Form **990**

Paid

Preparer

Use Only

BRIAN KEARNS

KPMG

Firm's address 8350 BROAD STREET SUITE 900

MCLEAN, VA 22102

May the IRS discuss this return with the preparer shown above? See instructions

Firm's name

EXTENDED TO MAY 15, 2024

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Intern	al Rever	of the Treasury nue Service	Go to www.irs.gov/F	urity numbers on this form a orm990 for instructions and	the latest	nformation.		Open to Public Inspection
A F	or the	2022 calend	ar year, or tax year beginning JU	L 1, 2022 and	ending J	UN 30, 2023		
B C	heck if pplicable	e: C Name of	organization			D Employer ide	ntificat	ion number
	Addres	ss e UNIVER	SITY OF PITTSBURGH					
	Name change	e Doing bu	ısiness as			25-096559	1	
	Initial return	Number	and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telephone nu	mber	
	Final return/		WOOD STREET, SUITE 201			(412) 624		
	termin ated	City or to	own, state or province, country, and	ZIP or foreign postal code	•	G Gross receipts \$		5,754,762,599.
	Ameno return	FILISB	URGH, PA 15260-0100			H(a) Is this a gro	up retur	'n
	Applic tion	F Name a	nd address of principal officer:PATRI	CK D. GALLAGHER		for subordin	ates?	Yes X No
	pendir	^{ng} 107 CATE	EDRAL OF LEARNING, PGH, PA	15260		H(b) Are all subordina		
ΙT	ax-exe	empt status: [<u>x</u> 501(c)(3) 501(c)((insert no.) 4947(a)(1)	or 527	If "No," atta	ch a list	. See instructions
	Vebsit					H(c) Group exem	nption n	umber
K F	orm of	organization:	X Corporation Trust As:	sociation Other	∟ Year	of formation: 1787	M S	tate of legal domicile: PA
Pa	rt I	Summary						
Ð	1	Briefly describ	e the organization's mission or most	significant activities: TO PRO	VIDE HIG	H QUALITY		
auc		EDUCATIONAL	SERVICES, RESEARCH, AND CO	MMUNITY SERVICE.				
, L	2	Check this bo	if the organization discor	tinued its operations or dispo	sed of mor	e than 25% of its n	et asset	ts.
ŏ	3	Number of vot	ing members of the governing body	(Part VI, line 1a)			3	35
8	4	Number of ind	ependent voting members of the gov	verning body (Part VI, line 1b)			4	28
es	5	Total number	5	28506				
iviti	6	Total number	of volunteers (estimate if necessary)				6	166
Activities & Governance	7 a	Total unrelated	business revenue from Part VIII, co	lumn (C), line 12			7a	6,993,672.
_	b	Net unrelated	business taxable income from Form	990-T, Part I, line 11			7b	0.
						Prior Year		Current Year
ae	8	Contributions	and grants (Part VIII, line 1h)			Prior Year 580,482,5	-	565,546,032.
enne	9	Program servi	ce revenue (Part VIII, line 2g)			Prior Year 580,482,5 2,234,980,8	38.	565,546,032. 2,401,300,421.
Revenue	9 10	Program servi	ce revenue (Part VIII, line 2g)	and 7d)		Prior Year 580,482,5 2,234,980,8 365,183,9	38. 78.	565,546,032. 2,401,300,421. 141,313,501.
Revenue	9 10 11	Program servion Investment income Other revenue	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c,	and 7d) 9c, 10c, and 11e)		Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6	38. 78.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002.
Revenue	9 10 11 12	Program servion Investment income Other revenue Total revenue	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12)		Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0	38. 78. 77.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956.
Revenue	9 10 11 12 13	Program service Investment income Other revenue Total revenue Grants and sir	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A))	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) \(\), lines 1-3)		Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6	38. 78. 77. 57.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002.
Revenue	9 10 11 12 13 14	Program service Investment incomment incomment incomment in Other revenue Total revenue Grants and single Benefits paid to the Program in Total revenue in Tota	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)		Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9	38. 78. 77. 57. 47.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0.
	9 10 11 12 13 14 15	Program service Investment incomment incomment incomment incomment in the Investment	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10)		Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3	38. 78. 77. 57. 47. 0.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053.
	9 10 11 12 13 14 15 16a	Program service Investment inco Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional for	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e)		Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9	38. 78. 77. 57. 47. 0.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0.
	9 10 11 12 13 14 15 16a b	Program service Investment inco Other revenue Total revenue Grants and sir Benefits paid of Salaries, other Professional fu Total fundraisi	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 229,847	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2	38. 78. 77. 57. 47. 0. 15.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774.
Expenses Revenue	9 10 11 12 13 14 15 16a b	Program service Investment incomplete Total revenue Grants and sir Benefits paid Salaries, other Professional fundraisi Other expense	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29,847 11f-24e)	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2	38. 78. 77. 57. 47. 0. 15. 22.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774.
	9 10 11 12 13 14 15 16a b 17 18	Program service Investment income Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fundraisi Other expense Total expense	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A) co or for members (Part IX, column (A) compensation, employee benefits (F undraising fees (Part IX, column (A), line gexpenses (Part IX, column (D), line (S) (Part IX, column (A), lines 11a-11d, (S) Add lines 13-17 (must equal Part IX)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29,847 11f-24e) C, column (A), line 25)	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0	38. 78. 77. 57. 47. 0. 15. 22.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,304.
Expenses	9 10 11 12 13 14 15 16a b 17 18	Program service Investment income Other revenue Total revenue Grants and sir Benefits paid Salaries, other Professional fundraisi Other expense Total expense	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29,847 11f-24e) C, column (A), line 25)	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0	38. 78. 77. 57. 47. 0. 15. 22.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348.
Expenses	9 10 11 12 13 14 15 16a b 17 18	Program service Investment incoording revenue Total revenue Grants and sin Benefits paid Salaries, other Professional fut Total fundraisi Other expense Total expense Revenue less	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29 , 847 11f-24e) C, column (A), line 25)	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y	38. 78. 77. 57. 47. 0. 15. 22. 68. 52. 05. ear	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year
