

Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

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

**2016**  
Open to Public Inspection

▶ 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).

**A** For the 2016 calendar year, or tax year beginning JUL 1, 2016 and ending JUN 30, 2017

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization UNIVERSITY OF PITTSBURGH		<b>D</b> Employer identification number 25-0965591
	Doing business as		<b>E</b> Telephone number (412) 624-6395
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ 4,505,938,795.
	116 ATWOOD STREET, SUITE 201		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code PITTSBURGH, PA 15260-0100		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>F</b> Name and address of principal officer: PATRICK D. GALLAGHER 107 CATHEDRAL OF LEARNING, PGH, PA 15260		<b>H(c)</b> Group exemption number ▶	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: WWW.PITT.EDU			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: 1787	<b>M</b> State of legal domicile: PA

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: TO PROVIDE HIGH QUALITY EDUCATIONAL SERVICES, RESEARCH, AND COMMUNITY SERVICE.	
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	3 36
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4 28
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5 27138
	<b>6</b> Total number of volunteers (estimate if necessary)	6 271
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	7a -3,970,813.
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	7b -7,463,461.	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year 252,981,932. Current Year 262,336,561.
	<b>9</b> Program service revenue (Part VIII, line 2g)	1,889,551,699. 1,954,063,918.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	178,420,017. 263,558,986.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,282,146. 9,327,761.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,330,235,794. 2,489,287,226.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	266,832,011. 276,281,394.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,275,840,707. 1,194,456,366.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	565,753. 341,050.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 22,090,186.	
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	756,593,822. 815,525,545.	
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,299,832,293. 2,286,604,355.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	30,403,501. 202,682,871.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year 6,229,558,895. End of Year 6,639,956,592.
	<b>21</b> Total liabilities (Part X, line 26)	2,041,885,399. 1,964,887,057.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	4,187,673,496. 4,675,069,535.

## Part II Signature Block

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

<b>Sign Here</b>	Signature of officer <i>Arthur Ramicone</i>	Date 5/11/18			
	ARTHUR G. RAMICONE, SENIOR VICE CHANCELLOR & CFO Type or print name and title				
<b>Preparer</b>	Print/Type preparer's name D. GREG GOLLER	Preparer's signature <i>D. Greg Goller</i>	Date 5/8/2018	Check if self-employed <input type="checkbox"/>	PTIN P00485827
	Firm's name KPMG	Firm's EIN 13-5565207	Phone no. 703-286-8000		
<b>Use Only</b>	Firm's address 1676 INTERNATIONAL DRIVE MCLEAN, VA 22102				

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 \$ 676,035,210. including grants of \$ 87,048,399. ) (Revenue \$ 813,785,446. ) 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 \$ 549,430,508. including grants of \$ ) (Revenue \$ 788,454,775. ) INSTRUCTION - INCLUDES EXPENDITURES FOR ACTIVITIES OF THE INSTITUTION'S INSTRUCTION PROGRAMS.

4c (Code: ) (Expenses \$ 197,674,104. including grants of \$ ) (Revenue \$ 215,479,275. ) 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 \$ 610,691,176. including grants of \$ 189,232,995. ) (Revenue \$ 139,843,022. )

4e Total program service expenses 2,033,830,998.

**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

Table with columns for question numbers (1a-14b), Yes, and No. Contains various tax compliance questions and their corresponding 'Yes' or 'No' responses.

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 (36); 1b Enter the number of voting members included in line 1a, above, who are independent (28); 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: 8a The governing body? (X); 8b 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? 15a The organization's CEO, Executive Director, or top management official (X); 15b 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

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed (PA); 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, 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			539,937.	15,000.	217,670.	
(11) EDWARD J. GREFFENSTETTE TRUSTEE	5.00	X					0.	929,235.	646,536.	
(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) THOMAS E. RICHARDS TRUSTEE	5.00	X						0.	0.	0.
(26) BRYANT J. SALTER TRUSTEE	5.00	X						0.	0.	0.
<b>1b Sub-total</b>								539,937.	944,235.	864,206.
<b>c Total from continuation sheets to Part VII, Section A</b>								11,709,570.	0.	699,627.
<b>d Total (add lines 1b and 1c)</b>								12,249,507.	944,235.	1,563,833.

**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 **2,127**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO PO BOX 536922, ATLANTA, GA 30353-6922	FOOD SERVICE	37,413,347.
VOLPATT CONSTRUCTION CORP. 100 CASTLEVIEW RD, PITTSBURGH, PA 15234	CONSTRUCTION	21,582,888.
REGENTS OF THE UNIVERSITY OF MINNESOTA, NW 957 PO BOX 1450, MINNEAPOLIS, MN	RESEARCH SUBCONTRACTS	9,931,255.
BPA II LTD, 1468 WEST NINTH STREET SUITE 135, CLEVELAND, OH 44113	CONSTRUCTION	9,771,790.
WORLD WIDE TECHNOLOGY, INC. PO BOX 957653, ST. LOUIS, MO 63195-7653	TECHNOLOGY SERVICE	8,736,560.

**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 **676**

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) KEITH E. SCHAEFER TRUSTEE	5.00	X					0.	0.	0.	
(28) HERBERT S. SHEAR TRUSTEE	5.00	X					16,635.	0.	0.	
(29) JACK SMITH TRUSTEE	5.00	X					0.	0.	0.	
(30) WILLIAM E. STRICKLAND, JR. TRUSTEE	5.00	X					1,000.	0.	0.	
(31) STEPHEN R. TRITCH TRUSTEE	5.00	X					0.	0.	0.	
(32) THOMAS L. VANKIRK TRUSTEE	5.00	X					0.	0.	0.	
(33) PETER C. VARISCHETTI TRUSTEE	5.00	X					0.	0.	0.	
(34) JOHN J. VERBANAC TRUSTEE	5.00	X					0.	0.	0.	
(35) KEVIN WASHO, JR. TRUSTEE	5.00	X					0.	0.	0.	
(36) JAKE WHEATLEY, JR. TRUSTEE	5.00	X					0.	0.	0.	
(37) PATRICIA E. BEESON PROVOST/SR VICE CHANCELLOR	40.00 1.00			X			447,264.	0.	71,122.	
(38) KATHY S. HUMPHREY SR VICE CHANCELLOR, ENGAGEMENT	40.00			X			407,296.	0.	52,621.	
(39) ARTHUR S. LEVINE SR VICE CHANCELLOR, HEALTH SCIENCES	40.00 5.00			X			1,112,934.	0.	80,379.	
(40) AMY KRUEGER MARSH TREASURER	40.00 1.00			X			462,125.	0.	61,528.	
(41) ARTHUR G. RAMICONE SR VICE CHANCELLOR & CFO	40.00 2.00			X			425,486.	0.	23,500.	
(42) GEOVETTE E. WASHINGTON GENERAL COUNSEL	40.00			X			411,904.	0.	29,483.	
(43) GREGORY A. SCOTT SR VICE CHANCELLOR, BUSINESS OPS	40.00			X			254,544.	0.	32,461.	
(44) PATRICK R. NARDUZZI HEAD FOOTBALL COACH	40.00					X	2,978,242.	0.	39,476.	
(45) KEVIN STALLINGS HEAD BASKETBALL COACH- MEN'S	40.00					X	1,839,050.	0.	34,463.	
(46) S.SCOTT BARNES DIRECTOR OF ATHLETICS	40.00					X	742,730.	0.	41,633.	
Total to Part VII, Section A, line 1c .....										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (check all that apply), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for Suzanne McConnell-Serio, Nancy E. Davidson, B. Jean Ferketish, Jerome Cochran, and Mark A. Nordenberg.

Total to Part VII, Section A, line 1c ..... 11,709,570. 699,627.

**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<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> 903,073.				
	<b>d</b> Related organizations .....	<b>1d</b>				
	<b>e</b> Government grants (contributions) .....	<b>1e</b> 183,544,015.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b> 77,889,473.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$	3,324,244.				
	<b>h Total.</b> Add lines 1a-1f .....	▶ 262,336,561.				
	<b>Program Service Revenue</b>	<b>2 a</b> GRANTS/CONTRACTS	<b>Business Code</b> 541700	813,785,446.		813,785,446.
<b>b</b> TUITION		611710	788,454,775.	788,454,775.		
<b>c</b> SALES-EDUCATIONAL		711300	210,691,267.	208,830,353.	1,860,914.	
<b>d</b> SALES-AUXILIARY		900004	139,843,022.	138,501,168.	1,341,854.	
<b>e</b> UNIVERSITY PRESS		511130	1,289,408.	1,289,408.		
<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....		▶ 1,954,063,918.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....	▶ 77,347,888.			77,347,888.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....	▶ 6,777.			6,777.	
	<b>5</b> Royalties .....	▶ 6,245,719.			6,245,719.	
	<b>6 a</b> Gross rents .....	(i) Real	18,261,309.			
		(ii) Personal				
		<b>b</b> Less: rental expenses .....	10,958,333.			
		<b>c</b> Rental income or (loss) .....	7,302,976.			
	<b>d</b> Net rental income or (loss) .....	▶ 7,302,976.			7,302,976.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	2182432955.			
		(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses .....	1996228634.			
		<b>c</b> Gain or (loss) .....	186,204,321.			
	<b>d</b> Net gain or (loss) .....	▶ 186,204,321.			186,204,321.	
	<b>8 a</b> Gross income from fundraising events (not including \$ 903,073. of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b> 228,683.				
		<b>b</b> Less: direct expenses .....	774,636.			
<b>c</b> Net income or (loss) from fundraising events .....		▶ -545,953.			-545,953.	
<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> 12,923,970.					
	<b>b</b> Less: cost of goods sold .....	8,689,966.				
	<b>c</b> Net income or (loss) from sales of inventory .....	▶ 4,234,004.	3,498,600.	735,404.		
Miscellaneous Revenue		<b>Business Code</b>				
<b>11 a</b> PARTNERSHIP GAIN(LOSS) .....	523000	-7,908,985.		-7,908,985.		
	<b>b</b> .....					
	<b>c</b> .....					
	<b>d</b> All other revenue .....					
<b>e Total.</b> Add lines 11a-11d .....	▶ -7,908,985.					
<b>12 Total revenue.</b> See instructions. .....	▶ 2,489,287,226.	1,140,574,304.	-3,970,813.	1090347174.		

**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	85,256,271.	85,256,271.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	187,926,690.	187,926,690.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	3,098,433.	3,098,433.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	4,469,969.	951,837.	3,234,263.	283,869.
<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)	2,136,689.	1,764,595.	372,094.	
<b>7</b> Other salaries and wages	943,072,838.	841,400,720.	89,383,727.	12,288,391.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	93,684,103.	89,661,770.	2,775,410.	1,246,923.
<b>9</b> Other employee benefits	89,810,027.	85,643,237.	1,603,214.	2,563,576.
<b>10</b> Payroll taxes	61,282,740.	58,491,557.	1,927,720.	863,463.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management	410,283.		410,283.	
<b>b</b> Legal	6,068,077.		6,068,077.	
<b>c</b> Accounting	635,077.		635,077.	
<b>d</b> Lobbying	852,200.	852,200.		
<b>e</b> Professional fundraising services. See Part IV, line 17	341,050.			341,050.
<b>f</b> Investment management fees	42,679,378.		42,679,378.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	155,734,291.	154,446,434.		1,287,857.
<b>12</b> Advertising and promotion	2,515,286.	2,480,680.		34,606.
<b>13</b> Office expenses	105,627,624.	105,037,384.		590,240.
<b>14</b> Information technology	32,172,588.	31,679,761.	322,490.	170,337.
<b>15</b> Royalties				
<b>16</b> Occupancy	137,416,285.	129,150,882.	6,741,271.	1,524,132.
<b>17</b> Travel	57,114,886.	51,528,544.	4,829,606.	756,736.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	4,078,223.	4,030,925.		47,298.
<b>20</b> Interest	31,343,471.	28,626,945.	2,716,526.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	176,635,688.	161,087,758.	15,547,930.	
<b>23</b> Insurance	5,222,962.	1,268,216.	3,943,125.	11,621.
<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> BOND REFUNDING	46,463,985.		46,463,985.	
<b>b</b> LIBRARY	6,475,153.	6,475,153.		
<b>c</b> DUES AND FEES	4,080,088.	2,971,006.	1,028,995.	80,087.
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,286,604,355.	2,033,830,998.	230,683,171.	22,090,186.
<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)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	565,200,468.	<b>2</b>	544,372,491.
	<b>3</b> Pledges and grants receivable, net .....	137,333,775.	<b>3</b>	143,006,746.
	<b>4</b> Accounts receivable, net .....	82,878,253.	<b>4</b>	82,289,676.
	<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 .....	47,610,549.	<b>7</b>	45,383,745.
	<b>8</b> Inventories for sale or use .....	5,212,190.	<b>8</b>	5,274,467.
	<b>9</b> Prepaid expenses and deferred charges .....	15,772,295.	<b>9</b>	15,650,017.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 4,387,733,522.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 2,604,637,661.	1,774,064,792.	<b>10c</b> 1,783,095,861.
	<b>11</b> Investments - publicly traded securities .....	1,303,971,421.	<b>11</b>	1,621,158,759.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	2,264,565,458.	<b>12</b>	2,371,831,801.
	<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 .....	32,949,694.	<b>15</b>	27,893,029.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	6,229,558,895.	<b>16</b>	6,639,956,592.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	759,393,222.	<b>17</b>	730,898,088.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	113,489,458.	<b>19</b>	117,298,206.
	<b>20</b> Tax-exempt bond liabilities .....	848,647,840.	<b>20</b>	95,909,254.
	<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 .....	100,301,648.	<b>24</b>	843,469,835.
	<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 .....	220,053,231.	<b>25</b>	177,311,674.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	2,041,885,399.	<b>26</b>	1,964,887,057.
<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 .....	2,764,269,073.	<b>27</b>	3,105,495,219.
	<b>28</b> Temporarily restricted net assets .....	714,738,032.	<b>28</b>	829,573,540.
	<b>29</b> Permanently restricted net assets .....	708,666,391.	<b>29</b>	740,000,776.
	<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 .....	4,187,673,496.	<b>33</b>	4,675,069,535.	
<b>34</b> Total liabilities and net assets/fund balances .....	6,229,558,895.	<b>34</b>	6,639,956,592.	

