSITY 164 ANGELL ST BOX 1877 PROVIDENCE, RI 02912	05-0258809	501(C)(3)	460,180.	0.			RESEARCH- SUBCONTRACT
UPMC 600 GRANT ST FL 58 PITTSBURGH, PA 15219	25-1423657	501(C)(3)	455,268.	0.			RESEARCH- SUBCONTRACT
OHIO STATE UNIVERSITY RESEARCH FOUNDATION - 1960 KENNY RD - COLUMBUS, OH 43210	31-6401599	501(C)(3)	455,255.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF PUERTO RICO PO BOX 365067 SAN JUAN, PR 00936	66-0433762	115	454,604.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF DELAWARE 83 E. MAIN STREET, 3RD FL NEWARK, DE 19716	51-6000297	501(C)(3)	452,068.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TENNESSEE 201 ANDY HOLT TOWER KNOXVILLE, TN 37996	62-6001636	115	432,322.	0.			RESEARCH- SUBCONTRACT
ICAHN SCHOOL OF MEDICINE AT MT SINAI - ONE GUSTAVE LEVY PLACE - NEW YORK, NY 10029	13-6171197	501(C)(3)	424,153.	0.			RESEARCH- SUBCONTRACT

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REGENTS OF THE UNIVERSITY OF COLORADO - 1800 N GRANT ST - DENVER, CO 80203	84-6000555	501(C)(3)	412,519.	0.			RESEARCH- SUBCONTRACT
TURTLE CREEK VALLEY MH/MR INC 723 BRADDOCK AVE BRADDOCK, PA 15104	25-1250510	501(C)(3)	403,089.	0.			RESEARCH- SUBCONTRACT
EMORY UNIVERSITY 201 DOWMAN DR ATLANTA, GA 30322	58-0566256	501(C)(3)	394,195.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CALIFORNIA AT SAN DIEGO - 9500 GILMAN DR - SAN DIEGO, CA 92093	95-6006144	501(C)(3)	393,221.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF IOWA 201 GILMORE HALL IOWA CITY, IA 52242	42-6004813	115	388,351.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ILLINOIS 506 S WRIGHT STREET URBANA, IL 61801	37-6000511	501(C)(3)	371,605.	0.			RESEARCH- SUBCONTRACT
INDIANA UNIVERSITY 400 E 7TH ST RM 501 BLOOMINGTON, IN 47405	35-6001673	115	365,605.	0.			RESEARCH- SUBCONTRACT
STANFORD UNIVERSITY 3145 PORTER DR PALO ALTO, CA 94304	94-1156365	501(C)(3)	364,893.	0.			RESEARCH- SUBCONTRACT
VETERANS RESEARCH FOUNDATION OF PITTSBURGH - 7180 HIGHLAND DR - PITTSBURGH, PA 15206	25-1666090	501(C)(3)	362,036.	0.			RESEARCH- SUBCONTRACT

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RIPPLE LLC 2056 SOUTH 1100 EAST SALT LAKE CITY, UT 84106	20-0944755	N/A	357,467.	0.			RESEARCH- SUBCONTRACT
VANDERBILT UNIVERSITY VU STATION B BOX 356310 NASHVILLE, TN 37235	62-0476822	501(C)(3)	350,464.	0.			RESEARCH- SUBCONTRACT
ALBERT EINSTEIN COLLEGE OF MEDICINE - 500 WEST 185TH ST - NEW YORK, NY 10033	23-7075620	501(C)(3)	349,806.	0.			RESEARCH- SUBCONTRACT
REGENTS UNIVERSITY OF CALIFORNIA LOS ANGELES - 10920 WILSHIRE BLVD STE 620 - LOS ANGELES, CA 90024	95-6006143	501(C)(3)	347,239.	0.			RESEARCH- SUBCONTRACT
WASHINGTON UNIVERSITY IN ST. LOUIS 7425 FORSYTH WEST CAMPUS CLAYTON, MO 63105	43-0653611	501(C)(3)	344,721.	0.			RESEARCH- SUBCONTRACT
RUSH UNIVERSITY MEDICAL CENTER 1700 W VAN BUREN RM 150 CHICAGO, IL 60612	36-2174823	501(C)(3)	342,371.	0.			RESEARCH- SUBCONTRACT
GE GLOBAL RESEARCH 1 RESEARCH CIRCLE NISKAYUNA, NY 12309	14-0689340	N/A	339,773.	0.			RESEARCH- SUBCONTRACT
IHC HEALTH SERVICES INC 36 S STATE ST STE 2200 SALT LAKE CITY, UT 84111	94-2854057	501(C)(3)	333,612.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CALIFORNIA SAN FRANCISCO - 220 MONTGOMERY ST, 5TH FL - SAN FRANCISCO, CA 94104	94-6036493	501(C)(3)	329,046.	0.			RESEARCH- SUBCONTRACT

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UNIVERSITY OF UTAH 540 ARAPEEN DRIVE, STE 250 SALT LAKE CITY, UT 84108	87-6000525	501(C)(3)	328,147.	0.			RESEARCH- SUBCONTRACT
WAKE FOREST UNIVERSITY 1834 WAKE FOREST RD WINSTON-SALEM, NC 27106	56-0532138	501(C)(3)	323,449.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MASSACHUSETTS 225 FRANKLIN ST BOSTON, MA 02110	04-3167352	115	316,849.	0.			RESEARCH- SUBCONTRACT
WOODS HOLE OCEANOGRAPHIC INSTITUTION - 569 WOODS HOLE RD MS #14 - WOODS HOLE, MA 02543	04-2105850	501(C)(3)	314,635.	0.			RESEARCH- SUBCONTRACT
REHABILITATION INSTITUTE OF CHICAGO - 345 E SUPERIOR ST - CHICAGO, IL 60611	36-2256036	501(C)(3)	313,011.	0.			RESEARCH- SUBCONTRACT
IRETA 425 SIXTH AVE PITTSBURGH, PA 15219	25-1857820	501(C)(3)	306,003.	0.			RESEARCH- SUBCONTRACT
NORTHERN CALIFORNIA INSTITUTE FOR RESEARCH AND EDUCATION - 4150 CLEMENT ST - SAN FRANCISCO, CA 94121	94-3084159	501(C)(3)	288,651.	0.			RESEARCH- SUBCONTRACT
BANYAN BIOMARKERS INC 12085 RESEARCH DR ALACHUA, FL 32615	20-1449566	N/A	273,455.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - 104 AIRPORT DR - CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	272,157.	0.			RESEARCH- SUBCONTRACT

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MAYO CLINIC 200 FIRST ST SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	258,271.	0.			RESEARCH- SUBCONTRACT
CHILDRENS RESEARCH INSTITUTE 9000 W WISCONSIN AVE PO BOX 1997 MILWAUKEE, WI 53201	20-2180646	N/A	248,102.	0.			RESEARCH- SUBCONTRACT
INOVA HEALTH CARE SERVICES 2832 JUNIPER ST STE 104 FAIRFAX, VA 22031	54-0620889	501(C)(3)	246,633.	0.			RESEARCH- SUBCONTRACT
HEALTH FEDERATION OF PHILADELPHIA 1211 CHESTNUT ST STE 801 PHILADELPHIA, PA 19107	23-2244355	501(C)(3)	244,599.	0.			RESEARCH- SUBCONTRACT
HOWARD UNIVERSITY 576 W ST NW WASHINGTON, DC 20059	53-0204707	501(C)(3)	240,944.	0.			RESEARCH- SUBCONTRACT
CORNELL UNIVERSITY 341 PINE ST ITHACA, NY 14850	15-0532082	501(C)(3)	236,316.	0.			RESEARCH- SUBCONTRACT
CHRISTIANA CARE HEALTH SERVICES PO BOX 2653 WILMINGTON, DE 19805	51-0103684	501(C)(3)	232,183.	0.			RESEARCH- SUBCONTRACT
BOSTON MEDICAL CENTER 1 BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118	04-3314093	501(C)(3)	229,568.	0.			RESEARCH- SUBCONTRACT
OREGON HEALTH & SCIENCE UNIVERSITY FOUNDATION - 1121 SW SALMON ST - PORTLAND, OR 97205	23-7083114	501(C)(3)	226,895.	0.			RESEARCH- SUBCONTRACT

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WAKE FOREST UNIVERSITY HEALTH SCIENCES - MEDICAL CENTER BLVD - WINSTON-SALEM, NC 27157	22-3849199	501(C)(3)	225,189.	0.			RESEARCH- SUBCONTRACT
BETH ISRAEL DEACONESS MEDICAL CENTER - 300 BROOKLINE AVE - BOSTON, MA 02215	04-2103881	501(C)(3)	221,864.	0.			RESEARCH- SUBCONTRACT
FLORIDA INTERNATIONAL UNIVERSITY GREEN LIBRARY RM 273 MIAMI, FL 33199	65-0177616	115	221,029.	0.			RESEARCH- SUBCONTRACT
BRIGHAM AND WOMEN'S HOSPITAL INC 75 FRANCIS ST BOSTON, MA 02115	04-2312909	501(C)(3)	216,592.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTHERN CALIFORNIA 837 W. DOWNEY WAY RM 315 LOS ANGELES, CA 90089	95-1642394	501(C)(3)	212,459.	0.			RESEARCH- SUBCONTRACT
THE NEW SCHOOL 79 FIFTH AVE, 16TH FL NEW YORK, NY 10003	13-3297197	501(C)(3)	203,841.	0.			RESEARCH- SUBCONTRACT
NATIONAL JEWISH HEALTH 1400 JACKSON ST DENVER, CO 80206	74-2044647	501(C)(3)	203,666.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MISSOURI COLUMBIA 15 JESSE HALL COLUMBIA, MO 65211	43-6003859	115	197,912.	0.			RESEARCH- SUBCONTRACT
UT HEALTH SCIENCE CENTER SAN ANTONIO - 7703 FLOYD CURL DR MC 7835 - SAN ANTONIO, TX 78229	74-1586031	115	196,556.	0.			RESEARCH- SUBCONTRACT