Expenses	9 10 11 12 13 14 15 16a b 17 18	Program service Investment incomplete Investment incomplete Investment incomplete Investment Invest	ce revenue (Part VIII, line 2g)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29,847 11f-24e) K, column (A), line 25)	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y 9,742,545,2	38	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year 9,680,542,422.
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Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Program service Investment incomplete Total revenue Grants and sir Benefits paid Salaries, other Professional fut Total fundraisi Other expense Total expense Revenue less Total assets (Fotal liabilities Net assets or	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A) co or for members (Part IX, column (A) compensation, employee benefits (F undraising fees (Part IX, column (A), line gexpenses (Part IX, column (D), line es (Part IX, column (A), lines 11a-11d, s. Add lines 13-17 (must equal Part IX expenses. Subtract line 18 from line Part X, line 16) (Part X, line 26)	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29,847 11f-24e) K, column (A), line 25)	,245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y 9,742,545,2	38. 78. 77. 57. 47. 0. 15. 22. 68. 52. 05. ear 28. 65.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year 9,680,542,422.
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Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 ert II	Program service Investment incomplete Control of the Professional for Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature Investment of the Professional for the Professional for Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature Ilties of perjury, Investment Inv	cerevenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A) co or for members (Part IX, column (A) compensation, employee benefits (F undraising fees (Part IX, column (A), line gexpenses (Part IX, column (D), line se (Part IX, column (A), lines 11a-11d, se Add lines 13-17 (must equal Part IX expenses. Subtract line 18 from line Part X, line 16) (Part X, line 26) fund balances. Subtract line 21 from the Block declare that I have examined this return,	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29 , 847 11f-24e) K, column (A), line 25) 12 line 20 including accompanying schedule	, 245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y 9,742,545,2 3,015,858,7 6,726,686,4	38. 78. 77. 57. 47. 0. 15. 22. 68. 52. 05. 6ar 28. 65. 63.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year 9,680,542,422. 2,818,269,936. 6,862,272,486.
Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 ert II	Program service Investment incomplete Investment in	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A) co or for members (Part IX, column (A), compensation, employee benefits (F undraising fees (Part IX, column (D), line gexpenses (Part IX, column (D), line st (Part IX, column (A), lines 11a-11d, st. Add lines 13-17 (must equal Part IX expenses. Subtract line 18 from line Part X, line 16) (Part X, line 26) cund balances. Subtract line 21 from the Block declare that I have examined this return, Declaration of preparer (other than office	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29 , 847 11f-24e) K, column (A), line 25) 12 line 20 including accompanying schedule	, 245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y 9,742,545,2 3,015,858,7 6,726,686,4 ments, and to the best r has any knowledge.	38. 78. 77. 57. 47. 0. 15. 22. 68. 52. 05. 6ar 28. 65. 63.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year 9,680,542,422. 2,818,269,936. 6,862,272,486.
net Assets or Expenses of true Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 art II er pena correct	Program service Investment incomplete Control of the Professional for Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature Investment of the Professional for the Professional for Total fundraisi Other expense Revenue less Total assets (F Total liabilities Net assets or Signature Ilties of perjury, Investment Inv	cerevenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A) co or for members (Part IX, column (A) compensation, employee benefits (F undraising fees (Part IX, column (A), line gexpenses (Part IX, column (D), line se (Part IX, column (A), lines 11a-11d, se (Part IX, column (A), lines 11a-11d, sexpenses. Subtract line 18 from line expenses. Subtract line 18 from line for t X, line 16) (Part X, line 26) cond balances. Subtract line 21 from the Block declare that I have examined this return, Declaration of preparer (other than office	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29 , 847 11f-24e) K, column (A), line 25) 12 line 20 including accompanying schedule	, 245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y 9,742,545,2 3,015,858,7 6,726,686,4 ments, and to the best r has any knowledge.	38. 78. 77. 57. 47. 0. 15. 22. 68. 52. 05. 6ar 28. 65. 63.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year 9,680,542,422. 2,818,269,936. 6,862,272,486.
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Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 art II er pena correc	Program service Investment incomplete Control of the Professional for Total fundraisi Other expense Revenue less Total assets (Fotal liabilities Net assets or Signature Control of the Complete Control of the Control	cerevenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, (Part VIII, column (A), lines 5, 6d, 8c, add lines 8 through 11 (must equal nilar amounts paid (Part IX, column (A) co or for members (Part IX, column (A) compensation, employee benefits (F undraising fees (Part IX, column (A), line gexpenses (Part IX, column (D), line es (Part IX, column (A), lines 11a-11d, s. Add lines 13-17 (must equal Part IX, expenses. Subtract line 18 from line Part X, line 16) (Part X, line 26) cund balances. Subtract line 21 from e Block declare that I have examined this return, Declaration of preparer (other than office	and 7d) 9c, 10c, and 11e) Part VIII, column (A), line 12) A), lines 1-3)), line 4) Part IX, column (A), lines 5-10) ne 11e) 225) 29,847 11f-24e) K, column (A), line 25) 12 line 20 including accompanying scheduler) is based on all information of weight in the second content of the second conten	, 245.	Prior Year 580,482,5 2,234,980,8 365,183,9 49,905,6 3,230,553,0 398,942,9 1,584,150,3 441,2 936,736,5 2,920,271,0 310,282,0 eginning of Current Y 9,742,545,2 3,015,858,7 6,726,686,4 ments, and to the best r has any knowledge. 05/0	38. 78. 77. 57. 47. 0. 15. 22. 68. 52. 05. 6ar 28. 65. 63.	565,546,032. 2,401,300,421. 141,313,501. 31,411,002. 3,139,570,956. 429,008,070. 0. 1,690,240,053. 646,774. 1,028,248,407. 3,148,143,3048,572,348. End of Year 9,680,542,422. 2,818,269,936. 6,862,272,486.