**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>	2,489,287,226.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,286,604,355.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	202,682,871.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	4,187,673,496.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	284,713,168.
<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>	4,675,069,535.

**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** (2016)

**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.

OMB No. 1545-0047

**2016**

**Open to Public Inspection**

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

<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 12, 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - 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 1-10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	280,524,868.	262,013,513.	266,296,975.	255,591,396.	261,078,515.	1325505267.
<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 .....	280,524,868.	262,013,513.	266,296,975.	255,591,396.	261,078,515.	1325505267.
<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.						1325505267.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>7</b> Amounts from line 4 .....	280,524,868.	262,013,513.	266,296,975.	255,591,396.	261,078,515.	1325505267.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	92,439,625.	118,278,396.	97,949,398.	105,878,260.	101,861,693.	516,407,372.
<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						1841912639.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	10,974,647,153.
<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 2016 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	71.96 %
<b>15</b> Public support percentage from 2015 Schedule A, Part II, line 14 .....	<b>15</b>	71.81 %
<b>16a 33 1/3% support test - 2016.</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 - 2015.</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 - 2016.</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 - 2015.</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 10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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 2016 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2016.** 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 - 2015.** 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 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**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 12a or 12b 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 (explain in Part VI.) **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>			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).		

**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 2016 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-2016	(iii) Distributable Amount for 2016
<b>1</b> Distributable amount for 2016 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
<b>3</b> Excess distributions carryover, if any, to 2016:			
<b>a</b>			
<b>b</b>			
<b>c</b> From 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2016 distributable amount			
<b>i</b> Carryover from 2011 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2016 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
<b>6</b> Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
<b>7 Excess distributions carryover to 2017.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b> Excess from 2013			
<b>c</b> Excess from 2014			
<b>d</b> Excess from 2015			
<b>e</b> Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016



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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2016**

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 campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**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) 2016

**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) 2013	(b) 2014	(c) 2015	(d) 2016	(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		1,200.
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		782,593.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....	X		34,042.
<b>i</b> Other activities? .....	X		34,365.
<b>j</b> Total. Add lines 1c through 1i .....			852,200.
<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 campaign activity 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 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](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016**

**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.

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

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

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

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

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

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

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

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

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

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

Yes  No

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

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

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

Yes  No

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

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ 110,518.

(ii) Assets included in Form 990, Part X .....

▶ \$ 20,948,525.

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

a Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

Schedule D (Form 990) 2016

**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	3,546,457,502.	3,610,394,535.	3,514,182,929.	2,994,206,727.	2,635,486,831.
b Contributions	85,727,000.	146,232,000.	170,666,000.	72,154,000.	175,799,000.
c Net investment earnings, gains, and losses	460,807,000.	-92,997,000.	28,750,000.	544,698,000.	272,742,000.
d Grants or scholarships	15,963,945.	15,121,076.	13,682,152.	12,523,742.	11,943,973.
e Other expenditures for facilities and programs	94,405,682.	89,565,299.	77,593,656.	73,337,472.	68,389,130.
f Administrative expenses	12,574,901.	12,485,658.	11,928,586.	11,014,584.	9,488,001.
g End of year balance	3,970,046,974.	3,546,457,502.	3,610,394,535.	3,514,182,929.	2,994,206,727.

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

- a Board designated or quasi-endowment  61.30 %
- b Permanent endowment  38.10 %
- 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		63,533,020.		63,533,020.
b Buildings		3,150,047,210.	1,816,919,878.	1,333,127,332.
c Leasehold improvements				
d Equipment		746,029,840.	534,879,868.	211,149,972.
e Other		428,123,452.	252,837,915.	175,285,537.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,783,095,861.

**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	1,274,406,268.	END-OF-YEAR MARKET VALUE
(B) COMMINGLED INVESTMENTS IN PUBLIC SEC.	1,095,471,544.	END-OF-YEAR MARKET VALUE
(C) INSURANCE CSV & INSURANCE SURPLUS	1,953,989.	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.) ▶	2,371,831,801.	

**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	34,337,855.
(3) PRESENT VALUE OF SPLIT INTEREST AGREEMENTS	12,261,181.
(4) OTHER LIABILITIES	2,558,346.
(5) CONDITIONAL ASSET REMEDIATION OBLIGATION	30,643,555.
(6) INTEREST RATE SWAP AGREEMENTS	77,315,079.
(7) AMOUNTS HELD IN CUSTODY	11,246,149.
(8) LEASE CONSTRUCTION/CAPITAL LEASE OBLIGATION	8,949,509.
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	177,311,674.

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>	2,563,072,100.
<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> 284,713,168.		
<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> 19,648,299.		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	304,361,467.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	2,258,710,633.
<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> 42,679,378.		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b> 187,897,215.		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	230,576,593.
<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>	2,489,287,226.

**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>	2,075,676,061.
<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> 19,648,299.		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	19,648,299.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	2,056,027,762.
<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> 42,679,378.		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b> 187,897,215.		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	230,576,593.
<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>	2,286,604,355.

**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 2017 OR 2016.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF COST OF SALES-AUX FROM EXPENSE 8,689,966.

RECLASS OF EXTERNAL TENANT RENTAL EXPS FROM EXPENSE 10,958,333.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 19,648,299.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TUITION DISCOUNTS TO FINANCIAL AID EXPENSE 187,897,215.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF COST OF SALES-AUX TO REVENUE 8,689,966.

RECLASS OF EXTERNAL TENANT RENTAL EXPS TO REVENUE 10,958,333.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 19,648,299.

**Part XIII** Supplemental Information (continued)

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TUITION DISCOUNTS TO FINANCIAL AID EXPENSE 187,897,215.

Horizontal lines for supplemental information entries.



**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

**2016**

**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 **UNIVERSITY OF PITTSBURGH** Employer identification number **25-0965591**

**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? .....	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? .....	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 .....	X	
<p><u>THE STATEMENT OF NONDISCRIMINATION AND LINKS TO RELATED</u> <u>POLICY AND PROCEDURES ARE PRINTED ANNUALLY IN THE UNIVERSITY</u> <u>TIMES AND PITT NEWS (AUGUST 2016).</u></p>		
<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? .....	X	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	X	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	X	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? .....	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
<b>5</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? .....		X
<b>b</b> Admissions policies? .....		X
<b>c</b> Employment of faculty or administrative staff? .....		X
<b>d</b> Scholarships or other financial assistance? .....		X
<b>e</b> Educational policies? .....		X
<b>f</b> Use of facilities? .....		X
<b>g</b> Athletic programs? .....		X
<b>h</b> Other extracurricular activities? .....		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? .....	X	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? .....		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 .....	X	

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

Schedule E (Form 990 or 990-EZ) 2016

**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

**2016**

**Open to Public  
Inspection**

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

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

- 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**
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	155,109.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	2,415,123.
EUROPE	1	2	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	10,923,808.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	221,000.
NORTH AMERICA	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	1,905,886.
RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	22,674.
SOUTH AMERICA	1	3	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	811,491.
SOUTH ASIA	0	0	PROGRAM SERVICES.	PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS.	680,698.
<b>3 a</b> Sub-total .....	2	5			17,135,789.
<b>b</b> Total from continuation sheets to Part I .....	0	0			36,733,888.
<b>c Totals</b> (add lines 3a and 3b) .....	2	5			53,869,677.

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

Schedule F (Form 990) 2016

**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.	586,595.
EAST ASIA AND THE PACIFIC	0	0	INVESTMENTS.		14,498,446.
EUROPE	0	0	INVESTMENTS.		16,995,795.
NORTH AMERICA	0	0	INVESTMENTS.		4,653,052.
<b>Totals</b> .....					36,733,888.

**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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH SUBCONTRACT.	520,166.	WIRE/CHECK	0.		
		EUROPE	RESEARCH SUBCONTRACT.	1,624,197.	WIRE/CHECK	0.		
		MIDDLE EAST AND NORTH AFRICA	RESEARCH SUBCONTRACT.	157,166.	WIRE/CHECK	0.		
		NORTH AMERICA	RESEARCH SUBCONTRACT.	380,079.	WIRE/CHECK	0.		
		SOUTH AMERICA	RESEARCH SUBCONTRACT.	47,345.	WIRE/CHECK	0.		
		SOUTH ASIA	RESEARCH SUBCONTRACT.	161,505.	WIRE/CHECK	0.		
		SUB-SAHARAN AFRICA	RESEARCH SUBCONTRACT	160,955.	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 ..... **36**

3 Enter total number of other organizations or entities ..... **19**

**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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
RESEARCH SUBCONTRACT	CENTRAL AMERICA AND THE CARIBBEAN	14	47,020.	WIRE/CHECK	0.		
SCHOLARSHIPS	EUROPE	13	31,623.	TUITION REFUND	0.		
SCHOLARSHIPS	SOUTH AMERICA	7	38,250.	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) 2016

**Part V Supplemental Information**

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

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)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 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

**2016**

Open to Public Inspection

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 10 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 MARTS & LUNDY - 1200 WALNUT STREET WEST 5TH FL, PURSUANT - 5151 BELT LINE ROAD SUITE 900, DALLAS, TX	DIRECT MAIL SOLICITATION AND CONSULTING		X	145,710.	35,187.	110,523.
RUFFALO NOEL LEVITZ - 65 KIRKWOOD NO RD SW, CEDAR SIMPSON SCARBOROUGH - 1737 KING ST STE 110, ALEXANDRIA, DAVINCI DIRECT, INC. - 36 CORDAGE PARK CIRCLE SUITE GRENZEBACH GLIER & ASSOCIATES, INC. - 401 N.	CONSULTING-SEE PART IV		X	0.	6,250.	-6,250.
	CONSULTING-SEE PART IV		X	0.	94,980.	-94,980.
	CONSULTING-SEE PART IV		X	0.	33,518.	-33,518.
	CONSULTING-SEE PART IV		X	0.	50,896.	-50,896.
	CONSULTING-SEE PART IV		X	0.	75,145.	-75,145.
	CONSULTING-SEE PART IV		X	0.	44,636.	-44,636.
<b>Total</b>				145,710.	340,612.	-194,902.

- 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, IN, IA, KS, KY, LA, ME, MD, MI, MN, MS, MO, MT, NE, NH, NM  
NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VT, VA, WV, WY, HI

**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 .....	287,298.	115,000.	700,633.	1,102,931.
	<b>2</b> Less: Contributions .....	207,778.	103,375.	572,180.	883,333.
	<b>3</b> Gross income (line 1 minus line 2) .....	79,520.	11,625.	128,453.	219,598.
Direct Expenses	<b>4</b> Cash prizes .....			18,000.	18,000.
	<b>5</b> Noncash prizes .....			2,907.	2,907.
	<b>6</b> Rent/facility costs .....	10,899.		113,143.	124,042.
	<b>7</b> Food and beverages .....	93,642.		273,949.	367,591.
	<b>8</b> Entertainment .....	1,000.		2,500.	3,500.
	<b>9</b> Other direct expenses .....	110,736.		147,861.	258,597.
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				774,637.
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) .....				-555,039.	

**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 .....				
Direct Expenses	<b>2</b> Cash prizes .....				
	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				
	<b>8</b> Net gaming income summary. 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		13a	%
b An outside facility		13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

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

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law 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: MARTS & LUNDY

(I) ADDRESS OF FUNDRAISER:

1200 WALNUT STREET WEST 5TH FL, LYNDHURST, NJ 07071

**Part IV** Supplemental Information (continued)

(I) NAME OF FUNDRAISER: PURSUANT

(I) ADDRESS OF FUNDRAISER: 5151 BELT LINE ROAD SUITE 900, DALLAS, TX 75254

(I) NAME OF FUNDRAISER: RUFFALO NOEL LEVITZ

(I) ADDRESS OF FUNDRAISER: 65 KIRKWOOD NO RD SW, CEDAR RAPIDS, IA 52406

(I) NAME OF FUNDRAISER: SIMPSON SCARBOROUGH

(I) ADDRESS OF FUNDRAISER: 1737 KING ST STE 110, ALEXANDRIA, VA 22314

(I) NAME OF FUNDRAISER: DAVINCI DIRECT, INC.