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TREASURER OF VIRGINIA TECH 301 BURRUSS HALL MAIL CODE 0244 BLACKSBURG, VA 24061	54-6001805	115	191,921.	0.			RESEARCH- SUBCONTRACT
TEXAS TECH UNIVERSITY BOX 41023 LUBBOCK, TX 79409-1023	75-6002622	170(B)(1)(A)(V)	191,224.	0.			RESEARCH- SUBCONTRACT
PPD DEVELOPMENT LP 26361 NETWORK PLACE CHICAGO, IL 60693-1263	74-2325267	N/A	191,016.	0.			RESEARCH- SUBCONTRACT
ALLEGHENY-SINGER RESEARCH INSTITUTE - TWO ALLEGHENY CENTER - PITTSBURGH, PA 15212	25-1320493	501(C)(3)	184,974.	0.			RESEARCH- SUBCONTRACT
REVIVICOR INC 1700 KRAFT DR STE 2400 BLACKSBURG, VA 24060	81-0604263	N/A	184,298.	0.			RESEARCH- SUBCONTRACT
TRUSTEES OF PRINCETON UNIVERSITY WASHINGTON ROAD PRINCETON, NJ 08544	21-0634501	501(C)(3)	183,462.	0.			RESEARCH- SUBCONTRACT
FRED HUTCHINSON CANCER RESEARCH CENTER - 1100 FAIRVIEW AVE NORTH - SEATTLE, WA 98109	23-7156071	501(C)(3)	180,236.	0.			RESEARCH- SUBCONTRACT
STATE OF TENNESSEE 710 JAMES ROBERTSON PKWY NASHVILLE, TN 37423	62-6001445	115	179,897.	0.			RESEARCH- SUBCONTRACT
RESEARCH INSTITUTE AT NATIONWIDE CHILDREN'S HOSPITAL - PO BOX 715245 - COLUMBUS, OH 43271	31-6056230	501(C)(3)	172,395.	0.			RESEARCH- SUBCONTRACT

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WISTAR INSTITUTE OF ANATOMY & BIOLOGY - 3601 SPRUCE ST - PHILADELPHIA, PA 19104	23-6434390	501(C)(3)	172,270.	0.			RESEARCH- SUBCONTRACT
DREXEL UNIVERSITY 3201 ARCH ST NO. 420 PHILADELPHIA, PA 19104-2875	23-1352630	501(C)(3)	167,656.	0.			RESEARCH- SUBCONTRACT
DANA-FARBER CANCER INSTITUTE 44 BINNER ST STE BP600 BOSTON, MA 02115	04-2263040	501(C)(3)	166,019.	0.			RESEARCH- SUBCONTRACT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVE NE 49-3131 - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	163,926.	0.			RESEARCH- SUBCONTRACT
WAYNE STATE UNIVERSITY 5700 CASS AVE DETROIT, MI 48202	38-3555142	501(C)(3)	146,893.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER - 5323 HARRY HINES BLVD. - DALLAS, TX 75390	75-6002868	115	146,475.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION - 520 STEVENSON HALL - LOUISVILLE, KY 40292	61-1029626	501(C)(3)	144,083.	0.			RESEARCH- SUBCONTRACT
RAND CORPORATION 1776 MAIN ST SANTA MONICA, CA 90407	95-1958142	N/A	142,371.	0.			RESEARCH- SUBCONTRACT
DUKE UNIVERSITY 324 BLACKWELL ST DURHAM, NC 27708	56-0532129	501(C)(3)	138,661.	0.			RESEARCH- SUBCONTRACT

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MEDICAL UNIVERSITY OF SOUTH CAROLINA - 17 ASHLEY AVE - CHARLESTON, SC 29403	57-6000722	115	138,123.	0.			RESEARCH- SUBCONTRACT
GEORGIA REGENTS RESEARCH INSTITUTE INC - 1120 15TH ST - AUGUSTA, GA 30912	58-1418202	501(C)(3)	136,716.	0.			RESEARCH- SUBCONTRACT
COMMONWEALTH OF VIRGINIA 800 E BROAD ST RICHMOND, VA 23219	54-1056975	115	136,423.	0.			RESEARCH- SUBCONTRACT
BIOQUEST CURRICULUM CONSORTIUM PO BOX 45032 MADISON, WI 53744	45-3644991	501(C)(3)	136,236.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ARIZONA PO BOX 3607 TUCSON, AZ 85722-3607	74-2652689	115	134,097.	0.			RESEARCH- SUBCONTRACT
PONCE SCHOOL OF MEDICINE PO BOX 7004 PONCE, PR 007327004	66-0379122	501(C)(3)	133,316.	0.			RESEARCH- SUBCONTRACT
PSYCHOLOGY SOFTWARE TOOLS INC 2050 ARDMORE BLVD STE 200 PITTSBURGH, PA 15221	25-1551170	N/A	133,184.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF VERMONT 85 SO. PROSPECT ST BURLINGTON, VT 05405	03-0179440	501(C)(3)	129,816.	0.			RESEARCH- SUBCONTRACT
ANN & ROBERT H LURIE'S CHILDREN'S HOSPITAL - 225 EAST CHICAGO AVE BOX #205 - CHICAGO, IL 60611	36-2170833	501(C)(3)	125,867.	0.			RESEARCH- SUBCONTRACT

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CHILDREN'S HOSPITAL OF PHILADELPHIA - 3615 CIVIC CENTER BLVD - PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	125,490.	0.			RESEARCH- SUBCONTRACT
GEISINGER CLINIC N ACADEMY AVE DANVILLE, PA 17822	23-6291113	501(C)(3)	123,939.	0.			RESEARCH- SUBCONTRACT
RUTGERS, STATE UNIVERSITY OF NEW JERSEY - 65 DAVIDSON ROAD- RM 317 - PISCATAWAY, NJ 08854	22-6001086	501(C)(3)	123,266.	0.			RESEARCH- SUBCONTRACT
THE UNIVERSITY OF TEXAS-MD ANDERSON CANCER CENTER - PO BOX 4930 - HOUSTON, TX 77210-4390	74-6001118	115	121,711.	0.			RESEARCH- SUBCONTRACT
BOARD OF TRUSTEES OF THE UNIVERSITY OF ALABAMA AT BIRMINGHAM - 1530 3RD AVE SOUTH - BIRMINGHAM, AL 35294	63-6005396	501(C)(3)	117,728.	0.			RESEARCH- SUBCONTRACT
ALBERT EINSTEIN HEALTHCARE NETWORK 5501 OLD YORK ROAD PHILADELPHIA, PA 19141	23-2290323	501(C)(3)	116,445.	0.			RESEARCH- SUBCONTRACT
GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR FAIRFAX, VA 22030	54-0836354	115	115,136.	0.			RESEARCH- SUBCONTRACT
CENTER FOR ORGAN RECOVERY & EDUCATION - 204 SIGMA DR - PITTSBURGH, PA 15238	25-1332885	501(C)(3)	111,934.	0.			RESEARCH- SUBCONTRACT
NYU SCHOOL OF MEDICINE PO BOX 415026 BOSTON, MA 02241	13-5562308	501(C)(3)	111,853.	0.			RESEARCH- SUBCONTRACT

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CHAPIN HALL CENTER FOR CHILDREN 131 EAST 60TH ST CHICAGO, IL 60637	36-2167012	501(C)(3)	110,245.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVE CINCINNATI, OH 45229	31-0833936	501(C)(3)	177,522.	0.			RESEARCH- SUBCONTRACT
SALK INSTITUTE FOR BIOLOGICAL STUDIES - 10010 N TORREY PINES ROAD - LA JOLLA, CA 92037-1099	95-2160097	501(C)(3)	108,507.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CONNECTICUT 438 WHITNEY ROAD EXT. UNIT 1133 STORRS, CT 06269	06-0772160	115	107,380.	0.			RESEARCH- SUBCONTRACT
RESEARCH FOUNDATION FOR STATE UNIVERSITY OF NEW YORK - PO BOX 9 - ALBANY, NY 12201	14-1368361	501(C)(3)	107,196.	0.			RESEARCH- SUBCONTRACT
MICHIGAN STATE UNIVERSITY 301 ADMIN BLDG. EAST LANSING, MI 48824	38-6005984	501(C)(3)	106,906.	0.			RESEARCH- SUBCONTRACT
CENTER FOR BLACK EQUITY INC 8206 VERNON ST NW STE 200 WASHINGTON, DC 20009	20-0302937	501(C)(3)	100,116.	0.			RESEARCH- SUBCONTRACT
HIRAM G ANDREWS CENTER 727 GOUCHER ST JOHNSTOWN, PA 15905		N/A	100,000.	0.			RESEARCH- SUBCONTRACT
ITAMCO 6100 MICHIGAN ROAD PLYMOUTH, IN 46563	35-0987380	N/A	98,371.	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
SCRIPPS RESEARCH INSTITUTE 10550 N TORREY PINES RD LA JOLLA, CA 92037	33-0435954	501(C)(3)	97,738.	0.			RESEARCH- SUBCONTRACT
HOMWOOD CHILDREN'S VILLAGE 801 N. HOMWOOD AVE PITTSBURGH, PA 15208	27-1885583	501(C)(3)	96,058.	0.			RESEARCH- SUBCONTRACT
GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION INC - PO BOX 3999 - ATLANTA, GA 30302	58-1845423	501(C)(3)	94,083.	0.			RESEARCH- SUBCONTRACT
RADFORD UNIVERSITY PO BOX 6901 RADFORD, VA 24142	54-6001789	115	93,097.	0.			RESEARCH- SUBCONTRACT
MEHARRY MEDICAL COLLEGE 1005 DR. D.B. TODD JR. BLVD NASHVILLE, TN 37208	62-0488046	501(C)(3)	92,784.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000642	115	92,189.	0.			RESEARCH- SUBCONTRACT
UGA RESEARCH FOUNDATION INC 424 BROAD ST ATHENS, GA 30602	58-6001998	115	91,120.	0.			RESEARCH- SUBCONTRACT
ROSALIND FRANKLIN UNIVERSITY OF MEDICINE & SCIENCE - 3333 GREEN BAY RD - NORTH CHICAGO, IL 60064	36-2181973	501(C)(3)	89,460.	0.			RESEARCH- SUBCONTRACT
NORTH CAROLINA STATE UNIVERSITY 2701 SULLIVAN DR, STE 240 RALEIGH, NC 27695	56-6000756	115	84,879.	0.			RESEARCH- SUBCONTRACT