Form **990** (2022)

No

P02061479

X Yes

self-employed

Firm's EIN 13-5565207

Phone no.703-286-8000

5/9/2024

Form	1990 (2022) UNIVERSITY OF PITTSBURGH	25-0965591	Page 2
	rt III Statement of Program Service Accomplishments		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III		х
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 🗓 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	· [Yes 🗓 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	s measured by e	xpenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers, the total exp	enses, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$942,080,587. including grants of \$152,727,911.) (Reven	ue\$1,	<u>164,937,719.</u>)
	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 \$ 939,915,904. including grants of \$ 275,285,161.) (Reven	iue \$	968,389,674.)
	INSTRUCTION - INCLUDES EXPENDITURES FOR ACTIVITIES OF THE INSTITUTION'S		
	INSTRUCTION PROGRAMS.		
4c	(Code:) (Expenses \$ 368,354,884. including grants of \$) (Reven	uie \$	116,077,879.)
-10	ACADEMIC SUPPORT - INCLUDES EXPENDITURES IN SUPPORT OF THE UNIVERSITY'S		
	PRIMARY MISSIONS - INSTRUCTION, RESEARCH, AND PUBLIC SERVICE.		
	Other program continue (December on Selectula C.)		
4d	Other program services (Describe on Schedule O.)	1/0 710 015	
_		148,718,215.	1
<u>4e</u>	Total program service expenses 2,845,138,582.		Form 990 (2022)
			-com 330 (2022

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Form 990 (2022) UNIVERSITY OF PITTSBURGH Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7		0		_ A
,	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	-
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	х	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