(I) ADDRESS OF FUNDRAISER:

36 CORDAGE PARK CIRCLE SUITE 339, PLYMOUTH, MA 02360

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

(I) ADDRESS OF FUNDRAISER:

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

SCHEDULE G, PART I

THE UNIVERSITY RETAINS GRENZEBACH GLIER & ASSOCIATES (GG&A), MARTS & LUNDY, PURSUANT, RUFFALO NOEL LEVITZ, SIMPSON SCARBOROUGH, AND DAVINCI DIRECT, INC. 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

**2016**

**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 noncash 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	8,404,457.	0.			RESEARCH- SUBCONTRACT
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE PITTSBURGH, PA 15213	25-0969449	501(C)(3)	6,354,740.	0.			RESEARCH- SUBCONTRACT
AMERICAN COLLEGE OF RADIOLOGY 1891 PRESTON WHITE DR RESTON, VA 20191	36-2261602	501(C)(3)	3,670,896.	0.			RESEARCH- SUBCONTRACT
HEALTH RESEARCH INC EMPIRE STATE PLAZA PO BOX 509 ALBANY, NY 12201	14-1402155	501(C)(3)	3,642,430.	0.			RESEARCH- SUBCONTRACT
JOHNS HOPKINS UNIVERSITY 1101 EAST 33RD ST BALTIMORE, MD 21218	52-0595110	501(C)(3)	3,133,266.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1111 FRANKLIN ST 10TH FL - OAKLAND, CA 94607	94-3067788	501(C)(3)	2,082,462.	0.			RESEARCH- SUBCONTRACT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **280.**
- 3** Enter total number of other organizations listed in the line 1 table **44.**

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

**Schedule I (Form 990) (2016)**

**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
HARVARD UNIVERSITY 1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	1,545,246.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF WASHINGTON GERBERDING HALL G80 SEATTLE, WA 98195	91-6001537	115	1,480,930.	0.			RESEARCH- SUBCONTRACT
CONSORTIUM FOR PUBLIC EDUCATION 410 9TH ST MCKEESPORT, PA 15132	25-1533592	501(C)(3)	1,437,338.	0.			RESEARCH- SUBCONTRACT
BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM - 700 REGENT ST, STE 301 - MADISON, WI 53715	39-6006492	115	1,436,147.	0.			RESEARCH- SUBCONTRACT
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE CLEVELAND, OH 44106	34-1018992	501(C)(3)	1,379,555.	0.			RESEARCH- SUBCONTRACT
INCUBE LABS, LLC 2051 RINGWOOD AVE SAN JOSE, CA 95131	20-8527547	N/A	1,366,842.	0.			RESEARCH- SUBCONTRACT
ARIZONA STATE UNIVERSITY BOX 873503 TEMPE, AZ 85287	86-0196696	115	1,259,718.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MARYLAND PO BOX 41428 BALTIMORE, MD 21203-6248	52-6002033	115	1,258,051.	0.			RESEARCH- SUBCONTRACT
WEST VIRGINIA UNIVERSITY RESEARCH CORP - PO BOX 6005 - MORGANTOWN, WV 26506	55-0665758	501(C)(3)	1,074,539.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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YALE UNIVERSITY 47 COLLEGE ST STE 203 NEW HAVEN, CT 06520	06-0646973	501(C)(3)	1,036,031.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S STATE ST - ANN ARBOR, MI 48109	38-6006309	501(C)(3)	1,027,684.	0.			RESEARCH- SUBCONTRACT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - P221 FRANKLIN 3451 WALNUT ST - PHILADELPHIA, PA 19104-6205	23-1352685	501(C)(3)	1,023,600.	0.			RESEARCH- SUBCONTRACT
COMMUNITY HUMAN SERVICES CORP 374 LAWN ST PITTSBURGH, PA 15213	25-1219610	501(C)(3)	928,430.	0.			RESEARCH- SUBCONTRACT
PENNSYLVANIA STATE UNIVERSITY ONE OLD MAIN UNIVERSITY PARK, PA 16802	24-6000376	115	902,890.	0.			RESEARCH- SUBCONTRACT
NORTHWESTERN UNIVERSITY 619 CLARK ST RM 217 EVANSTON, IL 60208	36-2167817	501(C)(3)	815,041.	0.			RESEARCH- SUBCONTRACT
VANDERBILT UNIVERSITY MEDICAL CENTER - 2525 WEST END AVE STE 450 - NASHVILLE, TN 37203	35-2528741	501(C)(3)	792,870.	0.			RESEARCH- SUBCONTRACT
STANFORD UNIVERSITY 3145 PORTER DR PALO ALTO, CA 94304	94-1156365	501(C)(3)	779,442.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF UTAH 540 ARAPEEN DR, STE 250 SALT LAKE CITY, UT 84108	87-6000525	501(C)(3)	761,905.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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TUFTS UNIVERSITY 169 HOLLAND ST SOMERVILLE, MA 02144	04-2103634	501(C)(3)	741,180.	0.			RESEARCH- SUBCONTRACT
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST BOSTON, MA 02114	04-1564655	501(C)(3)	741,166.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTHERN CALIFORNIA 837 W. DOWNEY WAY RM 315 LOS ANGELES, CA 90089	95-1642394	501(C)(3)	658,504.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL OF BOSTON 300 LONGWOOD AVE BOSTON, MA 02115	04-2774441	501(C)(3)	650,199.	0.			RESEARCH- SUBCONTRACT
OHIO STATE UNIVERSITY 154 WEST 12TH AVE COLUMBUS, OH 43210	31-6025986	501(C)(3)	621,354.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MASSACHUSETTS 225 FRANKLIN ST BOSTON, MA 02110	04-3167352	115	618,502.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF IOWA 201 GILMORE HALL IOWA CITY, IA 52242	42-6004813	115	604,229.	0.			RESEARCH- SUBCONTRACT
OHIO STATE UNIVERSITY RESEARCH FOUNDATION - 1960 KENNY RD - COLUMBUS, OH 43210	31-6401599	501(C)(3)	598,862.	0.			RESEARCH- SUBCONTRACT
COLUMBIA UNIVERSITY 615 WEST 131ST ST NEW YORK, NY 10027	13-5598093	501(C)(3)	592,026.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)



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WASHINGTON UNIVERSITY IN ST. LOUIS 7425 FORSYTH WEST CAMPUS CLAYTON, MO 63105	43-0653611	501(C)(3)	565,993.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ILLINOIS 506 S WRIGHT ST URBANA, IL 61801	37-6000511	501(C)(3)	557,554.	0.			RESEARCH- SUBCONTRACT
FOCUS ON RENEWAL 701 CHARTIERS AVE MCKEES ROCKS, PA 15136	23-7181440	501(C)(3)	533,969.	0.			RESEARCH- SUBCONTRACT
BRIGHAM AND WOMENS HOSPITAL INC 75 FRANCIS ST BOSTON, MA 02115	04-2312909	501(C)(3)	516,493.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TENNESSEE 201 ANDY HOLT TOWER KNOXVILLE, TN 37996	62-6001636	115	493,517.	0.			RESEARCH- SUBCONTRACT
VIRGINIA COMMONWEALTH UNIVERSITY 800 EAST LEHIGH ST RICHMOND, VA 23219	54-6001758	115	488,860.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF COLORADO 1800 N GRANT ST DENVER, CO 80203	84-6000555	501(C)(3)	474,576.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF VIRGINIA BOX 4001953 CHARLOTTESVILLE, VA 22904	54-6001786	115	473,609.	0.			RESEARCH- SUBCONTRACT
TEMPLE UNIVERSITY 1805 NORTH BROAD ST PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	454,613.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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VETERANS RESEARCH FOUNDATION OF PITTSBURGH - 7180 HIGHLAND DR - PITTSBURGH, PA 15206	25-1666090	501(C)(3)	445,647.	0.			RESEARCH- SUBCONTRACT
MEDICAL UNIVERSITY OF SOUTH CAROLINA - 17 ASHLEY AVE - CHARLESTON, SC 29403	57-6007222	115	438,041.	0.			RESEARCH- SUBCONTRACT
MAGEE-WOMENS RESEARCH INSTITUTE AND FOUNDATION - 3339 WARD ST - PITTSBURGH, PA 15213	25-1462312	501(C)(3)	437,636.	0.			RESEARCH- SUBCONTRACT
BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA NO T100 HOUSTON, TX 77030	74-1613878	501(C)(3)	421,645.	0.			RESEARCH- SUBCONTRACT
WAKE FOREST UNIVERSITY 1834 WAKE FOREST RD WINSTON-SALEM, NC 27106	56-0532138	501(C)(3)	410,501.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEBRASKA MEDICAL CENTER - 987835 NEBRASKA MEDICAL CENTER - OMAHA, NE 68198	47-0771713	501(C)(3)	401,812.	0.			RESEARCH- SUBCONTRACT
HEALTH FEDERATION OF PHILADELPHIA 1211 CHESTNUT ST STE 801 PHILADELPHIA, PA 19107	23-2244355	501(C)(3)	385,685.	0.			RESEARCH- SUBCONTRACT
RUSH UNIVERSITY MEDICAL CENTER 1700 W VAN BUREN RM 150 CHICAGO, IL 60612	36-2174823	501(C)(3)	380,250.	0.			RESEARCH- SUBCONTRACT
NEW YORK UNIVERSITY 726 BROADWAY- 9TH FL NEW YORK, NY 10003	13-5562308	501(C)(3)	379,953.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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UNIVERSITY OF MIAMI PO BOX 016960 MIAMI, FL 33101-5405	59-0624458	501(C)(3)	379,044.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ARIZONA PO BOX 3607 TUCSON, AZ 85722-3607	74-2652689	115	376,747.	0.			RESEARCH- SUBCONTRACT
TURTLE CREEK VALLEY MH/MR INC 723 BRADDOCK AVE BRADDOCK, PA 15104	25-1250510	501(C)(3)	369,137.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF FLORIDA PO BOX 115500 GAINESVILLE, FL 32611	59-6002052	115	365,039.	0.			RESEARCH- SUBCONTRACT
GENEVA FOUNDATION 917 PACIFIC AVE STE 600 TACOMA, WA 98402	91-1593913	501(C)(3)	359,514.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - 104 AIRPORT DR - CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	358,650.	0.			RESEARCH- SUBCONTRACT
BLACKROCK MICROSYSTEMS 630 KOMAS DR NO 200 SALT LAKE CITY, UT 84108	26-2659394	N/A	356,000.	0.			RESEARCH- SUBCONTRACT
ICAHN SCHOOL OF MEDICINE AT MT SINAI - ONE GUSTAVE LEVY PL - NEW YORK, NY 10029	13-6171197	501(C)(3)	340,980.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF DELAWARE 83 E. MAIN ST, 3RD FL NEWARK, DE 19716	51-6000297	501(C)(3)	335,153.	0.			RESEARCH- SUBCONTRACT

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IHC HEALTH SERVICES INC 36 S STATE ST STE 2200 SALT LAKE CITY, UT 84111	94-2854057	501(C)(3)	333,798.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CALIFORNIA SAN FRANCISCO - 220 MONTGOMERY ST, 5TH FL - SAN FRANCISCO, CA 94104	94-6036493	501(C)(3)	328,896.	0.			RESEARCH- SUBCONTRACT
BOSTON MEDICAL CENTER 1 BOSTON MEDICAL CENTER PL BOSTON, MA 02118	04-3314093	501(C)(3)	328,196.	0.			RESEARCH- SUBCONTRACT
HOWARD UNIVERSITY 576 W ST NW WASHINGTON, DC 20059	53-0204707	501(C)(3)	319,879.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF PUERTO RICO PO BOX 365067 SAN JUAN, PR 00936	66-0433762	N/A	319,098.	0.			RESEARCH- SUBCONTRACT
VANDERBILT UNIVERSITY VU STATION B BOX 356310 NASHVILLE, TN 37235	62-0476822	501(C)(3)	300,118.	0.			RESEARCH- SUBCONTRACT
RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY - 65 DAVIDSON RD- RM 317 - PISCATAWAY, NJ 08854	22-6001086	501(C)(3)	293,664.	0.			RESEARCH- SUBCONTRACT
BROWN UNIVERSITY 164 ANGELL ST PROVIDENCE, RI 02912	05-0258809	501(C)(3)	292,640.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS-MD ANDERSON CANCER CENTER - PO BOX 4930 - HOUSTON, TX 77210-4390	74-6001118	115	292,040.	0.			RESEARCH- SUBCONTRACT