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KESSLER FOUNDATION 300 EXECUTIVE DR STE 150 WEST ORANGE, NJ 07052	31-1562134	501(C)(3)	82,404.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CINCINNATI 2600 CLIFTON AVE CINCINNATI, OH 45221	31-6000989	115	81,519.	0.			RESEARCH- SUBCONTRACT
SOUTHWEST PENNSYLVANIA AREA HEALTH EDUCATION CENTER INC - LEXINGTON TECHNOLOGY PARK 400 N LEXINGTON AVE - PITTSBURGH, PA 15208	25-1791450	501(C)(3)	79,356.	0.			RESEARCH- SUBCONTRACT
FENWAY COMMUNITY HEALTH CENTER INC 1340 BOYLSTON ST BOSTON, MA 02215	04-2510564	501(C)(3)	77,312.	0.			RESEARCH- SUBCONTRACT
LOS ALAMOS NATIONAL LABORATORY PO BOX 1663, MAIL STOP P245 LOS ALAMOS, NM 87545	85-6004458	N/A	75,539.	0.			RESEARCH- SUBCONTRACT
BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA NO T100 HOUSTON, TX 77030	74-1613878	501(C)(3)	75,359.	0.			RESEARCH- SUBCONTRACT
UPMC COMMUNITY PROVIDER SERVICES 200 LOTHROP ST PITTSBURGH, PA 15213	25-1804746	501(C)(3)	75,254.	0.			RESEARCH- SUBCONTRACT
THOMAS JEFFERSON UNIVERSITY 1020 WALNUT ST PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	74,098.	0.			RESEARCH- SUBCONTRACT
ALCOA INC 201 ISABELLA ST PITTSBURGH, PA 15212	25-0317820	N/A	72,631.	0.			RESEARCH- SUBCONTRACT

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REGENTS OF THE UNIVERSITY OF CALIFORNIA AT IRVINE - 1400 BIOLOGICAL SCIENCES 3 - IRVINE, CA 92697	95-2226406	501(C)(3)	70,855.	0.			RESEARCH- SUBCONTRACT
URBAN LEAGUE OF GREATER PITTSBURGH INC - 610 WOOD ST - PITTSBURGH, PA 15222	25-0965592	501(C)(3)	69,058.	0.			RESEARCH- SUBCONTRACT
HUGO W MOSER RESEARCH INSTITUTE AT KENNEDY KRIEGER INC - 707 N BROADWAY - BALTIMORE, MD 21205	52-1524967	501(C)(3)	67,421.	0.			RESEARCH- SUBCONTRACT
INSTITUTE FOR PUBLIC HEALTH INNOVATION - 1301 CONNECTICUT AVE NW STE 200 - WASHINGTON, DC 20036	46-3039129	501(C)(3)	65,898.	0.			RESEARCH- SUBCONTRACT
GEORGIA TECH RESEARCH CORP 550 TENTH ST NW ATLANTA, GA 30332	58-0603146	501(C)(3)	64,255.	0.			RESEARCH- SUBCONTRACT
PARKINSON'S INSTITUTE AND CLINICAL CENTER - 1170 MORSE AVE - SUNNYVALE, CA 94089	94-3061594	501(C)(3)	62,500.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ALASKA 3700 SHARON GAGNON LANE ANCHORAGE, AK 99508	92-6000147	501(C)(3)	62,212.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEBRASKA 3835 HOLDREGE ST LINCOLN, NE 68503	47-0049123	501(C)(3)	61,306.	0.			RESEARCH- SUBCONTRACT
FOXGLOVE INTERNET SOLUTIONS 958 N 705 ROAD LAWRENCE, KS 66047		N/A	57,071.	0.			RESEARCH- SUBCONTRACT

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RHODE ISLAND HOSPITAL 593 EDDY ST PROVIDENCE, RI 02903	05-0258954	501(C)(3)	54,454.	0.			RESEARCH- SUBCONTRACT
CAROLINAS HEALTHCARE SYSTEM 501 BILLINGSLEY ROAD CHARLOTTE, NC 28211	56-0529945	N/A	53,775.	0.			RESEARCH- SUBCONTRACT
MAINE MEDICAL CENTER 22 BRAMHALL ST PORTLAND, ME 04102	01-0238552	501(C)(3)	53,511.	0.			RESEARCH- SUBCONTRACT
SPARTON DESIGN PPT 160 OFFICE PARK WAY PITTSFORD, NY 14534	16-1170707	N/A	49,995.	0.			RESEARCH- SUBCONTRACT
MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK ROAD MILWAUKEE, WI 53226	39-0806261	501(C)(3)	49,722.	0.			RESEARCH- SUBCONTRACT
BUCKNELL UNIVERSITY 112 MARTS HALL LEWISBURG, PA 17837	24-0772407	501(C)(3)	49,423.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES - 4301 WEST MARKHAM - LITTLE ROCK, AR 72205	71-6046242	115	49,118.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF CALIFORNIA, DAVIS - ONE SHIELDS AVE - DAVIS, CA 95616	94-6036494	501(C)(3)	48,732.	0.			RESEARCH- SUBCONTRACT
PROMUNDO-US 1367 CONNECTICUT AVE NW STE 310 WASHINGTON, DC 20036	26-1931968	501(C)(3)	48,604.	0.			RESEARCH- SUBCONTRACT

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DUQUESNE UNIVERSITY OF THE HOLY SPIRIT - 600 FORBES AVE - PITTSBURGH, PA 15219	25-1035663	501(C)(3)	46,985.	0.			RESEARCH- SUBCONTRACT
KENTUCKY PEDIATRIC/ADULT RESEARCH 201 SOUTH 5TH ST BARDSTOWN, KY 40004	61-1206931	N/A	46,962.	0.			RESEARCH- SUBCONTRACT
J CRAIG VENTER INSTITUTE INC 9712 MEDICAL CENTER DR ROCKVILLE, MD 20850	52-1842938	501(C)(3)	46,283.	0.			RESEARCH- SUBCONTRACT
CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD LOS ANGELES, CA 90048	95-1644600	501(C)(3)	44,620.	0.			RESEARCH- SUBCONTRACT
BOSTON VA RESEARCH INSTITUTE 150 S HUNTINGTON AVE BOSTON, MA 02130	04-3081524	501(C)(3)	44,234.	0.			RESEARCH- SUBCONTRACT
PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION - 11720 BELTSVILLE DR - CALVERTON, MD 20705	94-2243283	501(C)(3)	42,861.	0.			RESEARCH- SUBCONTRACT
FAMILY HEALTH INTERNATIONAL 360 359 BLACKWELL ST DURHAM, NC 27701	23-7413005	501(C)(3)	39,454.	0.			RESEARCH- SUBCONTRACT
ESSENTIA INSTITUTE OF RURAL HEALTH 502 E 2ND ST DULUTH, MN 55805	27-1291124	501(C)(3)	39,100.	0.			RESEARCH- SUBCONTRACT
USDA 2301 NORTH CAMERON ST HARRISBURG, PA 17110	72-0564834	115	37,345.	0.			RESEARCH- SUBCONTRACT

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CONFOMETRX INC 840 CHIMALUS DR PALO ALTO, CA 94306	35-2169878	N/A	35,000.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MINNESOTA PHYSICIANS OUTREACH LABS - 720 WASHINGTON AVE SE STE 200 - MINNEAPOLIS, MN 55414	41-1843943	501(C)(3)	33,714.	0.			RESEARCH- SUBCONTRACT
SPAULDING REHABILITATION HOSPITAL 311 SERVICE ROAD EAST SANDWICH, MA 02537	04-3071419	501(C)(3)	33,540.	0.			RESEARCH- SUBCONTRACT
MISSISSIPPI STATE UNIVERSITY PO DRAWER 5227 MISSISSIPPI STATE, MS 39762	64-6000819	501(C)(3)	33,081.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTH ALABAMA HEALTH SERVICES FOUNDATION - PO BOX 8466 - MOBILE, AL 36689	63-0725648	501(C)(3)	32,838.	0.			RESEARCH- SUBCONTRACT
ST JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3)	32,629.	0.			RESEARCH- SUBCONTRACT
UNITED TECHNOLOGIES RESEARCH CENTER - 400 SILVER LANE - EAST HARTFORD, CT 06118	06-0570975	N/A	32,615.	0.			RESEARCH- SUBCONTRACT
NATIONAL BUREAU OF ECONOMIC RESEARCH INC - 1050 MASSACHUSETTS AVE - CAMBRIDGE, MA 02138	13-1641075	N/A	31,145.	0.			RESEARCH- SUBCONTRACT
IOWA STATE UNIVERSITY COLLEGE OF VETERINARY MEDICINE - 1600 SOUTH 16TH ST - AMES, IA 50011	42-6004224	501(C)(3)	29,897.	0.			RESEARCH- SUBCONTRACT