232003 12-13-22

Part IV Checklist of Required Schedules (continued)

	of the state of th		· · ·	
00	Did the constitution was at accept the or \$5 000 of sweets or other assistance to surface demonstrational and		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	20	х	
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Α	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	00	х	
04-	Schedule J	23	Α	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	240	х	
h	Schedule K. If "No," go to line 25a	24a	Λ	х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		x
	any tax-exempt bonds?	24c 24d		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEh		x
06	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Α
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
20	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
28				
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а		28a	х	
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X	
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?lf	200		
·	"Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
30		30	х	
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	 • •		
UZ.	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	55		
٠.	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	-		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa	rt 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			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 5674	5		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 1	5		

(gambling) winnings to prize winners?

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Form **990** (2022)

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 28506			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х	
3а	· · · · · · · · · · · · · · · · · · ·		3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				v
	any contributions that were not tax deductible as charitable contributions?		6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	-			
7	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	vices provided to the payor?	70	х	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a 7b	X	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w		76	Λ	
С	to file Form 8282?	•	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		7f	Х	
g g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
			8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	 	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	13b			
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13c			
с 14а		I	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		- **		
.5	excess parachute payment(s) during the year?		15	х	
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

232005 12-13-22

UNIVERSITY OF PITTSBURGH Form 990 (2022) 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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 35 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent _____ 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on 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 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Х Х 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Х 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed PA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 Upon request X Own website Another's website Other (explain on Schedule O) Describe on 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.

Form **990** (2022)

State the name, address, and telephone number of the person who possesses the organization's books and records

15260-6471

THURMAN D. WINGROVE - (412)624-6050

3015 CATHEDRAL OF LEARNING, PITTSBURGH, PA

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	aniza	ation	cor	npei	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	ition more	than	one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)					compensation	compensation	amount of
	week	_	CCI aii		l)/ ii us	100)	from	from related	other
	(list any hours for	director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	5	stee			nsateo		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee	Institutional trustee		yee	Highest compensated employee		` 1099-NEC)	,	and related
	below	/id ual	tution	ie.	Key employee	est co loyee	ner			organizations
	line)	Indi	Insti	Officer	Key	High emp	Former			
(1) PATRICK R. NARDUZZI	40.00									
HEAD FOOTBALL COACH						Х		6,443,259.	0.	256,292.
(2) EDWARD J. GREFENSTETTE	5.00									
TRUSTEE	40.00	Х						0.	2,134,476.	1,854,743.
(3) F. JEFFREY CAPEL III	40.00									
HEAD MEN'S BASKETBALL COACH						Х		3,546,396.	0.	44,217.
(4) HEATHER R. LYKE	40.00									
DIRECTOR OF ATHLETICS						Х		1,557,361.	0.	130,362.
(5) ARTHUR S. LEVINE	40.00									
FMR SVC HEALTH SCIENCES THRU 6/1/20							Х	1,499,390.	0.	53,427.
(6) ANANTHA SHEKHAR	40.00									
SVC HEALTH SCIENCES	1.00			Х				1,378,891.	0.	157,775.
(7) JEFFER CHOUDHRY	40.00									
CHIEF INVESTMENT OFFICER				Х				1,340,904.	0.	22,475.
(8) RANDY V. BATES	40.00									
ASSISTANT FOOTBALL COACH						Х		868,538.	0.	69,406.
(9) PATRICK D. GALLAGHER	40.00									
CHANCELLOR / CEO	5.00	Х		Х				679,385.	25,000.	139,969.
(10) PAUL LAWRENCE	40.00									
TREASURER				Х				723,889.	0.	79,632.
(11) FRANK CIGNETTI	40.00									
ASSISTANT FOOTBALL COACH						Х		753,489.	0.	42,986.
(12) ANN E. CUDD	40.00									
PROVOST/SR VICE CHANCELLOR				Х				489,277.	0.	70,047.
(13) ROBIN A. RUTENBAR	40.00									
SR VICE CHANCELLOR- RESEARCH				Х				442,651.	0.	62,317.
(14) DAVID N. DEJONG	40.00									
SVC BUSINESS OPS				Х				420,520.	0.	83,742.
(15) GEOVETTE E. WASHINGTON	40.00									
SVC & CHIEF LEGAL OFFICER		L		Х				444,923.	0.	47,658.
(16) NARAHARI SASTRY	40.00									
CFO/SR VICE CHANCELLOR	1.00			Х				403,888.	0.	56,976.
(17) ROSALYN E. JONES	40.00									
VC/SECRETARY OF THE BOT				х				254,328.	0.	30,853.