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UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER - 7703 FLOYD CURL DR - SAN ANTONIO, TX 78229	74-1586031	115	279,006.	0.			RESEARCH- SUBCONTRACT
NYU SCHOOL OF MEDICINE PO BOX 415026 BOSTON, MA 02241	13-5562309	501(C)(3)	273,533.	0.			RESEARCH- SUBCONTRACT
FLORIDA INTERNATIONAL UNIVERSITY GREEN LIBRARY RM 273 MIAMI, FL 33199	65-0177616	115	271,806.	0.			RESEARCH- SUBCONTRACT
GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR FAIRFAX, VA 22030	54-0836354	115	271,547.	0.			RESEARCH- SUBCONTRACT
CHILDRENS RESEARCH INSTITUTE 9000 W WISCONSIN AVE PO BOX 1997 MILWAUKEE, WI 53201	20-2180646	N/A	263,077.	0.			RESEARCH- SUBCONTRACT
RAND CORPORATION 1776 MAIN ST SANTA MONICA, CA 90407	95-1958142	N/A	262,142.	0.			RESEARCH- SUBCONTRACT
CHRISTIANA CARE HEALTH SERVICES PO BOX 2653 WILMINGTON, DE 19805	51-0103684	501(C)(3)	261,000.	0.			RESEARCH- SUBCONTRACT
PSYCHOLOGY SOFTWARE TOOLS INC 2050 ARDMORE BLVD STE 200 PITTSBURGH, PA 15221	25-1551170	N/A	257,940.	0.			RESEARCH- SUBCONTRACT
DANA-FARBER CANCER INSTITUTE 44 BINNER ST STE BP600 BOSTON, MA 02115	04-2263040	501(C)(3)	251,109.	0.			RESEARCH- SUBCONTRACT

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UNIVERSITY OF NOTRE DAME 724 GRACE HALL NOTRE DAME, IN 46556	35-0868188	501(C)(3)	247,518.	0.			RESEARCH- SUBCONTRACT
MAYO CLINIC ROCHESTER 200 FIRST ST SW ROCHESTER, MN 55905	41-6011702	501(C)(3)	246,575.	0.			RESEARCH- SUBCONTRACT
REHABILITATION INSTITUTE OF CHICAGO - 345 E SUPERIOR ST - CHICAGO, IL 60611	36-2256036	501(C)(3)	230,100.	0.			RESEARCH- SUBCONTRACT
UGA RESEARCH FOUNDATION INC 424 BROAD ST ATHENS, GA 30602	58-6001998	115	228,913.	0.			RESEARCH- SUBCONTRACT
ANSYS INC 2600 ANSYS DR CANONSBURG, PA 15317	04-3219960	N/A	227,750.	0.			RESEARCH- SUBCONTRACT
WAYNE STATE UNIVERSITY 5700 CASS AVE DETROIT, MI 48202	38-3555142	501(C)(3)	224,864.	0.			RESEARCH- SUBCONTRACT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVE NE 49-3131 - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	222,142.	0.			RESEARCH- SUBCONTRACT
CORNELL UNIVERSITY 341 PINE ST ITHACA, NY 14850	15-0532082	501(C)(3)	219,795.	0.			RESEARCH- SUBCONTRACT
GEISINGER CLINIC N ACADEMY AVE DANVILLE, PA 17822	23-6291113	501(C)(3)	217,481.	0.			RESEARCH- SUBCONTRACT

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KESSLER FOUNDATION 300 EXECUTIVE DR STE 150 WEST ORANGE, NJ 07052	31-1562134	501(C)(3)	210,621.	0.			RESEARCH- SUBCONTRACT
INOVA HEALTH CARE SERVICES 2832 JUNIPER ST STE 104 FAIRFAX, VA 22031	54-0620889	501(C)(3)	208,684.	0.			RESEARCH- SUBCONTRACT
COVANCE LABORATORIES INC PO BOX 2484 BURLINGTON, NC 27216	54-0898188	N/A	201,421.	0.			RESEARCH- SUBCONTRACT
WAKE FOREST UNIVERSITY SCHOOL OF MEDICINE - MEDICAL CENTER BLVD - WINSTON-SALEM, NC 27157	22-3849199	501(C)(3)	190,021.	0.			RESEARCH- SUBCONTRACT
FAMILY HEALTH INTERNATIONAL 359 BLACKWELL ST DURHAM, NC 27701	23-7413005	501(C)(3)	188,889.	0.			RESEARCH- SUBCONTRACT
EMORY UNIVERSITY 201 DOWAN DR ATLANTA, GA 30322	58-0566256	501(C)(3)	184,997.	0.			RESEARCH- SUBCONTRACT
GE GLOBAL RESEARCH 500 1ST AVE PITTSBURGH, PA 15219	14-0689340	N/A	179,360.	0.			RESEARCH- SUBCONTRACT
IRETA 425 SIXTH AVE PITTSBURGH, PA 15219	25-1857820	501(C)(3)	179,310.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DR SAN DIEGO, CA 92093	95-6006144	501(C)(3)	177,896.	0.			RESEARCH- SUBCONTRACT

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STATE OF TENNESSEE 710 JAMES ROBERTSON PKWY NASHVILLE, TN 37423	62-6001445	115	176,737.	0.			RESEARCH- SUBCONTRACT
FENWAY COMMUNITY HEALTH CENTER INC 1340 BOYLSTON ST BOSTON, MA 02215	04-2510564	501(C)(3)	168,362.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS AT AUSTIN PO BOX 7458 AUSTIN, TX 78713-7458	74-6000203	115	167,623.	0.			RESEARCH- SUBCONTRACT
TRUSTEES OF PRINCETON UNIVERSITY WASHINGTON ROAD PRINCETON, NJ 08544	21-0634501	501(C)(3)	159,141.	0.			RESEARCH- SUBCONTRACT
FRED HUTCHINSON CANCER RESEARCH 1100 FAIRVIEW AVE NORTH SEATTLE, WA 98109	23-7156071	501(C)(3)	152,295.	0.			RESEARCH- SUBCONTRACT
TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER - BOX 41023 - LUBBOCK, TX 79409-1023	75-6002622	115	150,460.	0.			RESEARCH- SUBCONTRACT
MARICOPA INTEGRATED HEALTH SYSTEMS 2619 PIERCE ST PHOENIX, AZ 85008	86-0830701	N/A	150,222.	0.			RESEARCH- SUBCONTRACT
MICHIGAN STATE UNIVERSITY 301 ADMIN BLDG. EAST LANSING, MI 48824	38-6005984	501(C)(3)	148,385.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVE CINCINNATI, OH 45229	31-0833936	501(C)(3)	147,685.	0.			RESEARCH- SUBCONTRACT

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SALK INSTITUTE 10010 N TORREY PINES RD LA JOLLA, CA 92037-1099	95-2160097	501(C)(3)	147,677.	0.			RESEARCH- SUBCONTRACT
HUGO W MOSER RESEARCH INSTITUTE AT KENNEDY KRIEGER INC - 707 N BROADWAY - BALTIMORE, MD 21205	52-1524967	501(C)(3)	146,446.	0.			RESEARCH- SUBCONTRACT
BIOQUEST CURRICULUM CONSORTIUM PO BOX 45032 MADISON, WI 53744	45-3644991	501(C)(3)	141,966.	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)	141,687.	0.			RESEARCH- SUBCONTRACT
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE, WA 98145	91-0564748	501(C)(3)	139,938.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION - 520 STEVENSON HALL - LOUISVILLE, KY 40292	61-1029626	501(C)(3)	138,675.	0.			RESEARCH- SUBCONTRACT
KENTUCKY PEDIATRIC/ADULT RESEARCH 201 SOUTH 5TH ST BARDSTOWN, KY 40004	61-1206931	N/A	136,480.	0.			RESEARCH- SUBCONTRACT
UPMC COMMUNITY PROVIDER SERVICES 600 GRANT ST FL 56 PITTSBURGH, PA 15219	25-1804746	501(C)(3)	135,077.	0.			RESEARCH- SUBCONTRACT
PPD DEVELOPMENT LP 26361 NETWORK PLACE CHICAGO, IL 60693-1263	74-2325267	N/A	134,390.	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
THOMAS JEFFERSON UNIVERSITY 1020 WALNUT ST PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	132,643.	0.			RESEARCH- SUBCONTRACT
NATIONAL JEWISH HEALTH 1400 JACKSON ST DENVER, CO 80206	74-2044647	501(C)(3)	131,410.	0.			RESEARCH- SUBCONTRACT
ALBERT EINSTEIN COLLEGE OF MEDICINE - 500 WEST 185TH ST - NEW YORK, NY 10033	23-7075620	501(C)(3)	131,064.	0.			RESEARCH- SUBCONTRACT
DUQUESNE UNIVERSITY OF THE HOLY SPIRIT - 600 FORBES AVE - PITTSBURGH, PA 15219	25-1035663	501(C)(3)	130,000.	0.			RESEARCH- SUBCONTRACT
INDIANA UNIVERSITY 400 E 7TH ST RM 501 BLOOMINGTON, IN 47405	35-6001673	115	128,453.	0.			RESEARCH- SUBCONTRACT
BETH ISRAEL DEACONESS MEDICAL CENTER - 300 BROOKLINE AVE - BOSTON, MA 02215	04-2103881	501(C)(3)	128,017.	0.			RESEARCH- SUBCONTRACT
ALLEGHENY-SINGER RESEARCH INSTITUTE - TWO ALLEGHENY CENTER - PITTSBURGH, PA 15212	25-1320493	501(C)(3)	127,556.	0.			RESEARCH- SUBCONTRACT
TREASURER OF VIRGINIA TECH 301 BURRUS HALL MAIL CODE 0244 BLACKSBURG, VA 24061	54-6001805	115	124,567.	0.			RESEARCH- SUBCONTRACT
DREXEL UNIVERSITY 3201 ARCH ST NO. 420 PHILADELPHIA, PA 19104-2875	23-1352630	501(C)(3)	123,998.	0.			RESEARCH- SUBCONTRACT

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PONCE SCHOOL MEDICINE PO BOX 7004 PONCE, PR 007327004	66-0379122	501(C)(3)	122,504.	0.			RESEARCH- SUBCONTRACT
OREGON HEALTH & SCIENCE UNIVERSITY 1121 SW SALMON ST PORTLAND, OR 97205	23-7083114	501(C)(3)	119,748.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL OF PHILADELPHIA - 3615 CIVIC CENTER BLVD - PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	115,800.	0.			RESEARCH- SUBCONTRACT
J CRAIG VENTER INSTITUTE 9712 MEDICAL CENTER DR ROCKVILLE, MD 20850	52-1842938	501(C)(3)	113,589.	0.			RESEARCH- SUBCONTRACT
GEORGIA REGENTS RESEARCH INSTITUTE INC - 1120 15TH ST - AUGUSTA, GA 30912	58-1418202	501(C)(3)	109,352.	0.			RESEARCH- SUBCONTRACT
REVIVICOR INC 1700 KRAFT DR STE 2400 BLACKSBURG, VA 24060	81-0604263	N/A	106,456.	0.			RESEARCH- SUBCONTRACT
VAN ANDEL RESEARCH INSTITUTE 333 BOSTWICK AVE NE GRAND RAPIDS, MI 49503	52-2000823	501(C)(3)	103,807.	0.			RESEARCH- SUBCONTRACT
ITAMCO 6100 MICHIGAN RD PLYMOUTH, IN 46563	35-0987380	N/A	101,629.	0.			RESEARCH- SUBCONTRACT
ALBERT EINSTEIN HEALTHCARE NETWORK 5501 OLD YORK RD PHILADELPHIA, PA 19141	23-2290323	501(C)(3)	101,300.	0.			RESEARCH- SUBCONTRACT

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URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD ST PITTSBURGH, PA 15222	25-0965592	501(C)(3)	100,125.	0.			RESEARCH- SUBCONTRACT
MEHARRY MEDICAL COLLEGE 1005 DR. D.B. TODD JR. BLVD NASHVILLE, TN 37208	62-0488046	501(C)(3)	99,524.	0.			RESEARCH- SUBCONTRACT
NORTH CAROLINA STATE UNIVERSITY 2701 SULLIVAN DR, STE 240 RALEIGH, NC 27695	56-6000756	115	98,213.	0.			RESEARCH- SUBCONTRACT
JACKSON LABORATORY PO BOX 254 BAR HARBOR, ME 04609	01-0211513	501(C)(3)	94,591.	0.			RESEARCH- SUBCONTRACT
ROKET LLC 6740 REYNOLDS ST STE 2 PITTSBURGH, PA 15206	46-4721203	N/A	90,000.	0.			RESEARCH- SUBCONTRACT
SCRIPPS RESEARCH INSTITUTE 10550 N TORREY PINES RD LA JOLLA, CA 92037	33-0435954	501(C)(3)	89,666.	0.			RESEARCH- SUBCONTRACT
CENTER FOR ORGAN RECOVERY & EDUCATION - 204 SIGMA DR - PITTSBURGH, PA 15238	25-1332885	501(C)(3)	87,727.	0.			RESEARCH- SUBCONTRACT
CHAPIN HALL CENTER FOR CHILDREN 131 EAST 60TH ST CHICAGO, IL 60637	36-2167012	501(C)(3)	87,412.	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)	86,183.	0.			RESEARCH- SUBCONTRACT