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RESEARCH FOUNDATION FOR MENTAL HYGIENE INC. - 150 BROADWAY NO 301 - MENANDS, NY 12204	14-1410842	501(C)(3)	29,706.	0.			RESEARCH- SUBCONTRACT
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 MISC RC SEATTLE, WA 98145	91-0564748	501(C)(3)	29,579.	0.			RESEARCH- SUBCONTRACT
HOPE COLLEGE PO BOX 9000 HOLLAND, MI 49422	38-1381271	501(C)(3)	28,280.	0.			RESEARCH- SUBCONTRACT
3-C INSTITUTE FOR SOCIAL DEVELOPMENT INC - 21901 N HARRISON AVE STE 200 - CARY, NC 27513	56-2237463	N/A	27,282.	0.			RESEARCH- SUBCONTRACT
CENTER FOR VICTIMS 410 NINTH ST MCKEESPORT, PA 15132	25-1307309	501(C)(3)	26,905.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS MEDICAL BRANCH OFFICE OF SPONSORED PROGRAMS PO BOX 4786-750 - HOUSTON, TX 77210-4786	74-6000949	115	25,970.	0.			RESEARCH- SUBCONTRACT
AT SCIENCES LLC 160 N CRAIG ST STE 117 PITTSBURGH, PA 15213	11-3655805	N/A	25,949.	0.			RESEARCH- SUBCONTRACT
FUTURES WITHOUT VIOLENCE 100 MONTGOMERY ST SAN FRANCISCO, CA 94129	94-3110973	501(C)(3)	25,797.	0.			RESEARCH- SUBCONTRACT
FEINSTEIN INSTITUTE FOR MEDICAL RESEARCH - 972 BRUSH HOLLOW ROAD 5TH FL - WESTBURY, NY 11590	11-2673595	501(C)(3)	25,612.	0.			RESEARCH- SUBCONTRACT

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VISITOR STUDIES ASSN 2885 SANFORD AVE SW #18100 GRANDVILLE, MI 49418	58-2015580	501(C)(3)	25,438.	0.			RESEARCH- SUBCONTRACT
PORTLAND STATE UNIVERSITY PO BOX 6364 PORTLAND, OR 97228	36-4776757	115	25,009.	0.			RESEARCH- SUBCONTRACT
BENAROYA RESEARCH INSTITUTE AT VIRGINIA MASON - 1201 NINTH AVE - SEATTLE, WA 98101	91-0653422	501(C)(3)	24,996.	0.			RESEARCH- SUBCONTRACT
INDIANA COUNTY OFFICE OF PLANNING & DEVELOPMENT - 801 WATER ST - INDIANA, PA 15701	25-6001035	115	24,241.	0.			RESEARCH- SUBCONTRACT
ALLEGHENY COLLEGE 520 NORTH MAIN ST MEADVILLE, PA 16335	25-0965212	501(C)(3)	23,417.	0.			RESEARCH- SUBCONTRACT
OPEN MINDS LLC 390 ALTERMOOR DR NATRONA HEIGHTS, PA 15065	94-3445558	N/A	23,155.	0.			RESEARCH- SUBCONTRACT
NORWALK HOSPITAL ASSOCIATION 14 RESEARCH DR BETHEL, CT 06801	06-6068853	501(C)(3)	22,600.	0.			RESEARCH- SUBCONTRACT
BLAIR COUNTY PLANNING COMMISSION 423 ALLEGHENY ST STE 046 HOLLIDAYSBURG, PA 16648	23-6005976	115	21,728.	0.			RESEARCH- SUBCONTRACT
AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES - 1000 THOMAS JEFFERSON ST NW - WASHINGTON, DC 20007	25-0965219	501(C)(3)	21,307.	0.			RESEARCH- SUBCONTRACT

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LIBEROS LLC 7083 HOLLYWOOD BLVD LOS ANGELES, CA 90028	47-3285398	N/A	20,984.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NOTRE DAME DU LAC 724 GRACE HALL NOTRE DAME, IN 46556	35-0868188	501(C)(3)	20,967.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF OKLAHOMA 100 N UNIVERSITY DR EDMOND, OK 73034	73-6017987	115	20,659.	0.			RESEARCH- SUBCONTRACT
ADNET SYSTEMS INC 6720 B ROCKLEDGE DR STE 504 BETHESDA, MD 20817	52-1731575	N/A	19,907.	0.			RESEARCH- SUBCONTRACT
LA ROCHE COLLEGE 9000 BABCOCK BLVD PITTSBURGH, PA 15237	25-1125048	501(C)(3)	19,734.	0.			RESEARCH- SUBCONTRACT
MILTON S HERSHEY MEDICAL CENTER PO BOX 855 HERSHEY, PA 17033	25-1854772	501(C)(3)	19,590.	0.			RESEARCH- SUBCONTRACT
PENNSYLVANIA LIBRARY ASSN 220 CUMBERLAND PKWY STE 10 MECHANICSBURG, PA 17055	23-6050683	501(C)(3)	19,500.	0.			RESEARCH- SUBCONTRACT
LOMA LINDA UNIVERSITY 11245 ANDERSON ST LOMA LINDA, CA 92350	95-1816009	501(C)(3)	18,198.	0.			RESEARCH- SUBCONTRACT
BATTELLE MEMORIAL INSTITUTE PO BOX 84391 SEATTLE, WA 98124-5691	31-4379427	501(C)(3)	17,617.	0.			RESEARCH- SUBCONTRACT

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LOUISIANA STATE UNIVERSITY 204 THOMAS BOYD HALL BATON ROUGE, LA 70803	72-6000848	501(C)(3)	17,095.	0.			RESEARCH- SUBCONTRACT
CARNEGIE MUSEUMS OF PITTSBURGH 4400 FORBES AVE PITTSBURGH, PA 15213	25-0965280	501(C)(3)	15,576.	0.			RESEARCH- SUBCONTRACT
MARQUETTE UNIVERSITY PO BOX 1881 MILWAUKEE, WI 53201	39-0806251	501(C)(3)	15,364.	0.			RESEARCH- SUBCONTRACT
THOMAS EDISON STATE UNIVERSITY 111 W STATE ST TRENTON, NJ 08608	22-2942727	501(C)(3)	15,000.	0.			RESEARCH- SUBCONTRACT
COMMUNITY LIVING AND SUPPORT SERVICES - 4638 CENTRE AVE - PITTSBURGH, PA 15213	25-0987252	501(C)(3)	15,000.	0.			RESEARCH- SUBCONTRACT
ADVANCE AFRICAN DEVELOPMENT INC 907 WEST ST FIFTH FL PITTSBURGH, PA 15221	45-4946645	N/A	15,000.	0.			RESEARCH- SUBCONTRACT
PA BEHAVIORAL HEALTH AND AGING COALITION - 525 SOUTH 29TH ST - HARRISBURG, PA 17104	61-1511344	501(C)(3)	15,000.	0.			RESEARCH- SUBCONTRACT
CENTRAL NEW YORK LIBRARY RESOURCES COUNCIL - 6493 RIDINGS ROAD - SYRACUSE, NY 13206	16-0957462	501(C)(3)	15,000.	0.			RESEARCH- SUBCONTRACT
THE NEMOURS FOUNDATION 10140 CENTURION PARKWAY NORTH JACKSONVILLE, FL 32256	59-0634433	501(C)(3)	14,901.	0.			RESEARCH- SUBCONTRACT

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UNIVERSITY OF NORTH TEXAS PO BOX 305220 DENTON, TX 76203	75-6002149	115	14,797.	0.			RESEARCH- SUBCONTRACT
PHOENIX CHILDREN'S HOSPITAL 1919 E THOMAS ROAD PHOENIX, AZ 85006	86-0422559	501(C)(3)	13,859.	0.			RESEARCH- SUBCONTRACT
TOURO COLLEGE 500 SEVENTH AVE NEW YORK, NY 10018	13-2676570	501(C)(3)	12,657.	0.			RESEARCH- SUBCONTRACT
BANGOR BOROUGH 197 PENNSYLVANIA AVE BANGOR, PA 18013	24-6000563	115	12,500.	0.			RESEARCH- SUBCONTRACT
FAYETTE COUNTY COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP - 2054 SPRINGHILL FURNACE ROAD - SMITHFIELD, PA 15478	46-4948911	115	12,500.	0.			RESEARCH- SUBCONTRACT
GEORGE WASHINGTON UNIVERSITY ROME HALL 801 22ND ST NW WASHINGTON, DC 20052	53-0196584	501(C)(3)	11,888.	0.			RESEARCH- SUBCONTRACT
NEW YORK LIBRARY ASSN 6021 STATE FARM RD GUILDERLAND, NY 12084	14-1407060	501(C)(3)	11,855.	0.			RESEARCH- SUBCONTRACT
URBAN INSTITUTE 2100 M ST NW WASHINGTON, DC 20037	52-0880375	501(C)(3)	11,542.	0.			RESEARCH- SUBCONTRACT
BUCK INSTITUTE FOR RESEARCH ON AGING - 8001 REDWOOD BLVD. - NOVATO, CA 94945	94-3030609	501(C)(3)	11,314.	0.			RESEARCH- SUBCONTRACT