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Page 8

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Vos No

2,808

			res	NO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3	Х	
4	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	4	Х	
5	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	5		Х

Section B. Independent Contractors

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

the organization. Report compensation for the calcular year ending w		1
(A)	(B)	(C)
Name and business address	Description of services	Compensation
CHARTWELLS DINING SERVICES		
2 INTERNATIONAL DR, RYE BROOK, NY 10573	FOOD SERVICE	51,743,856.
PJ DICK INC		
225 NORTH SHORE DRIVE, PITTSBURGH, PA 15212	CONSTRUCTION	50,835,447.
TURNER MOSITES JOINT VENTURE, 925 LIBERTY		
AVENUE 3RD FL, PITTSBURGH, PA 15222	CONSTRUCTION	49,400,548.
RYCON CONSTRUCTION CO, 2501 SMALLMAN ST		
STE 100, PITTSBURGH, PA 15222	CONSTRUCTION	34,990,772.
MASCARO BARTON-MALOW		
1720 METROPOLITAN ST, PITTSBURGH, PA 15233	CONSTRUCTION	21,421,886.
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	679	

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2022)

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Form 990 UNIVERSITY OF PITTSBURGH 25-0965591

Form 990 UNIVERSITY O									25-096559	1
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(c	heck	all t	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	line)	힐	su	₽	æ.	ij	윤			
(27) JAY COSTA, JR.	5.00	1						_	_	
IRUSTEE		Х						0.	0.	
(28) JAMES P. COVERT	5.00	-						_	_	
TRUSTEE		Х						0.	0.	
(29) BRADLEY J. FRANC THRU 11/22	5.00									
TRUSTEE		Х						0.	0.	
(30) DEBORAH J. GILLOTTI	5.00	1								
TRUSTEE		Х						0.	0.	
(31) LISA A. GOLDEN	5.00									
TRUSTEE		Х						0.	0.	
(32) DAWNE S. HICKTON	5.00									
PRUSTEE		Х						0.	0.	
(33) DIANE P. HOLDER	5.00									
TRUSTEE		Х						0.	0.	
(34) SY HOLZER THRU 11/22	5.00									
TRUSTEE		Х						0.	0.	
(35) PATRICIA D. HOROHO	5.00									
TRUSTEE		Х						0.	0.	
(36) S. JEFFREY KONDIS	5.00									
TRUSTEE		Х						0.	0.	
(37) WILLIAM K. LIEBERMAN	5.00									
PRUSTEE		Х						0.	0.	
(38) ROBERTA A. LUXBACHER	5.00									
TRUSTEE		Х						0.	0.	
(39) JOHN A. MAHER III	5.00									
TRUSTEE		Х						0.	0.	
(40) ERIN W. MCDOWELL	5.00									
TRUSTEE		Х						0.	0.	
(41) LARRY J. MERLO	5.00									
TRUSTEE		х						0.	0.	
(42) NATALIE MIHALEK	5.00									
TRUSTEE		х						0.	0.	
(43) VALERIE NJIE	5.00									
TRUSTEE		х						0.	0.	
(44) JOHN H. PELUSI, JR.	5.00									
TRUSTEE		х						0.	0.	
(45) ROBERT RITSON, JR.	5.00									
TRUSTEE		х						0.	0.	
(46) JACK T. TIGHE III	5.00									
	l .	x	ı	ı	I	ı	ı	0.	0.	

Form 990 UNIVERSITY OF PITTSBURGH 25-0965591

Form 990 UNIVERSITY O	F PITTSBURG	H							25-096559	1
Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
Trains and the	hours	l (cl			that		lv)	compensation	compensation	amount of
	per	(<u> </u>		T		·,,	from	from related	other
	week					ee/		the	organizations	compensation
	(list any	ector				old m		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ed er		(W-2/1099-MISC)		organization
	related	stee o	ustee			ensa				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	vidua	itutio	Ser	emp	hesto	Former			
	line)	Indi	Inst	Officer	Key	Hig	Par			
(47) PETER C. VARISCHETTI	5.00									
TRUSTEE		х						0.	0.	0.
(48) JOHN J. VERBANAC	5.00									
TRUSTEE		х						0.	0.	0.
(49) ADAM C. WALKER	5.00								· ·	•
TRUSTEE	— 3.00	X						0.	0.	•
	F 00	^	\vdash	\vdash		\vdash	<u> </u>	0.	0.	0.
(50) WILLIAM WARD, JR.	5.00	l					ĺ	_	=	_
TRUSTEE	1	Х		_				0.	0.	0.
(51) MICHAEL G. WELLS	5.00	1								
TRUSTEE		Х						0.	0.	0.
(52) JAKE WHEATLEY, JR.	5.00									
TRUSTEE		Х						0.	0.	0.
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	1						<u> </u>			
Total to Part VII, Section A, line 1c										