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USDA 2301 NORTH CAMERON ST HARRISBURG, PA 17110	72-0564834	115	83,902.	0.			RESEARCH- SUBCONTRACT
RESEARCH INSTITUTE AT NATIONWIDE CHILDREN'S HOSPITAL - PO BOX 715245 - COLUMBUS, OH 43271	31-6056230	501(C)(3)	83,374.	0.			RESEARCH- SUBCONTRACT
RADFORD UNIVERSITY PO BOX 6901 RADFORD, VA 24142	54-6001789	115	83,217.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MISSOURI COLUMBIA 15 JESSE HALL COLUMBIA, MO 65211	43-6003859	115	82,499.	0.			RESEARCH- SUBCONTRACT
NORTHERN CALIFORNIA INSTITUTE FOR RESEARCH AND EDUCATION - 4150 CLEMENT ST - SAN FRANCISCO, CA 94121	94-3084159	501(C)(3)	78,897.	0.			RESEARCH- SUBCONTRACT
DUKE UNIVERSITY 324 BLACKWELL ST DURHAM, NC 27708	56-0532129	501(C)(3)	78,421.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CHICAGO 6054 S DREXEL AVE NO 300 CHICAGO, IL 60637	36-2177139	501(C)(3)	78,003.	0.			RESEARCH- SUBCONTRACT
INSTITUTE FOR PUBLIC HEALTH INNOVATION - 1301 CONNECTICUT AVE NW STE 200 - WASHINGTON, DC 20036	46-3039129	501(C)(3)	75,301.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ALASKA 3700 SHARON GAGNON LN ANCHORAGE, AK 99508	92-6000147	501(C)(3)	74,844.	0.			RESEARCH- SUBCONTRACT

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LOS ALAMOS NATIONAL LABORATORY PO BOX 1663, MAIL STOP P245 LOS ALAMOS, NM 87545	85-6004458	N/A	71,498.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CONNECTICUT 438 WHITNEY ROAD EXT. UNIT 1133 STORRS, CT 06269	06-0772160	115	69,333.	0.			RESEARCH- SUBCONTRACT
TEXAS A&M RESEARCH FOUNDATION 400 HARVEY MITCHELL PKWY S NO 300 COLLEGE STATION, TX 77845	74-1238434	501(C)(3)	68,915.	0.			RESEARCH- SUBCONTRACT
JARUS HEALTH TECHNOLOGIES LLC 681 ANDERSEN DR, 3RD FLOOR PITTSBURGH, PA 15220	81-1866960	N/A	67,500.	0.			RESEARCH- SUBCONTRACT
CAROLINAS HEALTHCARE SYSTEM 501 BILLINGSLEY RD CHARLOTTE, NC 28211	56-0529945	N/A	67,200.	0.			RESEARCH- SUBCONTRACT
BOSTON VA RESEARCH INSTITUTE 150 S HUNTINGTON AVE BOSTON, MA 02130	04-3081524	501(C)(3)	67,184.	0.			RESEARCH- SUBCONTRACT
RIPPLE LLC 2056 SOUTH 100 EAST SALT LAKE CITY, UT 84106	20-0944755	N/A	67,064.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS MEDICAL BRANCH OFFICE OF SPONSORED PROGRAMS PO BOX 4786-750 - HOUSTON, TX 77210-4786	74-6000949	115	64,084.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEBRASKA 3835 HOLDREGE ST LINCOLN, NE 68583	47-0049123	501(C)(3)	61,106.	0.			RESEARCH- SUBCONTRACT

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NATIONAL MARROW DONOR PROGRAM 500 N 5TH ST MINNEAPOLIS, MN 55401	84-0865803	501(C)(3)	60,581.	0.			RESEARCH- SUBCONTRACT
BANYAN BIOMARKERS INC 12085 RESEARCH DR ALACHUA, FL 32615	20-1449566	N/A	59,917.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION - 301 PETERSON SERVICE BUILDING - LEXINGTON, KY 40506	61-6033693	501(C)(3)	59,601.	0.			RESEARCH- SUBCONTRACT
AMERICAN INSTITUTES FOR RESEARCH 1000 THOMAS JEFFERSON ST NW WASHINGTON, DC 20007	25-0965219	501(C)(3)	58,476.	0.			RESEARCH- SUBCONTRACT
PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION - 11720 BELTSVILLE DR - CALVERTON, MD 20705	94-2243283	501(C)(3)	57,613.	0.			RESEARCH- SUBCONTRACT
UNITED TECHNOLOGIES RESEARCH CENTER - 400 SILVER LN - EAST HARTFORD, CT 06118	06-0570975	N/A	56,466.	0.			RESEARCH- SUBCONTRACT
THE WISTAR INSTITUTE OF ANATOMY & BIOLOGY - 3601 SPRUCE ST - PHILADELPHIA, PA 19104	23-6434390	501(C)(3)	55,671.	0.			RESEARCH- SUBCONTRACT
ROSALIND FRANKLIN UNIVERSITY OF MEDICINE & SCIENCE - 3333 GREEN BAY RD - NORTH CHICAGO, IL 60064	36-2181973	501(C)(3)	54,646.	0.			RESEARCH- SUBCONTRACT
CENTER FOR BLACK EQUITY INC 1806 VERNON ST NW STE 200 WASHINGTON, DC 20009	20-0302937	N/A	54,188.	0.			RESEARCH- SUBCONTRACT

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UNIVERSITY OF KANSAS RESEARCH INSTITUTE - MAILSTOP 1039 - KANSAS CITY, KS 66160	48-1108830	501(C)(3)	52,572.	0.			RESEARCH- SUBCONTRACT
BUCKNELL UNIVERSITY 112 MARTS HALL LEWISBURG, PA 17837	24-0772407	501(C)(3)	50,577.	0.			RESEARCH- SUBCONTRACT
SCHUYLKILL COUNTY'S VISION 1464 B ROUTE 61 SOUTH POTTSVILLE, PA 17901	23-2965219	501(C)(3)	50,000.	0.			RESEARCH- SUBCONTRACT
CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD LOS ANGELES, CA 90048	95-1644600	501(C)(3)	49,234.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTH CAROLINA PO BOX 84900 COLUMBIA, SC 29208	57-6001153	115	48,926.	0.			RESEARCH- SUBCONTRACT
ANN & ROBERT H LURIE CHILDREN'S HOSPITAL - 225 EAST CHICAGO AVE BOX #205 - CHICAGO, IL 60611	36-2170833	501(C)(3)	44,207.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER - 5323 HARRY HINES BLVD. - DALLAS, TX 75390	75-6002868	115	43,571.	0.			RESEARCH- SUBCONTRACT
GEORGIA STATE UNIVERSITY PO BOX 3999 ATLANTA, GA 30302	58-1845423	501(C)(3)	42,716.	0.			RESEARCH- SUBCONTRACT
WOODS HOLE OCEANOGRAPHIC INSTITUTION - 569 WOODS HOLE RD - WOODS HOLE, MA 02543	04-2105850	501(C)(3)	42,162.	0.			RESEARCH- SUBCONTRACT

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GIANT EAGLE INC 101 KAPPA DR PITTSBURGH, PA 15238	25-0698270	N/A	42,065.	0.			RESEARCH- SUBCONTRACT
PALO ALTO VETERANS INSTITUTE FOR RESEARCH - 3801 MIRANDA AVE - PALO ALTO, CA 94304	77-0207331	501(C)(3)	41,611.	0.			RESEARCH- SUBCONTRACT
CONNECTICUT COLLEGE 270 MOHEGAN AVE NEW LONDON, CT 06320	06-0646587	501(C)(3)	40,887.	0.			RESEARCH- SUBCONTRACT
MAINE MEDICAL CENTER 22 BRAMHALL ST PORTLAND, ME 04102	01-0238552	501(C)(3)	40,371.	0.			RESEARCH- SUBCONTRACT
THE J DAVID GLADSTONE INSTITUTES 1650 OWENS ST SAN FRANCISCO, CA 94158	23-7203666	501(C)(3)	39,099.	0.			RESEARCH- SUBCONTRACT
WEST VIRGINIA UNIVERSITY PO BOX 6005 MORGANTOWN, WV 26506	55-6000842	115	38,658.	0.			RESEARCH- SUBCONTRACT
NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVE BOSTON, MA 02115	04-1679980	501(C)(3)	37,787.	0.			RESEARCH- SUBCONTRACT
RESEARCH FOUNDATION FOR MENTAL HYGIENE INC. - 150 BROADWAY STE 301 - MENANDS, NY 12204	14-1410842	501(C)(3)	36,983.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES - 4301 WEST MARKHAM - LITTLE ROCK, AR 72205	71-6046242	115	35,144.	0.			RESEARCH- SUBCONTRACT

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IOWA STATE UNIVERSITY 1600 SOUTH 16TH ST AMES, IA 50011	42-6004224	501(C)(3)	34,027.	0.			RESEARCH- SUBCONTRACT
NEW YORK STRUCTURAL BIOLOGY CENTER 89 CONVENT AVE NEW YORK, NY 10027	13-4043587	501(C)(3)	33,322.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NORTH TEXAS PO BOX 305220 DENTON, TX 76203	75-6002149	115	32,556.	0.			RESEARCH- SUBCONTRACT
RHODE ISLAND HOSPITAL 593 EDDY ST PROVIDENCE, RI 02903	05-0258954	501(C)(3)	32,408.	0.			RESEARCH- SUBCONTRACT
MEDSTAR HEALTH RESEARCH INSTITUTE 6495 NEW HAMPSHIRE AVE STE 201 HYATTSVILLE, MD 20783	52-6056274	501(C)(3)	32,000.	0.			RESEARCH- SUBCONTRACT
YOUNGSTOWN STATE UNIVERSITY 1 UNIVERSITY PLAZA YOUNGSTOWN, OH 44555	34-1011998	115	31,733.	0.			RESEARCH- SUBCONTRACT
ADNET SYSTEMS INC 6720 B ROCKLEDGE DR STE 504 BETHESDA, MD 20817	52-1731575	N/A	31,331.	0.			RESEARCH- SUBCONTRACT
CARNEGIE INSTITUTE 4400 FORBES AVE PITTSBURGH, PA 15213	25-0965280	501(C)(3)	30,418.	0.			RESEARCH- SUBCONTRACT
NATIONAL BUREAU OF ECONOMIC RESEARCH INC - 1050 MASSACHUSETTS AVE - CAMBRIDGE, MA 02138	13-1641075	501(C)(3)	30,305.	0.			RESEARCH- SUBCONTRACT

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HEALTH TECH PAL CORP 2400 N LINCOLN AVE ALTADENA, CA 91001	46-4086450	N/A	30,000.	0.			RESEARCH- SUBCONTRACT
ESSENTIA INSTITUTE OF RURAL HEALTH 502 E 2ND ST DULUTH, MN 55805	27-1291124	501(C)(3)	29,700.	0.			RESEARCH- SUBCONTRACT
HOPE COLLEGE PO BOX 9000 HOLLAND, MI 49422	38-1381271	501(C)(3)	29,348.	0.			RESEARCH- SUBCONTRACT
DAVOS CHEMICAL CORPORATION 600 EAST CRESCENT AVE UPPER SADDLE RIVER, NJ 07458	22-1974050	N/A	29,000.	0.			RESEARCH- SUBCONTRACT
MATERIALS SCIENCES CORPORATION 135 ROCK RD HORSHAM, PA 19044	23-2462974	N/A	28,662.	0.			RESEARCH- SUBCONTRACT
ADVANCE AFRICAN DEVELOPMENT INC 907 WEST ST FIFTH FL PITTSBURGH, PA 15221	45-4946645	115	28,500.	0.			RESEARCH- SUBCONTRACT
CENTRAL NEW YORK LIBRARY RESOURCES COUNCIL - 6493 RIDINGS RD - SYRACUSE, NY 13206	16-0957462	501(C)(3)	28,489.	0.			RESEARCH- SUBCONTRACT
SOUTHWEST PENNSYLVANIA AREA HEALTH EDUCATION CENTER INC - 400 N LEXINGTON AVE - PITTSBURGH, PA 15208	25-1791450	501(C)(3)	28,469.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTH ALABAMA PO BOX 8466 MOBILE, AL 36689	63-0725648	501(C)(3)	28,254.	0.			RESEARCH- SUBCONTRACT