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SOUTHERN METHODIST UNIVERSITY PO BOX 750259 DALLAS, TX 75275-0259	75-0800689	501(C)(3)	10,892.	0.			RESEARCH- SUBCONTRACT
CLEVELAND STATE UNIVERSITY 1983 E 24TH ST CLEVELAND, OH 44115	34-0966056	115	10,802.	0.			RESEARCH- SUBCONTRACT
NEW ENGLAND RESEARCH INSTITUTES INC - 9 GALEN ST - WATERTOWN, MA 02472	04-2919509	N/A	10,000.	0.			RESEARCH- SUBCONTRACT
NEW YORK MEDICAL COLLEGE ADMINISTRATION BUILDING RM 235 VALHALLA, NY 10595	13-1099420	501(C)(3)	10,000.	0.			RESEARCH- SUBCONTRACT
CHARLES COLE MEMORIAL HOSPITAL 1001 E 2ND ST COUDERSPORT, PA 16915	24-0802108	501(C)(3)	9,973.	0.			RESEARCH- SUBCONTRACT
AMERICAN ASSN FOR THE ADVANCEMENT OF SCIENCE - 1200 NEW YORK AVE NW - WASHINGTON, DC 20005	53-0196568	501(C)(3)	9,629.	0.			RESEARCH- SUBCONTRACT
MATERIALS SCIENCES CORPORATION 135 ROCK RD HORSHAM, PA 19044	23-2462974	N/A	9,591.	0.			RESEARCH- SUBCONTRACT
SCIENCE MUSEUM OF MINNESOTA 120 WEST KELLOGG BOULEVARD ST. PAUL, MN 55102	41-0706172	501(C)(3)	9,390.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF KANSAS MEDICAL CENTER RESEARCH INSTITUTE - MAILSTOP 1039 - KANSAS CITY, KS 66160	48-1108830	501(C)(3)	9,224.	0.			RESEARCH- SUBCONTRACT