Form 990 (2022) UNIVERSITY
Part VIII Statement of Revenue

		Check if Schedule O	conta	aine a roenc	nea	or note to any lir	ne in this Part VIII			
		Officer if Octreditie O	JOITE	airis a respe	1130	of flote to arry in	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenuè éxcluded
								function revenue	business revenue	from tax under sections 512 - 514
S SI				1.1						30000013 312 314
aut										
اع ق		Membership dues				1 511 007				
rts,		Fundraising events				1,511,807.				
Contributions, Gifts, Grants and Other Similar Amounts		Related organizations				232,523,008.				
Sin		Government grants (contr				206,494,670.				
je E	Ť	All other contributions, gifts,				105 016 545				
흥히		similar amounts not included				125,016,547.				
ng u	_	Noncash contributions included in	lines	1a-1f 1g	5	5,486,393.	F.C.F. F.A.C. 0.2.2			
9 C	h	Total. Add lines 1a-1f					565,546,032.			
_		analyma (anymna ama				Business Code	1 164 025 510			1164025510
ice	2 a					541700	1,164,937,719.	0.60 200 684		1164937719.
Je n	b				_	611710	968,389,674.		2 204 007	
m Nen	C	SALES-AUXILIARY			_	900004	151,923,202.			
gra Re	a	SALES-EDUCATIONAL			_	711300	115,018,109.		1,867,909.	
Program Service Revenue	e	UNIVERSITY PRESS			_	513110	1,031,717.	1,031,717.		
-	Ţ	All other program service					2 401 200 421			
\rightarrow	<u>g</u> 3	Total. Add lines 2a-2f					2,401,300,421.			
	3	Investment income (included) other similar amounts)					99,001,656.			99,001,656.
	4	Income from investment of					33,001,030.			33,001,030.
	4 5			•	•		25,659,133.			25,659,133.
	5	Royalties		(i) Real		(ii) Personal	25,055,155.			25,035,133.
	6.0	Gross rents	6a	1 - 1		(ii) i croonar				
		Gross rents Less: rental expenses	6b	12,543,8						
		Rental income or (loss)	6c	3,428,1						
		Net rental income or (loss)		3,120,			3,428,189.			3,428,189.
		Gross amount from sales of	,	(i) Securit	ies	(ii) Other	0,120,200.			0,120,200.
	ı a	assets other than inventory	7a	26363163		(ii) Garier				
	h	Less: cost or other basis	1 a	2030310.						
<u>e</u>	b	and sales expenses	7b	25940045	549					
enr	•	Gain or (loss)	$\overline{}$							
her Revenue		Net gain or (loss)					42,311,845.			42,311,845.
e		Gross income from fundraisi			Γ		12,011,010.			12,011,010.
됩	o u			,807. of						
		contributions reported on								
		Part IV, line 18			8a	227,778.				
	b				8b	1,820,051.				
		Net income or (loss) from				, ,	-1,592,273.			-1,592,273.
		Gross income from gamin								
		Part IV, line 19			9a	284,860.				
	b				9b	185,645.				
		Net income or (loss) from					99,215.			99,215.
		Gross sales of inventory,	-	-			·			
		and allowances			10a	9,534,396.				
	b	Less: cost of goods sold			10b					
	С	Net income or (loss) from	sales	s of invento	ry		2,896,859.	1,895,962.	1,000,897.	
s						Business Code				
Miscellaneous Revenue	11 a	PARTNERSHIP GAIN(LO	SS)			525990	919,879.		919,879.	
enu	b				_					
Se Se	С									
Mis		All other revenue								
	е	Total. Add lines 11a-11d					919,879.			
	12	Total revenue. See instruction	ne				l 3 139 570 956	1 233 185 768.	l 6 993 672	1333845484.