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UP NEXT, LLC 1200 RICHMOND ST PITTSBURGH, PA 15218		N/A	27,860.	0.			RESEARCH- SUBCONTRACT
GEORGETOWN UNIVERSITY 37TH O ST NW STE 400 WASHINGTON, DC 20057	53-0196603	501(C)(3)	27,586.	0.			RESEARCH- SUBCONTRACT
PORTLAND STATE UNIVERSITY PO BOX 6364 PORTLAND, OR 97228	36-4776757	115	27,124.	0.			RESEARCH- SUBCONTRACT
VENICE FAMILY CLINIC 604 ROSE AVE VENICE, CA 90291	95-2769432	501(C)(3)	26,600.	0.			RESEARCH- SUBCONTRACT
MISSISSIPPI STATE UNIVERSITY PO DRAWER 5227 MISSISSIPPI STATE, MS 39762	64-6000819	501(C)(3)	26,149.	0.			RESEARCH- SUBCONTRACT
ST JOSEPH'S HOSPITAL AND MEDICAL CENTER - 350 W THOMAS RD - PHOENIX, AZ 85013	72-1561134	501(C)(3)	25,554.	0.			RESEARCH- SUBCONTRACT
TIOGA COUNTY PARTNERSHIP FOR COMMUNITY HEALTH - 33 PEARL ST - WELLSBORO, PA 16901	25-1872477	501(C)(3)	25,000.	0.			RESEARCH- SUBCONTRACT
NEW SCHOOL 79 FIFTH AVE, 16TH FL NEW YORK, NY 10003	13-3297197	501(C)(3)	24,960.	0.			RESEARCH- SUBCONTRACT
HONEYWELL INTERNATIONAL INC 12490 COLLECTIONS CENTER DR CHICAGO, IL 60693	22-2640650	N/A	24,738.	0.			RESEARCH- SUBCONTRACT

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ALLEGHENY COLLEGE 520 NORTH MAIN ST MEADVILLE, PA 16335	25-0965212	501(C)(3)	24,733.	0.			RESEARCH- SUBCONTRACT
BRANDEIS UNIVERSITY 415 SOUTH ST WALTHAM, MA 02453	04-2103552	501(C)(3)	24,465.	0.			RESEARCH- SUBCONTRACT
INTERVISION MEDIA 44 W BROADWAY NO 426 EUGENE, OR 97401	93-1095523	N/A	24,200.	0.			RESEARCH- SUBCONTRACT
MEMORIAL SLOAN KETTERING CANCER CENTER - 1275 YORK AVE - NEW YORK, NY 10065	13-1924236	501(C)(3)	24,160.	0.			RESEARCH- SUBCONTRACT
WILLIAM MARSH RICE UNIVERSITY 6100 MAIN ST HOUSTON, TX 77005	74-1109620	501(C)(3)	23,913.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEVADA, RENO 2601 ENTERPRISE RD RENO, NV 89512	88-6000024	115	23,750.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000642	115	23,383.	0.			RESEARCH- SUBCONTRACT
BOSTON UNIVERSITY 595 COMMONWEALTH AVE STE 700 BOSTON, MA 02215	04-2103547	501(C)(3)	23,156.	0.			RESEARCH- SUBCONTRACT
NORWALK HOSPITAL 14 RESEARCH DR BETHEL, CT 06801	06-6068853	501(C)(3)	23,100.	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
AMERICAN LUNG ASSOCIATION 3001 OLD GETTYSBURG RD CAMP HILL, PA 17011	25-1825116	501(C)(3)	23,000.	0.			RESEARCH- SUBCONTRACT
MCFARLAND TECHNOLOGY INC 4935 OLD WILLIAM PENN HWY MURRYSVILLE, PA 15668	04-3648401	N/A	22,753.	0.			RESEARCH- SUBCONTRACT
ROWAN UNIVERSITY 201 MULLICA HILL RD GLASSBORO, NJ 08028	22-2764819	115	22,014.	0.			RESEARCH- SUBCONTRACT
FEINSTEIN INSTITUTE FOR MEDICAL RESEARCH - 972 BRUSH HOLLOW ROAD 5TH FL - WESTBURY, NY 11590	11-2673595	501(C)(3)	21,863.	0.			RESEARCH- SUBCONTRACT
CLEVELAND STATE UNIVERSITY 1983 E 24TH ST CLEVELAND, OH 44115	34-0966056	115	21,625.	0.			RESEARCH- SUBCONTRACT
APPNOVATION TECHNOLOGIES 3414 PEACHTREE ROAD STE 1600 ATLANTA, GA 30326-1164	99-0373093	N/A	20,000.	0.			RESEARCH- SUBCONTRACT
FUTURES WITHOUT VIOLENCE 100 MONTGOMERY ST SAN FRANCISCO, CA 94129	94-3110973	501(C)(3)	19,952.	0.			RESEARCH- SUBCONTRACT
ACCURA SCIENCE LLC 5721 MERLE HAY RD STE 16B JOHNSTON, IA 50131	46-2964424	N/A	19,712.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF CALIFORNIA DAVIS - ONE SHIELDS AVE - DAVIS, CA 95616	94-6036494	501(C)(3)	18,653.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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URBAN INSTITUTE 2100 M ST NW WASHINGTON, DC 20037	52-0880375	501(C)(3)	18,458.	0.			RESEARCH- SUBCONTRACT
CENTER FOR VICTIMS 410 NINTH ST MCKEESPORT, PA 15132	25-1307309	501(C)(3)	17,979.	0.			RESEARCH- SUBCONTRACT
WILKES-BARRE GENERAL HOSPITAL 562 WYOMING AVE KINGSTON, PA 18704	26-3632648	N/A	16,500.	0.			RESEARCH- SUBCONTRACT
WPXI TV, INC 11 TELEVISION HILL PITTSBURGH, PA 15214	58-1620015	N/A	15,902.	0.			RESEARCH- SUBCONTRACT
MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK RD MILWAUKEE, WI 53226	39-0806261	501(C)(3)	15,075.	0.			RESEARCH- SUBCONTRACT
COLUMBIA COUNTY TRAVELING LIBRARY 702 SAWMILL RD 101 BLOOMSBURG, PA 17815	24-0824849	115	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
PHILADELPHIA COLLEGE OF OSTEOPATHIC MEDICINE - 4170 CITY AVE - PHILADELPHIA, PA 19131	23-1355135	501(C)(3)	14,987.	0.			RESEARCH- SUBCONTRACT
ALBANY MEDICAL COLLEGE 47 NEW SCOTLAND AVE ALBANY, NY 12208	14-1338310	501(C)(3)	14,850.	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.)

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TOURO COLLEGE 500 SEVENTH AVE NEW YORK, NY 10018	13-2676570	501(C)(3)	14,850.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS AT ARLINGTON BOX 19198 701 S NEDDERMAN DR ARLINGTON, TX 76019	75-6000121	115	14,188.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL LOS ANGELES 4650 SUNSET BLVD LOS ANGELES, CA 90027	95-1690977	501(C)(3)	14,133.	0.			RESEARCH- SUBCONTRACT
ALLINA HEALTH SYSTEM PO BOX 43 MINNEAPOLIS, MN 55440-0043	36-3261413	501(C)(3)	14,000.	0.			RESEARCH- SUBCONTRACT
HEALTH SCIENCES LIBRARY ASSOCIATION OF NEW JERSEY - PO BOX 7908 - PRINCETON, NJ 08543	22-2405226	501(C)(6)	13,500.	0.			RESEARCH- SUBCONTRACT
FAYETTE COUNTY COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP INC - 2054 SPRINGHILL FURNACE RD - SMITHFIELD, PA 15478	46-4948911	115	12,500.	0.			RESEARCH- SUBCONTRACT
PROMUNDO-US 1367 CONNECTICUT AVE NW STE 310 WASHINGTON, DC 20036	26-1931968	501(C)(3)	12,487.	0.			RESEARCH- SUBCONTRACT
HOSPICE AND PALLIATIVE NURSES ASSN ONE PENN CENTER WEST STE 425 PITTSBURGH, PA 15276	33-0267166	501(C)(6)	12,250.	0.			RESEARCH- SUBCONTRACT
GEORGIA TECH RESEARCH CORP 550 TENTH ST NW ATLANTA, GA 30332	58-0603146	501(C)(3)	11,886.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)



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3C INSTITUTE 4364 S ALSTON AVE DURHAM, NC 27713	56-2237463	N/A	11,753.	0.			RESEARCH- SUBCONTRACT
ST LUKE'S HOSPITAL OF BETHLEHEM PA 801 OSTRUM ST BETHLEHEM, PA 18015	23-1352213	501(C)(3)	10,996.	0.			RESEARCH- SUBCONTRACT
AAF LOGISTICS INC 720 HINDRY AVE INGLEWOOD, CA 90301	46-1190569	N/A	10,769.	0.			RESEARCH- SUBCONTRACT
ABOLITIONIST LAW CENTER PO BOX 8654 PITTSBURGH, PA 15221	46-2132412	501(C)(3)	9,636.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF OKLAHOMA HEALTH SCIENCES CENTER - 100 N UNIVERSITY DR - EDMOND, OK 73034	73-6017987	115	9,604.	0.			RESEARCH- SUBCONTRACT
BLAIR COUNTY PLANNING COMMISSION 423 ALLEGHENY ST STE 046 HOLLIDAYSBURG, PA 16648	23-6005976	115	9,155.	0.			RESEARCH- SUBCONTRACT
RESEARCH FOUNDATION FOR STATE UNIVERSITY OF NEW YORK - PO BOX 9 - ALBANY, NY 12201	14-1368361	501(C)(3)	8,982.	0.			RESEARCH- SUBCONTRACT
METIS FOUNDATION 300 CONVENT ST STE 1330 SAN ANTONIO, TX 78205	47-2219464	501(C)(3)	8,917.	0.			RESEARCH- SUBCONTRACT
THE NEMOURS FOUNDATION 10140 CENTURION PARKWAY NORTH JACKSONVILLE, FL 32256	59-0634433	501(C)(3)	8,221.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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MOREHOUSE SCHOOL OF MEDICINE 720 WESTVIEW DR SW ATLANTA, GA 30310	58-1438873	501(C)(3)	8,181.	0.			RESEARCH- SUBCONTRACT
ROBERT MORRIS UNIVERSITY 6001 UNIVERSITY BLVD MOON TOWNSHIP, PA 15108	25-1120678	501(C)(3)	7,743.	0.			RESEARCH- SUBCONTRACT
PURDUE UNIVERSITY 403 WEST WOOD ST WEST LAFAYETTE, IN 47907	35-6002041	501(C)(3)	7,680.	0.			RESEARCH- SUBCONTRACT
DRAKE UNIVERSITY 2507 UNIVERSITY AVE DES MOINES, IA 50311	42-0680460	501(C)(3)	7,633.	0.			RESEARCH- SUBCONTRACT
METROHEALTH SYSTEM 2500 METROHEALTH DR CLEVELAND, OH 44109	34-6004382	115	7,431.	0.			RESEARCH- SUBCONTRACT
COUNTY OF INDIANA 825 PHILADELPHIA ST INDIANA, PA 15701	25-6001035	115	7,206.	0.			RESEARCH- SUBCONTRACT
PROPEL CHARTER SCHOOL 3447 EAST CARSON ST STE 200 PITTSBURGH, PA 15203	03-0483260	501(C)(3)	7,000.	0.			RESEARCH- SUBCONTRACT
HOMEWOOD CHILDREN'S VILLAGE 801 N. HOMEWOOD AVE PITTSBURGH, PA 15208	27-1885583	501(C)(3)	6,623.	0.			RESEARCH- SUBCONTRACT
WASHINGTON STATE UNIVERSITY PO BOX 641024 PULLMAN, WA 99164	91-6001108	115	6,476.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990)

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PNC BANK 500 1ST AVE PITTSBURGH, PA 15219	25-1435979	N/A	6,281.	0.			RESEARCH- SUBCONTRACT
PROVIDENCE PORTLAND MEDICAL CENTER PO BOX 9577 PORTLAND, OR 97227-5977	93-0386906	N/A	6,150.	0.			RESEARCH- SUBCONTRACT
KLEMM ANALYSIS GROUP INC 975 F STREET NW WASHINGTON, DC 20004	52-1572828	N/A	6,000.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF HAWAII 2500 CAMPUS RD HONOLULU, HI 96822	99-6000354	115	5,854.	0.			RESEARCH- SUBCONTRACT
CAMERON'S COUNSELING & CONSULTING SERVICES LLC - 825 E 10TH AVE LOWER LEVEL - MUNHALL, PA 15120		N/A	5,725.	0.			RESEARCH- SUBCONTRACT
TULANE UNIVERSITY 6823 ST CHARLES AVE NEW ORLEANS, LA 70118	72-0423889	501(C)(3)	5,418.	0.			RESEARCH- SUBCONTRACT
ALLEN PLACE COMMUNITY SERVICES, INC - 227 BONVUE ST - PITTSBURGH, PA 15214	27-1100587	501(C)(3)	5,000.	0.			RESEARCH- SUBCONTRACT
METROPOLITAN DETROIT RESEARCH AND EDUCATION FOUNDATION - 4646 JOHN R ST - DETROIT, MI 48201	38-3086750	501(C)(3)	5,000.	0.			RESEARCH- SUBCONTRACT
PENNSYLVANIA CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS - 1400 N PROVIDENCE RD STE 3007 - MEDIA, PA 19063	23-7135840	501(C)(3)	5,000.	0.			RESEARCH- SUBCONTRACT