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UNIVERSITY OF RHODE ISLAND 70 LOWER COLLEGE RD KINGSTON, RI 02881	22-3011455	115	9,111.	0.			RESEARCH- SUBCONTRACT
PLANETARY SCIENCE INSTITUTE 1700 E FORT LOWELL RD STE 106 TUCSON, AZ 85719-2395	33-0175263	501(C)(3)	8,660.	0.			RESEARCH- SUBCONTRACT
VASSAR COLLEGE 124 RAYMOND AVE BOX 12 POUGHKEEPSIE, NY 12604	14-1338587	501(C)(3)	8,308.	0.			RESEARCH- SUBCONTRACT
LIBRARY SYSTEM OF LANCASTER COUNTY 1866 COLONIAL VILLAGE LANE STE 107 LANCASTER, PA 17601	23-2395408	115	8,230.	0.			RESEARCH- SUBCONTRACT
BOSTON UNIVERSITY 595 COMMONWEALTH AVE STE 700 BOSTON, MA 02215	04-2103547	501(C)(3)	8,228.	0.			RESEARCH- SUBCONTRACT
ST LUKE'S HOSPITAL 801 OSTRUM ST BETHLEHEM, PA 18015	23-1352213	501(C)(3)	8,222.	0.			RESEARCH- SUBCONTRACT
PROPEL SCHOOLS INC 3447 EAST CARSON ST STE 200 PITTSBURGH, PA 15203	03-0483260	501(C)(3)	8,048.	0.			RESEARCH- SUBCONTRACT
RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK - 230 WEST 41ST ST 7TH FL - NEW YORK, NY 10036	13-1988190	501(C)(3)	7,597.	0.			RESEARCH- SUBCONTRACT
NEW YORK CITY HEALTH AND HOSPITALS 160 WATER ST STE 632 NEW YORK, NY 10038	13-2655001	501(C)(3)	7,540.	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
CHATHAM UNIVERSITY WOODLAND ROAD PITTSBURGH, PA 15232	25-0717890	501(C)(3)	7,526.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEBRASKA MEDICAL CENTER - 987835 NEBRASKA MEDICAL CENTER - OMAHA, NE 68198	47-0771713	501(C)(3)	7,520.	0.			RESEARCH- SUBCONTRACT
NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE - 42-09 28TH ST CN48 - LONG ISLAND CITY, NY 11101		115	7,483.	0.			RESEARCH- SUBCONTRACT
HENRY M JACKSON FOUNDATION 1401 ROCKVILLE PIKE ROCKVILLE, MD 20852	52-1313011	501(C)(3)	7,467.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTH CAROLINA PO BOX 84900 COLUMBIA, SC 29208	57-6001153	115	7,382.	0.			RESEARCH- SUBCONTRACT
DRAKE UNIVERSITY 2507 UNIVERSITY AVE DES MOINES, IA 50311	42-0680460	501(C)(3)	7,177.	0.			RESEARCH- SUBCONTRACT
MEDSTAR HEALTH RESEARCH INSTITUTE 6495 NEW HAMPSHIRE AVE STE 201 HYATTSVILLE, MD 20783	52-6056274	501(C)(3)	6,900.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL COLORADO 13123 E 16TH AVE AURORA, CO 80045	84-0166760	501(C)(3)	6,215.	0.			RESEARCH- SUBCONTRACT
SOUTHWEST BEHAVIORAL CARE INC 3131 SANGUINET ST FORT WORTH, TX 76107	75-2625595	N/A	6,211.	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
MERIDIAN HEALTHCARE 527 MERIDIAN ROAD YOUNGSTOWN, OH 44509	34-1138485	501(C)(3)	6,094.	0.			RESEARCH- SUBCONTRACT
SUNDANCE RESEARCH INSTITUTE INC 7475 WISCONSIN AVE STE 1000 BETHESDA, MD 20814	26-2919036	501(C)(3)	5,759.	0.			RESEARCH- SUBCONTRACT
MARICOPA INTEGRATED HEALTH SYSTEMS 2619 PIERCE ST PHOENIX, AZ 85008	86-0830701	N/A	5,330.	0.			RESEARCH- SUBCONTRACT
FLORIDA GULF COAST UNIVERSITY 10501 FGCU BLVD SOUTH FORT MYERS, FL 33965	65-0753801	115	5,305.	0.			RESEARCH- SUBCONTRACT
GEORGETOWN UNIVERSITY 37TH O STS NW STE 400 WASHINGTON, DC 20057	53-0196603	501(C)(3)	5,200.	0.			RESEARCH- SUBCONTRACT
LAWRENCE COUNTY GOVERNMENT CENTER 430 COURT ST NEW CASTLE, PA 16101	25-6001037	115	5,121.	0.			RESEARCH- SUBCONTRACT
ROWAN UNIVERSITY 201 MULLICA HILL ROAD GLASSBORO, NJ 08028	22-2764819	115	5,100.	0.			RESEARCH- SUBCONTRACT
CENTRE COUNTY LIBRARY & HISTORICAL MUSEUM - 203 N ALLEGHENY ST - BELLEFONTE, PA 16823	24-0799348	501(C)(3)	5,000.	0.			RESEARCH- SUBCONTRACT
UPMC COMMUNITY PROVIDER SERVICES 200 LOTHROP ST PITTSBURGH, PA 15213	25-1804746	501(C)(3)	249,500.	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
NEGRO EDUCATIONAL EMERGENCY DRIVE WARNER CENTER 332 FIFTH AVE PITTSBURGH, PA 15222	25-6070821	501(C)(3)	120,000.	0.			SPONSORSHIP
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT - 425 SIXTH AVE - PITTSBURGH, PA 15219	25-0965213	501(C)(3)	85,000.	0.			SPONSORSHIP
OAKLAND BUSINESS IMPROVEMENT DISTRICT - 235 ATWOOD ST - PITTSBURGH, PA 15213	25-1833743	N/A	68,000.	0.			SPONSORSHIP
PITTSBURGH SCHWEITZER FELLOWSHIP, INC - 5614 ELGIN ST - PITTSBURGH, PA 15206	13-1982786	501(C)(3)	51,000.	0.			SPONSORSHIP
AMERICAN COUNCIL OF LEARNED SOCIETIES - 633 3RD AVE 8C - NEW YORK, NY 10017	13-1851145	501(C)(3)	50,000.	0.			SPONSORSHIP
SOCIAL SCIENCES RESEARCH COUNCIL ONE PIERREPONT PLAZA 15TH FL BROOKLYN, NY 11201	13-1325070	501(C)(3)	50,000.	0.			SPONSORSHIP
OAKLAND PLANNING & DEVELOPMENT CORP - 235 ATWOOD ST - PITTSBURGH, PA 15213	25-1382510	501(C)(3)	35,000.	0.			SPONSORSHIP
CIRCLE OF SISTERHOOD FOUNDATION PO BOX 90257 INDIANAPOLIS, IN 46290	27-2393582	501(C)(3)	33,000.	0.			SPONSORSHIP
JEWISH COMMUNITY CENTER OF GREATER PITTSBURGH - 5738 FORBES AVE - PITTSBURGH, PA 15217	25-1094514	501(C)(3)	31,500.	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
AMERICAN NATIONAL RED CROSS 225 BOULEVARD OF THE ALLIES PITTSBURGH, PA 15222	53-0196605	501(C)(3)	26,000.	0.			SPONSORSHIP
STATE SCIENCE & TECHNOLOGY INSTITUTE - 5015 PINE CREEK DR - WESTERVILLE, OH 43081	31-1448843	501(C)(3)	25,000.	0.			SPONSORSHIP
OAKLAND TRANSPORTATION MANAGEMENT ASSOCIATION - 235 ATWOOD ST - PITTSBURGH, PA 15213	25-1701562	501(C)(3)	22,500.	0.			SPONSORSHIP
PITTSBURGH PARKS CONSERVANCY 2000 TECHNOLOGY DR NO 300 PITTSBURGH, PA 15219	23-2882145	501(C)(3)	20,000.	0.			SPONSORSHIP
WESTERN PENNSYLVANIA CONSERVANCY 800 WATERFRONT DR PITTSBURGH, PA 15222	25-1053485	501(C)(3)	20,000.	0.			SPONSORSHIP
DAPPER DAN CHARITIES 234 BLVD. OF THE ALLIES PITTSBURGH, PA 15222	23-7216540	501(C)(3)	15,000.	0.			SPONSORSHIP
NEIGHBORHOOD LEGAL SERVICES ASSN 929 PENN AVE PITTSBURGH, PA 15222	25-1157129	501(C)(3)	15,000.	0.			SPONSORSHIP
CHILDREN'S HOSPITAL OF PITTSBURGH 4401 PENN AVE PITTSBURGH, PA 15224	25-0402510	501(C)(3)	12,500.	0.			SPONSORSHIP
BLOOMFIELD-GARFIELD GROUP 5149 PENN AVE PITTSBURGH, PA 15224	25-1290469	501(C)(3)	11,800.	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
SENATOR JOHN HEINZ PITTSBURGH REGIONAL HISTORY CENTER - 1212 SMALLMAN ST - PITTSBURGH, PA 15222	25-0965391	501(C)(3)	11,643.	0.			SPONSORSHIP
AMERICAN CANCER SOCIETY 320 BILMAR DR PITTSBURGH, PA 15205	25-1798733	501(C)(3)	11,250.	0.			SPONSORSHIP
AMERICAN HEART ASSOCIATION 7777 PENN CENTER BOULEVARD PITTSBURGH, PA 15235	13-5613797	501(C)(3)	11,200.	0.			SPONSORSHIP
PITTSBURGH PROMISE 1901 CENTRE AVE PITTSBURGH, PA 15219	26-1982661	501(C)(3)	10,000.	0.			SPONSORSHIP
PITTSBURGH SYMPHONY ORCHESTRA 600 PENN AVE PITTSBURGH, PA 15222	25-0986052	501(C)(3)	10,000.	0.			SPONSORSHIP
CHALLAH FOR HUNGER 1701 WALNUT ST 7TH FL PHILADELPHIA, PA 19103	26-1540827	501(C)(3)	9,711.	0.			SPONSORSHIP
FEELGOOD 351 17TH AVE SAN FRANCISCO, CA 94121	76-0765873	501(C)(3)	8,561.	0.			SPONSORSHIP
JUVENILE DIABETES RESEARCH FOUNDATION - 120 WALL ST - NEW YORK, NY 10005	23-1907729	501(C)(3)	8,029.	0.			SPONSORSHIP
HABITAT FOR HUMANITY OF BROWARD COUNTY - 3564 N OCEAN BLVD - FORT LAUDERDALE, FL 33308	59-2320573	501(C)(3)	7,950.	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
AMERICAN IRELAND FUND 211 CONGRESS ST 10TH FL BOSTON, MA 02110	25-1306992	501(C)(3)	7,500.	0.			SPONSORSHIP
FOUNDATION OF NATIONAL STUDENT NURSES' ASSOCIATION INC - 45 MAIN ST STE 606 - BROOKLYN, NY 11201	13-6081991	501(C)(6)	7,500.	0.			SPONSORSHIP
YMCA OF GREATER PITTSBURGH 420 FORT DUQUESNE BOULEVARD STE 62 PITTSBURGH, PA 15222	25-0969497	501(C)(3)	7,500.	0.			SPONSORSHIP
CARNEGIE MUSEUMS OF PITTSBURGH 4400 FORBES AVENUE PITTSBURGH, PA 15213	25-0965280	501(C)(3)	6,500.	0.			SPONSORSHIP
POWER 7501 PENN AVE PITTSBURGH, PA 15208	25-1643651	501(C)(3)	6,000.	0.			SPONSORSHIP
URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD ST PITTSBURGH, PA 15222	25-0965592	501(C)(3)	6,000.	0.			SPONSORSHIP
WESTERN PENNSYLVANIA HUMANE SOCIETY - 1101 WESTERN AVE - PITTSBURGH, PA 15233	25-0965608	501(C)(3)	5,805.	0.			SPONSORSHIP
ANCHORPOINT COUNSELING MINISTRY INC - 800 MCKNIGHT PARK DR STE 802 - PITTSBURGH, PA 15237	25-1196957	501(C)(3)	5,000.	0.			SPONSORSHIP
CATHOLIC CHARITIES OF THE DIOCESE OF PITTSBURGH - 212 NINTH ST - PITTSBURGH, PA 15222	25-1326213	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
EPILEPSY FOUNDATION OF WESTERN/CENTRAL PA - 1501 REEDSDALE STE 3002 - PITTSBURGH, PA 15233	23-7241930	501(C)(3)	5,000.	0.			SPONSORSHIP
FAMILY HOUSE INC 233 MCKEE PLACE PITTSBURGH, PA 15213	25-1519959	501(C)(3)	5,000.	0.			SPONSORSHIP
HILLEL JEWISH UNIVERSITY CENTER 4607 FORBES AVE PITTSBURGH, PA 15213	25-6065236	501(C)(3)	5,000.	0.			SPONSORSHIP
JEWISH NATIONAL FUND 42 EAST 69TH ST NEW YORK, NY 10021	13-1659627	501(C)(3)	5,000.	0.			SPONSORSHIP
MANCHESTER CRAFTMEN'S GUILD 1815 METROPOLITAN ST PITTSBURGH, PA 15233	23-7113478	501(C)(3)	5,000.	0.			SPONSORSHIP
NAACP- PITTSBURGH BRANCH 2030 WYLIE AVE PITTSBURGH, PA 15219	25-6086867	501(C)(3)	5,000.	0.			SPONSORSHIP
PITTSBURGH CIVIC LIGHT OPERA 719 LIBERTY AVE PITTSBURGH, PA 15222	25-6000890	501(C)(3)	5,000.	0.			SPONSORSHIP
PITTSBURGH VINTAGE GRAND PRIX ASSN 1000 GAMMA DR PITTSBURGH, PA 15238	25-1427238	501(C)(3)	5,000.	0.			SPONSORSHIP
THREE RIVERS YOUTH 6117 BROAD ST PITTSBURGH, PA 15206	25-1206924	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
UPMC 600 GRANT ST FL 58 PITTSBURGH, PA 15219	20-8295721	501(C)(3)	5,000.	0.			SPONSORSHIP
VETERANS LEADERSHIP PROGRAM OF WESTERN PA - 2934 SMALLMAN ST - PITTSBURGH, PA 15201	25-1434643	501(C)(3)	5,000.	0.			SPONSORSHIP
YWCA GREATER PITTSBURGH 305 WOOD ST PITTSBURGH, PA 15222-1982	25-0965639	501(C)(3)	5,000.	0.			SPONSORSHIP

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INSTITUTIONAL AID TO STUDENTS	15247	167,864,664.	0.		
TUITION REMISSION	2115	23,983,377.	0.		
TUITION REMISSION- STUDENTS ATTENDING OTHER UNIVERSITIES	353	6,239,028.	0.		

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

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

**Part IV Supplemental Information**

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

THE NUMBER OF RECIPIENTS REFLECTS THE ACTUAL NUMBER OF STUDENTS AND

EMPLOYEES WHO RECEIVED THE ASSISTANCE.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2015**

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" 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) |

**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

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <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 |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>	X	
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2015

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PATRICK D. GALLAGHER CHANCELLOR / CEO	(i)	519,130.	0.	8,765.	121,200.	92,390.	741,485.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) EDWARD J. GREFENSTETTE TRUSTEE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	470,000.	320,000.	6,068.	536,805.	11,017.	1,343,890.	320,000.
(3) PATRICIA E. BEESON PROVOST/SR VICE CHANCELLOR	(i)	417,187.	0.	28,681.	50,400.	13,122.	509,390.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHY S. HUMPHREY SR VICE CHANCELLOR, ENGAGEMENT	(i)	386,558.	0.	16,517.	31,800.	17,093.	451,968.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ARTHUR S. LEVINE SR VICE CHANCELLOR, HEALTH SCI/DEAN	(i)	843,513.	186,000.	74,981.	31,800.	15,064.	1,151,358.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) AMY KRUEGER MARSH TREASURER	(i)	441,082.	0.	16,921.	38,425.	16,847.	513,275.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ARTHUR G. RAMICONE SR VICE CHANCELLOR & CFO	(i)	394,276.	0.	32,631.	14,501.	16,135.	457,543.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) GEOVETTE E. WASHINGTON GENERAL COUNSEL	(i)	140,513.	0.	2,108.	9,360.	602.	152,583.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JAMES P. DIXON II FORMER HEAD BASKETBALL COACH-MEN'S	(i)	1,578,502.	732,551.	24,154.	137,542.	10,821.	2,483,570.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) PATRICK R. NARDUZZI HEAD FOOTBALL COACH	(i)	1,312,782.	450,000.	26,266.	21,200.	17,487.	1,827,735.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) NANCY E. DAVIDSON DIRECTOR, UPCI	(i)	687,418.	0.	600.	31,801.	5,947.	725,766.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MICHAEL J. BECICH CHAIR BIOMEDICAL INFORMATICS	(i)	597,366.	20,000.	600.	13,032.	74,317.	705,315.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) SUZANNE MCCONNELL-SERIO HEAD BASKETBALL COACH- WOMEN'S	(i)	564,873.	25,000.	17,534.	12,910.	27,517.	647,834.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) B. JEAN FERKETISH FORMER SECRETARY BOARD OF TRUSTEES	(i)	231,590.	0.	124,218.	35,474.	16,135.	407,417.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JEROME COCHRAN FORMER EXECUTIVE VICE CHANCELLOR	(i)	0.	0.	342,364.	8,483.	0.	350,847.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) JAMES V. MAHER, JR. FORMER PROVOST/SR VICE CHANCELLOR	(i)	313,856.	0.	19,567.	7,847.	17,242.	358,512.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) MARK A. NORDENBERG FORMER CHANCELLOR	(i)	516,232.	0.	329,516.	71,622.	15,470.	932,840.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) P. JEROME RICHEY FORMER GENERAL COUNSEL	(i)	195,507.	0.	49,903.	17,127.	165.	262,702.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