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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 respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	146,923,601.	146,923,601.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	275,299,420.	275,299,420.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	6 707 040	6 505 040		
	individuals. See Part IV, lines 15 and 16	6,785,049.	6,785,049.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	E 245 402	4 004 045	5 685 064	5== 0=5
	trustees, and key employees	7,345,183.	1,091,347.	5,675,861.	577,975
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	0.006.000	1 465 055	1 060 100	150 045
	persons described in section 4958(c)(3)(B)	2,886,002.		1,260,102.	158,845
7	Other salaries and wages	1,288,611,686.	1,180,616,099.	90,818,725.	17,176,862
8	Pension plan accruals and contributions (include	105 710 171	05 052 004	0 176 025	1 607 045
_	section 401(k) and 403(b) employer contributions)	105,718,171.		8,176,935.	1,687,245
9	Other employee benefits	206,992,451.	187,167,679.	16,850,142.	2,974,630
10	Payroll taxes	78,686,560.	71,091,921.	6,342,240.	1,252,399
11	Fees for services (nonemployees):	F04 000		F24 022	
	Management	524,822.		524,822.	
	Legal	15,492,435.		15,492,435.	
	Accounting	2,249,729.	901 000	2,249,729.	
	Lobbying	801,000.	801,000.		646 774
	Professional fundraising services. See Part IV, line 17	646,774.		FF 907 700	646,774
f	Investment management fees	55,807,799.		55,807,799.	
g	Other. (If line 11g amount exceeds 10% of line 25,	239,668,378.	207,112,673.	30,421,048.	2 134 657
40	column (A), amount, list line 11g expenses on Sch 0.)	2,307,877.	2,295,945.	30,421,040.	2,134,657
	Advertising and promotion	134,501,430.	133,760,669.		740,761
13	Office expenses	57,073,336.	56,957,753.	20,034.	95,549
14 15	Information technology	57,075,550.	30,331,133.	20,034.	75,547
15 16	Royalties	160,959,299.	147,714,940.	11,840,355.	1,404,004
17	Occupancy	62,975,777.	62,139,470.	11,040,333.	836,307
17 18	Travel	02,575,777.	02,133,470.		030,307
10	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings	6,927,438.	6,840,497.		86,941
19 20		58,750,716.	54,859,505.	3,891,211.	55,541
20 21	Payments to affiliates	30,730,710.	31,035,303.	0,001,211.	
22	Depreciation, depletion, and amortization	203,445,678.	190,224,071.	13,221,607.	
22 23		11,580,838.	2,249,092.	9,320,036.	11,710
23 24	Other expenses. Itemize expenses not covered	,500,550:	_,,	2,020,000.	11,710
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	LIBRARY	9,409,636.	9,409,636.		
a b	DUES AND FEES	5,772,219.	4,477,169.	1,244,396.	50,654
C		٠, ٠, ٠, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١, ١,	-,-/,,±03.	_,,	30,031
d					
	All other expenses				
25 25	Total functional expenses. Add lines 1 through 24e	3,148,143,304.	2,845,138,582.	273,157,477.	29,847,245
26	Joint costs. Complete this line only if the organization	-,-10,110,001.	2,010,100,002.		25,011,213
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

232010 12-13-22

Form 990 (2022) Part X Balance Sheet

	IL A	Check if Schodula O contains a response or no	to to an	v line in this Port V			
		Check if Schedule O contains a response or no	ne io an	y iiile iii tiiis Part A	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			1,111,206,572.	2	798,356,609.
	3	Pledges and grants receivable, net			69,687,774.	3	67,381,342.
	4	Accounts receivable, net			258,011,485.	4	394,640,727.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disqualified persons (as defined					
		under section 4958(f)(1)), and persons describe				6	
S	7	Notes and loans receivable, net			26,635,921.	7	25,576,359.
Assets	8	Inventories for sale or use			5,635,697.	8	4,320,740.
ğ	9	Prepaid expenses and deferred charges			24,449,677.	9	26,063,767.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	6,236,955,245.			
	b	Less: accumulated depreciation		3,596,623,451.	2,397,508,041.	10c	2,640,331,794.
	11	Investments - publicly traded securities			1,317,461,960.	11	1,418,415,935.
	12	Investments - other securities. See Part IV, line			4,262,599,508.	12	4,125,445,852.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		269,348,593.	15	180,009,297.	
	16	Total assets. Add lines 1 through 15 (must equ			9,742,545,228.	16	9,680,542,422.
	17	Accounts payable and accrued expenses	793,298,700.	17	720,882,970.		
	18	Grants payable			, ,	18	
	19	Deferred revenue			159,297,501.	19	181,846,040.
	20	Tax-exempt bond liabilities			95,718,550.	20	95,680,409.
	21	Escrow or custodial account liability. Complete			, ,	21	, ,
ý	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub-					
ig		controlled entity or family member of any of the				22	
Ë	23	Secured mortgages and notes payable to unre			23		
	24	Unsecured notes and loans payable to unrelate			1,367,985,653.	24	1,323,350,368.
	25	Other liabilities (including federal income tax, p			. , ,		, , ,
		parties, and other liabilities not included on line	-				
		of Schedule D	,		599,558,361.	25	496,510,149.
	26	Total liabilities. Add lines 17 through 25			3,015,858,765.	26	2,818,269,936.
		Organizations that follow FASB ASC 958, ch			, , ,		
Ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			4,356,312,437.	27	4,554,839,416.
Bal	28	Net assets with donor restrictions			2,370,374,026.	28	2,307,433,070.
nd		Organizations that do not follow FASB ASC					
Ē		and complete lines 29 through 33.	,				
Š	29	Capital stock or trust principal, or current funds	3			29	
set	30	Paid-in or capital surplus, or land, building, or e				30	
Ass	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			6,726,686,463.	32	6,862,272,486.
_	33	Total liabilities and net assets/fund balances			9,742,545,228.	33	9,680,542,422.