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ST BARNABAS HOSPITAL 4422 THIRD AVE BRONX, NY 10457	13-1740122	501(C)(3)	5,000.	0.			RESEARCH- SUBCONTRACT
NEGRO EDUCATIONAL EMERGENCY DRIVE WARNER CENTER 332 FIFTH AVE PITTSBURGH, PA 15222	25-6070821	501(C)(3)	260,400.	0.			SPONSORSHIP
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT - 425 SIXTH AVE - PITTSBURGH, PA 15219	25-0965213	501(C)(3)	85,000.	0.			SPONSORSHIP
PITTSBURGH SCHWEITZER FELLOWS PROGRAM - 5614 ELGIN ST - PITTSBURGH, PA 15206	13-1982786	501(C)(3)	55,000.	0.			SPONSORSHIP
CAVE CANEM FOUNDATION 20 JAY ST BROOKLYN, NY 11201	13-3932909	501(C)(3)	41,250.	0.			SPONSORSHIP
AMERICAN HEART ASSOCIATION 7777 PENN CENTER BLVD PITTSBURGH, PA 15235	13-5613797	501(C)(3)	35,114.	0.			SPONSORSHIP
UNITED WAY OF SOUTHWESTERN PENNSYLVANIA - 1250 PENN AVE - PITTSBURGH, PA 15230-0735	25-1043578	501(C)(3)	31,827.	0.			SPONSORSHIP
OAKLAND PLANNING & DEVELOPMENT CORP - 235 ATWOOD ST - PITTSBURGH, PA 15213	25-1382510	501(C)(3)	31,000.	0.			SPONSORSHIP
INTERNATIONAL ATHLETIC ASSN INC 54 WEST 40TH ST NEW YORK, NY 10018	46-3594919	501(C)(3)	25,000.	0.			SPONSORSHIP

Schedule I (Form 990)

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CARNEGIE INSTITUTE 4400 FORBES AVE PITTSBURGH, PA 15213	25-0965280	501(C)(3)	23,000.	0.			SPONSORSHIP
UPMC COMMUNITY PROVIDER SERVICES 200 LOTHROP ST PITTSBURGH, PA 15213	25-1804746	501(C)(3)	20,000.	0.			SPONSORSHIP
CENTER FOR HEALTH POLICY DEVELOPMENT - 10 FREE ST 2ND FLOOR - PORTLAND, ME 04101-4865	52-1576801	501(C)(3)	20,000.	0.			SPONSORSHIP
STATE SCIENCE & TECHNOLOGY INSTITUTE - 5015 PINE CREEK DR - WESTERVILLE, OH 43081	31-1448843	501(C)(3)	20,000.	0.			SPONSORSHIP
CHILDREN'S HOSPITAL OF PITTSBURGH 4401 PENN AVE PITTSBURGH, PA 15224	25-0402510	501(C)(3)	17,278.	0.			SPONSORSHIP
PITTSBURGH PARKS CONSERVANCY 2000 TECHNOLOGY DR NO 300 PITTSBURGH, PA 15219	23-2882145	501(C)(3)	15,000.	0.			SPONSORSHIP
AMERICAN CANCER SOCIETY 320 BILMAR DR PITTSBURGH, PA 15205	25-1798733	501(C)(3)	12,376.	0.			SPONSORSHIP
AMERICAN RED CROSS 225 BLVD OF THE ALLIES PITTSBURGH, PA 15222	53-0196605	501(C)(3)	12,000.	0.			SPONSORSHIP
JEWISH NATIONAL FUND 42 EAST 69TH ST NEW YORK, NY 10021	13-1659627	501(C)(3)	11,000.	0.			SPONSORSHIP

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POWER 7501 PENN AVE PITTSBURGH, PA 15208	25-1643651	501(C)(3)	10,000.	0.			SPONSORSHIP
SENATOR JOHN HEINZ PITTSBURGH REGIONAL HISTORY CENTER - 1212 SMALLMAN ST - PITTSBURGH, PA 15222	25-0965391	501(C)(3)	10,000.	0.			SPONSORSHIP
UNITED STATES DEPARTMENT OF STATE 2201 C STREET NW ROOM 7427-B WASHINGTON, DC 20520	47-3867849	115	10,000.	0.			SPONSORSHIP
VIBRANT PITTSBURGH 707 GRANT STRET NO 2305 PITTSBURGH, PA 15219	20-2939474	501(C)(3)	10,000.	0.			SPONSORSHIP
JUVENILE DIABETES RESEARCH FOUNDATION - 120 WALL ST - NEW YORK, NY 10005	23-1907729	501(C)(3)	9,613.	0.			SPONSORSHIP
UPMC 600 GRANT ST FL 56 PITTSBURGH, PA 15219	25-1423657	501(C)(3)	7,700.	0.			SPONSORSHIP
AMERICAN IRELAND FUND 211 CONGRESS ST 10TH FL BOSTON, MA 02110	25-1306992	501(C)(3)	7,500.	0.			SPONSORSHIP
NATIONAL ASSOCIATION OF MEDICAID DIRECTORS - 444 N CAPITOL STREET 267 - WASHINGTON, DC 20001	27-3258188	501(C)(3)	7,500.	0.			SPONSORSHIP
NATIONAL COUNCIL OF JEWISH WOMEN 475 RIVERSIDE DR NO 1901 NEW YORK, NY 10115	13-1641076	501(C)(3)	7,500.	0.			SPONSORSHIP

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PITTSBURGH CULTURAL TRUST 803 LIBERTY AVE PITTSBURGH, PA 15222	25-1469002	501(C)(3)	7,500.	0.			SPONSORSHIP
COMMUNITY EMPOWERMENT ASSN INC 7130 KELLY ST PITTSBURGH, PA 15208	25-1760121	501(C)(3)	7,000.	0.			SPONSORSHIP
COUNCIL ON EDUCATION FOR PUBLIC HEALTH - 1010 WAYNE AVE - SILVER SPRING, MD 20910	52-1017653	501(C)(3)	7,000.	0.			SPONSORSHIP
YWCA 305 WOOD ST PITTSBURGH, PA 15222-1982	25-0965639	501(C)(3)	7,000.	0.			SPONSORSHIP
CHABAD HOUSE ON CAMPUS 4710 WALLINGFORD ST PITTSBURGH, PA 15213	20-3164786	501(C)(3)	6,300.	0.			SPONSORSHIP
URBAN LEAGUE OF GREATER PITTSBURGH INC - 610 WOOD ST - PITTSBURGH, PA 15222	25-0965592	501(C)(3)	6,000.	0.			SPONSORSHIP
PENNSYLVANIA INNOCENCE PROJECT 1515 MARKET ST PHILADELPHIA, PA 19102	26-3176893	501(C)(3)	6,000.	0.			SPONSORSHIP
JUNIOR ACHIEVEMENT OF WESTERN PENNSYLVANIA - 5001 CENTRE AVE - PITTSBURGH, PA 15213	25-0983059	501(C)(3)	5,680.	0.			SPONSORSHIP
NAACP 2030 WYLIE AVE PITTSBURGH, PA 15219	25-6086867	501(C)(3)	5,160.	0.			SPONSORSHIP

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AMERICAN PAIN SOCIETY 8735 W HIGGINS RD STE 300 CHICAGO, IL 60631	52-1180177	501(C)(3)	5,000.	0.			SPONSORSHIP
CATHOLIC CHARITIES 212 NINTH ST PITTSBURGH, PA 15222	25-1326213	501(C)(3)	5,000.	0.			SPONSORSHIP
EPILEPSY FOUNDATION OF WESTERN/CENTRAL PA - 1501 REEDSDALE STE 3002 - PITTSBURGH, PA 15233	23-7241930	501(C)(3)	5,000.	0.			SPONSORSHIP
GORDON RESEARCH CONFERENCES 512 LIBERTY LN WEST KINGSTON, RI 02892-1502	26-0150662	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
LIFE SCIENCES PENNSYLVANIA 650 EAST SWEDESFORD ROAD NO 190 WAYNE, PA 19087	25-1621500	501(C)(6)	5,000.	0.			SPONSORSHIP
MISSION COMMISSION INC 848 W NORTH AVE PITTSBURGH, PA 15233	81-0870797	501(C)(3)	5,000.	0.			SPONSORSHIP
PITTSBURGH BALLET THEATER 2900 LIBERTY AVE PITTSBURGH, PA 15201	23-7101094	501(C)(3)	5,000.	0.			SPONSORSHIP
PITTSBURGH OPERA INC 2425 LIBERTY AVE PITTSBURGH, PA 15222	25-1073139	501(C)(3)	5,000.	0.			SPONSORSHIP

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ROBERT MORRIS UNIVERSITY 6001 UNIVERSITY BLVD MOON TOWNSHIP, PA 15108	25-1120678	501(C)(3)	5,000.	0.			SPONSORSHIP
THINKING OF NIKKI FOUNDATION 303 SAW MILL RD GREENSBURG, PA 15601	27-2720955	501(C)(3)	5,000.	0.			SPONSORSHIP
UPMC PRESBYTERIAN/SHADYSIDE 600 GRANT ST FL 56 PITTSBURGH, PA 15219	25-0965480	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 noncash assistance
INSTITUTIONAL AID TO STUDENTS	14620	178,690,697.	0.		
TUITION REMISSION	2162	24,599,140.	0.		
TUITION REMISSION- STUDENTS ATTENDING OTHER UNIVERSITIES	307	5,437,552.	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

**2016**

▶ 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 (such as, 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 on 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" on 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 nonfixed 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" on 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) 2016

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

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

**Note:** The sum of columns (B)(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)	518,938.	0.	20,999.	121,200.	96,470.	757,607.	0.
	(ii)	15,000.	0.	0.	0.	0.	15,000.	0.
(2) EDWARD J. GREFENSTETTE TRUSTEE	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	500,000.	423,000.	6,235.	631,352.	15,184.	1,575,771.	423,000.
(3) PATRICIA E. BEESON PROVOST/SR VICE CHANCELLOR	(i)	417,145.	0.	30,119.	50,400.	20,722.	518,386.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHY S. HUMPHREY SR VICE CHANCELLOR, ENGAGEMENT	(i)	389,042.	0.	18,254.	32,100.	20,521.	459,917.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ARTHUR S. LEVINE SR VICE CHANCELLOR, HEALTH SCIENCES	(i)	843,438.	186,000.	83,496.	31,800.	48,579.	1,193,313.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) AMY KRUEGER MARSH TREASURER	(i)	441,028.	0.	21,097.	38,425.	23,103.	523,653.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ARTHUR G. RAMICONE SR VICE CHANCELLOR & CFO	(i)	394,174.	0.	31,312.	0.	23,500.	448,986.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) GEOVETTE E. WASHINGTON GENERAL COUNSEL	(i)	393,303.	0.	18,601.	21,200.	8,283.	441,387.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) GREGORY A. SCOTT SR VICE CHANCELLOR, BUSINESS OPS	(i)	239,135.	0.	15,409.	17,333.	15,128.	287,005.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) PATRICK R. NARDUZZI HEAD FOOTBALL COACH	(i)	1,822,750.	1,058,333.	97,159.	21,200.	18,276.	3,017,718.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) KEVIN STALLINGS HEAD BASKETBALL COACH- MEN'S	(i)	1,070,730.	750,000.	18,320.	21,200.	13,263.	1,873,513.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) S.SCOTT BARNES DIRECTOR OF ATHLETICS	(i)	603,650.	125,000.	14,080.	21,200.	20,433.	784,363.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) SUZANNE MCCONNELL-SERIO HEAD BASKETBALL COACH- WOMEN'S	(i)	611,037.	0.	28,305.	31,800.	17,720.	688,862.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) NANCY E. DAVIDSON DIRECTOR, UPCI	(i)	635,185.	0.	550.	31,800.	5,646.	673,181.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) B. JEAN FERKETISH FORMER SECRETARY BOARD OF TRUSTEES	(i)	235,216.	0.	4,322.	37,072.	16,762.	293,372.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) JEROME COCHRAN FORMER EXECUTIVE VICE CHANCELLOR	(i)	0.	0.	281,490.	8,483.	0.	289,973.	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 aren't 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)	487,696.	0.	326,559.	67,623.	16,055.	897,933.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(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-\$266,250

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

AND RETIRED OFFICERS, WHICH INCLUDES A TAX GROSS-UP-

**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.

J.COCHRAN-\$23,723; B.FERKETISH-\$5,838; M.NORDENBERG-\$334,522; P.BEESON-\$0;

A.LEVINE-\$0; A.MARSH-\$0; A.RAMICONE-\$0.