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. TRAVEL IS TREATED AS TAXABLE INCOME ON FORM

W-2 IF NOT FOR BONA FIDE BUSINESS PURPOSES.

TRAVEL FOR COMPANIONS: TRAVEL FOR COMPANIONS IS TREATED AS TAXABLE INCOME

ON FORM W-2.

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

**Part III Supplemental Information**

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

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

PROSPECTIVE DONORS, INSTITUTIONAL SUPPORTERS, AND BUSINESS ASSOCIATES.USE

OF THE RESIDENCE IS NOT CONSIDERED TAXABLE INCOME UNDER IRC SEC. 119(D).

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 USE OF CLUB MEMBERSHIPS

IS TREATED AS TAXABLE INCOME ON FORM W-2.

PERSONAL SERVICES:

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

PROVIDED TO CERTAIN SENIOR OFFICERS OF THE UNIVERSITY AND ARE TREATED AS

TAXABLE INCOME ON FORM W-2.

PART I, LINES 4A-B:

LINE 4A-SEVERANCE PAYMENT-J.COCHRAN-\$326,250

LINE 4B-SUPPLEMENTAL GROUP TERM LIFE INSURANCE PROGRAM FOR CERTAIN ACTIVE

AND RETIRED OFFICERS, WHICH INCLUDES A TAX GROSS-UP- J.COCHRAN-\$23,723,

**Part III Supplemental Information**

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

B.FERKETISH-\$117,982, J.MAHER, JR.-\$25,052, M.NORDENBERG-\$334,522,

P.BEESON-\$0, A.LEVINE-\$0, A.MARSH-\$0, A.RAMICONE-\$0

**Supplemental Information on Tax-Exempt Bonds**

ENTITY 1

OMB No. 1545-0047

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

**2015**  
**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	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	91335VFU5	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.		44,316,473.		401,459,780.	
<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.		4,186,608.		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

OMB No. 1545-0047

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

**2015**  
**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	91335VJV9	07/21/15	101,746,000.	SEE SCHEDULE K, PART VI		X		X		X
<b>B</b>	SEE SCHEDULE K, PART VI	25-0965591	91335VJP2	09/18/14	96,564,106.	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		101,746,309.		96,597,189.			
<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		237,585.		557,401.			
<b>8</b>	Credit enhancement from proceeds							
<b>9</b>	Working capital expenditures from proceeds							
<b>10</b>	Capital expenditures from proceeds		28,512,666.		89,462,770.			
<b>11</b>	Other spent proceeds		73,000,000.					
<b>12</b>	Other unspent proceeds							
<b>13</b>	Year of substantial completion		2015		2015			
	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 .....	3.19 %		.20 %		%		.35 %	
<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 .....	.00 %		.00 %		.00 %		.00 %	
<b>6</b> Total of lines 4 and 5 .....	3.19 %		.20 %		.00 %		.35 %	
<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, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		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 "Yes" to 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? .....			X					
<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? .....			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 .....		.00 %		.64 %		%		%
<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 .....		.00 %		.00 %		%		%
<b>6</b> Total of lines 4 and 5 .....		.00 %		.64 %		%		%
<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, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		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 "Yes" to 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		N/A					
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....		X		X				
<b>e</b> Was the hedge terminated? .....		X		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? .....	X		X					

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

SCHEDULE K PART I BOND ISSUES- COLUMN (A)- ISSUER NAME
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 2015; PANTHERS
F-UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION-UNIVERSITY CAPITAL PROJECT BONDS, SERIES A, B-1, B-2
SCHEDULE K PART I BOND ISSUES- COLUMN (F)- DESCRIPTION OF PURPOSE
A-FINANCE CAPITAL PROJECTS; REFUNDING OF SERIES 2007 A BONDS ISSUED 3/8/2007
B-UNIV. CAPITAL PROJECT AND REFUNDING BONDS SERIES 2000A,SERIES

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

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

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

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

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

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 PROJECTS

SCHEDULE K PART III, LINE 4- % OF PROPERTY USED IN A PRIVATE BUSINESS

PRIVATE BUSINESS USE AT THE UNIVERSITY IS TRACKED BY SERIES AS

ORIGINALLY ISSUED.

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, 2016: \$150,000,000

PERCENTAGE OF PRIVATE BUSINESS USE: 0.20%

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, 2016: \$104,621,000

PERCENTAGE OF PRIVATE BUSINESS USE: 0.35%

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

SCHEDULE K PART IV, LINE 4B & 4C, 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**

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

SCHEDULE L PART IV

(A) NAME OF INTERESTED PERSON: JOSHUA COCHRAN

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF JEROME COCHRAN, FORMER EXECUTIVE VICE CHANCELLOR.

(C) AMOUNT OF TRANSACTION: \$27,409

(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, FORMER CHANCELLOR.

(C) AMOUNT OF TRANSACTION: \$42,255

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

**Part V Supplemental Information**

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

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: MICHAEL NORDENBERG

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF MARK NORDENBERG, FORMER CHANCELLOR.

(C) AMOUNT OF TRANSACTION: \$18,073

(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, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$195,103

(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, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$40,199

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(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: ROBIN MAIER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

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

(C) AMOUNT OF TRANSACTION: \$65,121

(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: \$96,786

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: JASON RICHARDS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF THOMAS RICHARDS, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$87,536

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: LINDSAY RICHARDS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF THOMAS RICHARDS, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$97,300

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(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: JOHN GREFENSTETTE

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF EDWARD GREFENSTETTE, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$100,380

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(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: \$770,127

(D) DESCRIPTION OF TRANSACTION: FOOD SERVICE

(E) SHARING OF ORGANIZATION'S REVENUES? NO

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2015**

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.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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

Part I		Types of Property			
	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts	
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	X	15,450.	WRITTEN APPRAISAL	
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	103	2,393,269.	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	X	1	90,000.	WRITTEN APPRAISAL
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies	X	4	45,175.	WRITTEN APPRAISAL
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( FRICK ARCHIVE )	X	1	5,000,000.	WRITTEN APPRAISAL
26	Other ▶ ( EYE&EAR RENO )	X	1	125,000.	FMV
27	Other ▶ ( TRAVEL&AIRFAR )	X	3	25,053.	FMV
28	Other ▶ ( CLAVICHORD )	X	1	18,000.	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		2
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				Yes No
					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) (2015)

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

PART I, OTHER TYPES OF PROPERTY:

FOUR STEELERS EXHIBITION TICKETS

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 280.

(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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization UNIVERSITY OF PITTSBURGH	Employer identification number 25-0965591
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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	156,854,259		
SCHOLARSHIPS AND FELLOWSHIPS	176,412,250	176,412,250	
AUXILIARY ENTERPRISES	135,095,790		137,546,167
LIBRARIES	47,922,828		
PUBLIC SERVICE	87,988,679	1,206,203	

EXP. \$ 604,273,806. INCL GRANTS OF \$ 177,618,453. REVENUE \$ 137,546,167.

FORM 990, PART VI, SECTION A, LINE 4:

ON FEBRUARY 26, 2016, THE BOARD OF TRUSTEES OF THE UNIVERSITY OF PITTSBURGH APPROVED REVISIONS TO CHAPTER I (TRUSTEES AND OFFICERS) OF THE UNIVERSITY BYLAWS. ARTICLES III (OFFICERS) AND IV (EXECUTION OF INSTRUMENTS) OF THE BYLAWS WERE UPDATED TO REFLECT CHANGES IN UNIVERSITY OFFICER TITLES. ARTICLE V (COMMITTEES) WAS REVISED TO PERMIT THE FORMATION OF SPECIAL

COMMITTEES AND SUBCOMMITTEES OF THE BOARD. THE CHAIRPERSON OF THE BOARD

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  
532211  
09-02-15

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization UNIVERSITY OF PITTSBURGH	Employer identification number 25-0965591
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MAY AUTHORIZE THE ESTABLISHMENT OF ONE OR MORE AD HOC COMMITTEES. THESE COMMITTEES DO NOT TAKE ANY ACTION ON BEHALF OF THE BOARD, BUT MAY RENDER ADVICE TO THE BOARD OR A STANDING COMMITTEE OF THE BOARD. SPECIAL COMMITTEES WILL NOT EXIST LONGER THAN ONE YEAR, UNLESS AUTHORIZED BY THE EXECUTIVE COMMITTEE OF THE BOARD. SUBCOMMITTEES MAY BE ESTABLISHED BY A STANDING COMMITTEE, WITH THE CONSENT OF THE BOARD CHAIRPERSON. SUBCOMMITTEES SHALL CARRY NO OFFICIAL AUTHORITY, BUT SHALL AID A STANDING COMMITTEE IN THE DISCHARGE OF ITS DUTIES. ARTICLE V WAS ALSO AMENDED TO INCLUDE TERM LIMITS FOR COMMITTEE CHAIRPERSONS AND FOR THE APPOINTMENT OF VICE CHAIRPERSONS FOR EACH COMMITTEE. ADDITIONAL REVISIONS WERE MADE FOR CONSISTENCY AND TO REFLECT REVISIONS IN PENNSYLVANIA LAW.

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 5, 2017 MEETING OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, A COPY OF THE DRAFT IRS FORMS 990 AND 990-T FOR FISCAL YEAR 2016 WAS DISTRIBUTED TO EACH COMMITTEE MEMBER. AT THE MAY 5 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

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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.

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 AND AT BOARD COMMITTEE MEETINGS. SUCH MEMBERS OF THE BOARD ARE REQUIRED ANNUALLY TO DISCLOSE AFFILIATIONS THEY (OR ANY "RELATED PERSON," WHICH INCLUDES THEIR SPOUSE, COHABITANT PARTNERS, ANCESTORS, BROTHERS AND SISTERS, (WHETHER WHOLE OR HALF BLOOD), CHILDREN (WHETHER NATURAL OR ADOPTED), GRANDCHILDREN, GREAT-GRANDCHILDREN, SPOUSES OF BROTHERS, SISTERS, CHILDREN, GRANDCHILDREN, AND GREAT-GRANDCHILDREN, AND PERSONS RESIDING IN THE SAME HOUSEHOLD AS THE BOARD MEMBER) HAVE WITH OTHER ORGANIZATIONS. FURTHER, SUCH MEMBERS OF THE BOARD ARE REQUIRED TO DISCLOSE PROMPTLY SITUATIONS THAT INVOLVE ACTUAL OR APPARENT CONFLICTS OF INTEREST AS SOON AS THEY BECOME KNOWN TO THE BOARD MEMBER, INCLUDING TRANSACTIONS AND PROPOSED TRANSACTIONS (EXCLUSIVE OF TRANSACTIONS BETWEEN THE UNIVERSITY AND ITSELF OR A CLOSE AFFILIATE, OR FOR WHICH THE UNIVERSITY WILL OR DID RECEIVE COMPETITIVE BIDS FROM TWO OR MORE COMPANIES, OR THAT INVOLVES THE RENDERING OF SERVICES OF A COMMON CARRIER, CONTRACT CARRIER OR PUBLIC UTILITY TO THE EXTENT COMPENSATED AT RATES/ CHARGES FIXED IN CONFORMITY WITH LAW OR GOVERNMENTAL AUTHORITY, OR THAT INVOLVES 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

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OTHER HAND, THE TRUSTEE (OR THE TRUSTEE'S RELATED PERSON) OR AN ORGANIZATION WITH WHICH THE TRUSTEE (OR THE TRUSTEE'S RELATED PERSON) IS AFFILIATED WHEN THE AMOUNT INVOLVED DOES OR IS LIKELY TO EXCEED \$50,000. IF POSSIBLE, DISCLOSURES ARE TO BE MADE PRIOR TO ANY SUCH TRANSACTION OR APPROVAL BY THE BOARD OR APPROPRIATE OFFICER OR AGENT OF THE UNIVERSITY. THE REQUIRED ANNUAL DISCLOSURES ARE SUBMITTED TO THE UNIVERSITY'S OFFICE OF THE 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 THE SECRETARY WITH THE BOARD'S GOVERNANCE AND NOMINATING COMMITTEE OR A SUBCOMMITTEE THEREOF. THE BOARD'S GOVERNANCE AND NOMINATING COMMITTEE CONSISTS OF TWELVE MEMBERS OF THE BOARD, AND INCLUDES THE CHAIRPERSON OF THE BOARD. THOSE DISCLOSURES OF ACTUAL OR APPARENT CONFLICTS OF INTEREST MADE BY BOARD MEMBERS, AS THEY ARISE, HAVE GENERALLY BEEN DIRECTED TO THE OFFICE OF THE 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. IF AUTHORIZATION OR APPROVAL OF ANY TRANSACTION OR OTHER MATTER IS CONSIDERED AT ANY MEETING OF THE BOARD, OR BOARD COMMITTEE, ANY BOARD MEMBER WHO HAS AN ACTUAL OR APPARENT CONFLICT OF INTEREST MAY NOT PARTICIPATE IN ANY CONSIDERATION OR ACTION 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, OF A RELEVANT BOARD MEMBER'S AFFILIATION - DO SO EXCLUSIVELY BASED UPON THE UNIVERSITY'S BEST BUSINESS

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INTERESTS, INCLUDING CONSIDERATION OF SUCH FACTORS AS EVALUATION AND REEVALUATION 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 GENERALLY 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 GENERALLY 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 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

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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 DETERMINES THE COMPENSATION, INCLUDING FRINGE BENEFITS AND PERQUISITES, OF THE OFFICERS OF THE UNIVERSITY, EXCEPT ASSISTANT AND ASSOCIATE TREASURERS AND SECRETARIES.

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

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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  
THE UNIVERSITY HAS A WHISTLEBLOWER AND DOCUMENT RETENTION AND DESTRUCTION POLICY. HOWEVER, THE POLICIES HAVE NOT BEEN ADOPTED BY THE BOARD OF TRUSTEES.



**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
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	UNIVERSITY OF PITTSBURGH	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	UNIVERSITY OF PITTSBURGH	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	UNIVERSITY OF PITTSBURGH	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
UPMC - 25-1423657 600 GRANT STREET 58TH FLOOR PITTSBURGH, PA 15219	SUPPORTING SUBSIDIARIES HEALTHCARE, EDUCATION, AND RESEARCH PROGRAMS	PENNSYLVANIA	501(C)(3)	11C			X
DIETRICH FOUNDATION - 36-4711746 600 GRANT STREET NO 5360 PITTSBURGH, PA 15219	TO BENEFIT HIGHER EDUCATION AND OTHER CHARITABLE PURPOSES.	PENNSYLVANIA	501(C)(3)	11A			X

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
TSH CORPORATION - 25-1520417 124 CATHEDRAL OF LEARNING PITTSBURGH, PA 15260	DORMANT	PA	UNIVERSITY OF PITTSBURGH TRUST	C CORP			5.00%		X
FORBES-SCHENLEY LAND COMPANY - EIN UNKNOWN 5TH AVE AND BIGELOW PITTSBURGH, PA 15260	DORMANT	PA	UNIVERSITY OF PITTSBURGH	C CORP			100.00%	X	
SCHENLEY PARK APARTMENTS COMPANY - EIN UNKNOWN, 5TH AVE AND BIGELOW, PITTSBURGH, PA 15260	DORMANT	PA	UNIVERSITY OF PITTSBURGH	C CORP			100.00%	X	
CARILLO STEAM PRODUCTION ASSOCIATION, LLC - 27-1073489, 400 EUREKA BUILDING, 3400 FORBES AVENUE, PITTSBURGH, PA 15260	SERVICE CORPORATION TO MANAGE THE STEAM PLANT	PA	UNIVERSITY OF PITTSBURGH	C CORP		220,328.	75.00%	X	
CHARITABLE REMAINDER TRUSTS(7)	CHARITABLE TRUST	PA	UNIVERSITY OF PITTSBURGH					X	

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

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

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) 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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) JOHNSTOWN EDUCATIONAL FOUNDATION	C	130,939	CASH
(2) UNIVERSITY DENTAL HEALTH SERVICES	C	1,411,388	CASH
(3) UNIVERSITY DENTAL HEALTH SERVICES	O	1,396,507	CASH
(4) UNIVERSITY DENTAL HEALTH SERVICES	Q	94,288	CASH
(5)			
(6)			



**Part VII Supplemental Information**

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

**University of Pittsburgh 25 Highest Paid Non-Officers  
For the Year Ended June 30, 2016  
Right-to-Know Disclosure**

<u>Ranking</u>	<u>Name</u>	<u>Total Gross</u>
1	Dixon, James P II	\$2,317,223
2	Narduzzi, Patrick	\$1,768,841
3	Nordenberg, Mark A	\$831,344
4	Davidson, Nancy E	\$688,798
5	Becich, Michael J	\$626,000
6	McConnell-Serio, Suzanne	\$596,591
7	James, Alton Everette III	\$554,693
8	Masnick, Jeffrey L	\$540,126
9	Chaney, James A	\$509,096
10	Burke, Donald S	\$481,940
11	Malandro, Marc Shane	\$452,875
12	Berg, Jeremy M	\$446,582
13	Braun, Thomas W	\$440,667
14	Denis, David	\$436,723
15	Denis, Diane K	\$392,475
16	Vesterlund, Lise Duedal	\$391,101
17	Bahar, Ivet	\$388,941
18	Thompson, Ann E	\$388,800
19	Shlomchik, Mark Jay	\$388,447
20	Taylor, Douglass Lansing	\$385,694
21	Reis, Steven E	\$378,430
22	Gur, David	\$378,044
23	Inman, John Jeffrey	\$375,349
24	Freeman, Bruce A	\$373,084
25	Balazs, Anna C	\$369,344