**Supplemental Information on Tax-Exempt Bonds**

▶ **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).**

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

<b>Part I Bond Issues</b>											
(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	91335VJP2	09/18/14	96,564,106.	SEE SCHEDULE K, PART VI		X		X		X
<b>B</b>											
<b>C</b>											
<b>D</b>											

<b>Part II Proceeds</b>										
	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 .....	96,645,580.									
<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 .....	557,401.									
<b>8</b> Credit enhancement from proceeds .....										
<b>9</b> Working capital expenditures from proceeds .....										
<b>10</b> Capital expenditures from proceeds .....	96,065,099.									
<b>11</b> Other spent proceeds .....										
<b>12</b> Other unspent proceeds .....										
<b>13</b> Year of substantial completion .....	2015									
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>14</b> Were the bonds issued as part of a current refunding issue? .....		X								
<b>15</b> Were the bonds issued as part of an advance refunding issue? .....		X								
<b>16</b> Has the final allocation of proceeds been made? .....	X									
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds? .....	X									

<b>Part III Private Business Use</b>										
	A		B		C		D			
	Yes	No	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								
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....	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							
<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							
<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 .....		.73 %		%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		.73 %		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....	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						
<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							

**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						
<b>2</b> If "No" to line 1, did the following apply? .....								
<b>a</b> Rebate not due yet? .....		X						
<b>b</b> Exception to rebate? .....	X							
<b>c</b> No rebate due? .....		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							
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X						
<b>b</b> Name of provider .....	N/A							
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....		X						
<b>e</b> Was the hedge terminated? .....		X						

**Part IV Arbitrage** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X						
<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						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....	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 isn't available under applicable regulations? .....	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 CAPITAL PROJECT BONDS, SERIES A, B-1, B-2

SCHEDULE K PART I BOND ISSUES- COLUMN (F)- DESCRIPTION OF PURPOSE

A-FINANCE CAPITAL PROJECTS



**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: ANITA P. COURCOULAS, MD

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF IRA J. GUMBERG, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$236,939

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: JOHN GREFFENSTETTE

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF EDWARD GREFFENSTETTE, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$117,303

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: DAVID HICKTON

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF DAWNE HICKTON, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$166,375

(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: MARYJEAN LOVETT

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

MEMBER OF ROBERT LOVETT, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$12,175

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(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: \$41,646

(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: \$88,359

(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: \$118,066

(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: 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: \$814,024

(D) DESCRIPTION OF TRANSACTION: FOOD SERVICE

(E) SHARING OF ORGANIZATION'S REVENUES? NO

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2016**

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		18,625	WRITTEN APPRAISAL
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	104	3,114,641	MEAN VALUE DATE REC'D
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles	X	1	15,900	WRITTEN APPRAISAL
19 Food inventory				
20 Drugs and medical supplies	X	5	135,699	WRITTEN APPRAISAL
21 Taxidermy				
22 Historical artifacts	X	1	4,800	WRITTEN APPRAISAL
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( TRAVEL&AIRFAR )	X	2	12,918	FMV
26 Other ( RECEPTION )	X	1	8,271	FMV
27 Other ( 3D PRINTER )	X	1	7,495	WRITTEN APPRAISAL
28 Other ( EQUIPMENT )	X	1	4,039	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 15

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard 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 didn't 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) (2016)

**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:

WINTER ACADEMY LUNCHEON EVENT

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1857.

(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

**2016**

Open to Public  
Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

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

THE UNIVERSITY OF PITTSBURGH, FOUNDED IN 1787, IS ONE OF THE OLDEST

INSTITUTIONS OF HIGHER EDUCATION IN THE UNITED STATES AND ONE OF THE

NATION'S TOP PUBLIC RESEARCH UNIVERSITIES. FOR MORE THAN TWO

CENTURIES, THE UNIVERSITY OF PITTSBURGH HAS SERVED THE NEEDS OF ITS

HOME REGION, THE COMMONWEALTH OF PENNSYLVANIA, AND THE NATION AS A

LEADER IN EDUCATION, A PIONEER IN RESEARCH AND A PARTNER IN COMMUNITY

SERVICE.

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

	EXPENSES	GRANTS	REVENUE
STUDENT SERVICES	161,182,814		
SCHOLARSHIPS AND FELLOWSHIPS	187,897,215	187,897,215	
AUXILIARY ENTERPRISES	134,097,234		139,843,022
LIBRARIES	45,670,359		
PUBLIC SERVICE	81,843,555	1,335,780	

EXP. \$ 610,691,176. INCL GRANTS OF \$ 189,232,995. REVENUE \$ 139,843,022.

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

PATRICK D. GALLAGHER AND EDWARD J.GREFENSTETTE HAVE A BUSINESS RELATIONSHIP

(ONE IS ON THE BOARD OF DIRECTORS OF THE OTHER'S EMPLOYER).

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

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

Schedule O (Form 990 or 990-EZ) (2016)

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

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 11B:

PRIOR TO THE MAY 4, 2018 MEETING OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, A COPY OF THE DRAFT IRS FORMS 990 AND 990-T FOR FISCAL YEAR 2017 WAS DISTRIBUTED TO EACH COMMITTEE MEMBER. AT THE MAY 4TH MEETING, THE CHIEF FINANCIAL OFFICER OF THE UNIVERSITY REVIEWED BOTH FORMS WITH THE AUDIT COMMITTEE. VOTING MEMBERS OF THE COMMITTEE INCLUDE OUTSIDE DIRECTORS, WHILE NONVOTING MEMBERS INCLUDE SENIOR UNIVERSITY ADMINISTRATORS AS WELL AS STUDENT, FACULTY, AND STAFF REPRESENTATIVES. THE REVIEW INCLUDED A DISCUSSION OF EACH SIGNIFICANT SECTION OF THE TWO FORMS, HIGHLIGHTING RELEVANT CHANGES IN REQUIRED REPORTING AND ANY SIGNIFICANT VARIATIONS FROM PREVIOUS FILINGS. COMMITTEE MEMBERS WERE FREE TO ASK QUESTIONS AND PROVIDE FEEDBACK. SUBSEQUENT TO THE AUDIT COMMITTEE'S REVIEW, A COPY OF FORM 990 WAS MADE AVAILABLE TO EACH MEMBER OF THE ENTIRE BOARD OF TRUSTEES AND ALSO MADE AVAILABLE FOR PUBLIC INSPECTION.

FORM 990, PART VI, SECTION B, LINE 12C:

THE UNIVERSITY REQUIRES THAT MEMBERS OF ITS BOARD OF TRUSTEES ENTITLED TO VOTE PROMPTLY DISCLOSE POTENTIAL OR ACTUAL CONFLICTS OF INTEREST AS THEY ARISE, AS WELL AS ANNUALLY COMPLETE A DISCLOSURE QUESTIONNAIRE. DISCLOSURES ARE SUBMITTED THROUGH THE UNIVERSITY'S OFFICE OF THE SECRETARY, REVIEWED BY THE UNIVERSITY'S OFFICE OF UNIVERSITY COUNSEL AND PROVIDED TO THE BOARD OF TRUSTEES FOR REVIEW AND POSSIBLE ACTION. THE GOVERNANCE AND NOMINATING COMMITTEE OF THE BOARD OF TRUSTEES OVERSEES TRUSTEE COMPLIANCE AND ADVISES, WHEN NECESSARY, ON MANAGING ANY POTENTIAL OR ACTUAL CONFLICTS. TRUSTEES

Name of the organization UNIVERSITY OF PITTSBURGH	Employer identification number 25-0965591
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GENERALLY ARE REQUIRED TO REFRAIN FROM PARTICIPATION ON MATTERS RELATED TO ANY CONFLICT.

THE UNIVERSITY ALSO REQUIRES THAT EMPLOYEES, INCLUDING ITS OFFICERS, DISCLOSE TRANSACTIONS AND PROPOSED TRANSACTIONS AS THEY ARISE WITH THE UNIVERSITY, AS WELL AS ANNUALLY COMPLETE A CONFLICT OF INTEREST STATEMENT. ALL DISCLOSURES REQUIRED OF UNIVERSITY EMPLOYEES ARE 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 BOARD OF TRUSTEES). THE RECIPIENT REVIEWS SUCH DISCLOSURES FOR REAL, APPARENT OR POTENTIAL CONFLICTS OF INTEREST AND THEN RECOMMENDS AND INITIATES ANY NECESSARY ACTIONS. EMPLOYEES ARE PROHIBITED FROM EXERCISING ANY UNIVERSITY DECISION-MAKING AUTHORITY OR FROM EXERTING INFLUENCE CONCERNING ANY ORGANIZATION OR TRANSACTION IN WHICH THEY OR A RELATED PARTY 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

Name of the organization UNIVERSITY OF PITTSBURGH	Employer identification number 25-0965591
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TRUSTEE SERVING ON THE COMPENSATION COMMITTEE HAS A CONFLICT OF INTEREST

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

TO ASSIST THE COMPENSATION COMMITTEE IN MEETING ITS RESPONSIBILITIES, THE

SERVICES OF A GLOBAL PROFESSIONAL SERVICES FIRM ARE USED FOR COMPENSATION

CONSULTING AND MARKET RESEARCH. THAT FIRM PROVIDES THE COMPENSATION

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

INSTITUTIONS. THE OFFICERS' COMPENSATION IS BENCHMARKED AGAINST THESE

INSTITUTIONS.

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

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

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

TO THE PUBLIC.

FORM 990, PART VI, SECTION C, LINE 19:

ALL RELEVANT DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST POLICY AND

AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC VIA THE

UNIVERSITY'S WEB SITE AND/OR BY REQUEST.

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

THE UNIVERSITY HAS A WHISTLEBLOWER AND DOCUMENT RETENTION AND

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

BOARD OF TRUSTEES.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.

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

OMB No. 1545-0047

**2016**

Open to Public Inspection

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

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
UNIVERSITY OF PITTSBURGH AND UPMC MEDICAL AND HEALTH SCIENCES FOUNDATION - 1, 3600 FORBES AVE, SUITE 8084 FORBES TOWER, BRADFORD EDUCATIONAL FOUNDATION - 25-1399653 300 CAMPUS DRIVE BRADFORD, PA 16701	TO INTEGRATE FUNDRAISING FOR THE UNIVERSITY OF PITTSBURGH AND UPMC	PENNSYLVANIA	501(C)(3)	12A			X
JOHNSTOWN EDUCATIONAL FOUNDATION - 25-1513720, UPJ, 266 BLACKINGTON HALL, JOHNSTOWN, PA 15904	TO SUPPORT THE UNIVERSITY OF PITTSBURGH AT BRADFORD	PENNSYLVANIA	501(C)(3)	12C			X
EYE AND EAR FOUNDATION - 25-1439732 BIOMEDICAL SCIENCES TOWER, 203 LOTHROP ST, PITTSBURGH, PA 15213	TO SUPPORT THE UNIVERSITY OF PITTSBURGH AT JOHNSTOWN	PENNSYLVANIA	501(C)(3)	12C	UNIVERSITY OF PITTSBURGH	X	
	ADVANCE EFFORTS OF OTOLARYNGOLOGY AND OPHTHALMOLOGY DEPARTMENTS	PENNSYLVANIA	501(C)(3)	12C			X



**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)	12C	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)	12A		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)	12A		X	
UPMC - 25-1423657 600 GRANT STREET 58TH FLOOR PITTSBURGH, PA 15219	SUPPORTING SUBSIDIARIES HEALTHCARE, EDUCATION, AND RESEARCH PROGRAMS	PENNSYLVANIA	501(C)(3)	12C			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)	12A			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			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	110,390	CASH
(2) UNIVERSITY DENTAL HEALTH SERVICES	C	411,651	CASH
(3) UNIVERSITY DENTAL HEALTH SERVICES	O	1,476,579	CASH
(4) UNIVERSITY DENTAL HEALTH SERVICES	Q	76,912	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, 2017  
Right-to-Know Disclosure**

<u>Ranking</u>	<u>Name</u>	<u>Total Gross</u>
1	Narduzzi, Patrick	\$2,887,319
2	Stallings, Kevin	\$1,825,540
3	Nordenberg, Mark A	\$802,886
4	Barnes, Sherman Scott	\$737,500
5	Davidson, Nancy E	\$636,437
6	Becich, Michael J	\$631,059
7	McConnell-Serio, Suzanne	\$617,857
8	Dixon, James P II	\$616,562
9	James, Alton Everette III	\$564,387
10	Masnick, Jeffrey L	\$553,106
11	Burke, Donald S	\$485,920
12	Strick, Peter Leonard	\$473,162
13	Denis, David	\$446,765
14	Braun, Thomas W	\$445,280
15	Reis, Steven E	\$441,380
16	Vesterlund, Lise Duedal	\$433,642
17	Assad, Arjang A	\$433,225
18	Taylor, Douglass Lansing	\$425,155
19	Shlomchik, Mark Jay	\$417,639
20	Gur, David	\$414,779
21	Malandro, Marc Shane	\$409,828
22	Tuan, Rocky Sung Chi	\$405,322
23	Freeman, Bruce A	\$402,785
24	Denis, Diane K	\$400,019
25	Bahar, Ivet	\$398,553