Ра	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,139		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,148		
3	Revenue less expenses. Subtract line 2 from line 1	3	<u> </u>	,572	,348.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,726	,686	,463.
5	Net unrealized gains (losses) on investments	5	75	,421	,877.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	68	,736	,494.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	6,862	,272	,486.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audi	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			х	
					•

SCHEDULE A

(Form 990)

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

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.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

Pa	rt I	Reason for Public	Charity Status.	(All organizations must c	omplete th	nis part.) S	See instructions.					
The	organ	ization is not a private founc	dation because it is: (For lines 1 through 12. c	heck only	one box.)						
1		A church, convention of ch										
2	X	•	•				-7676-7-					
3	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	一											
7	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:	ar the benefit of a co	llaga ar university evene	d or operate	tod by a a	avaramantal unit dagarih	and in				
5		An organization operated for		niege of university owner	u or opera	ted by a g	overninental unit descri	Ded III				
_		section 170(b)(1)(A)(iv). (C										
6	\vdash	A federal, state, or local go	-									
7		An organization that norma	•	intial part of its support f	rom a gov	ernmental	unit or from the general	public described in				
		section 170(b)(1)(A)(vi). (C										
8	\vdash	A community trust describe										
9		An agricultural research org										
		or university or a non-land-o	grant college of agric	culture (see instructions).	Enter the	name, city	y, and state of the collec	je or				
		university:										
10	Ш	An organization that norma										
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of its support	from gross investment				
		income and unrelated busin		(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.				
		See section 509(a)(2). (Co	mplete Part III.)									
11	\vdash	An organization organized	•	•	•							
12		An organization organized	•	,	•		•	•				
		more publicly supported or	-					Check the box on				
		lines 12a through 12d that	* *			•						
а	ı	☐ Type I. A supporting organical interpretation in the properties of the proper	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s), typically by	giving /				
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	supporting				
		organization. You must o	complete Part IV, Se	ections A and B.								
b	· L		anization supervised	d or controlled in connec	tion with it	s support	ed organization(s), by ha	aving				
		control or management of	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sur	ported				
		organization(s). You mus	t complete Part IV,	Sections A and C.								
C	;		-					ed with,				
		its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.					
C	I L						• • • •					
		that is not functionally int		• ,	•		•	iveness				
		requirement (see instruct	tions). You must co r	nplete Part IV, Sections	A and D,	and Part	V.					
е	• L	☐ Check this box if the orga					a Type I, Type II, Type III					
		functionally integrated, or		nally integrated support	ing organiz	zation.						
f		er the number of supported o	-									
0		vide the following information (i) Name of supported	n about the supporte (ii) EIN	ed organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	L (vi) Amazovat at atlant				
	,	organization	(11) EIIN	(described on lines 1-10	in your governi	ng document?	support (see instructions)	(vi) Amount of other support (see instructions)				
				above (see instructions))	Yes	No	1	1				
Tota	al											

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.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	278,771,458.	301,857,506.	509,627,810.	562,423,485.	567,852,464.	2220532723.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	278,771,458.	301,857,506.	509,627,810.	562,423,485.	567,852,464.	2220532723.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						2220532723.
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	278,771,458.	301,857,506.	509,627,810.	562,423,485.	567,852,464.	2220532723.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	105,549,582.	80,213,104.	131,003,931.	56,237,751.	99,001,656.	472,006,024.
9	Net income from unrelated business						_
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						_
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2692538747.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 13	3,802,268,266.
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stor	here					<u></u>
	tion C. Computation of Publ						
	Public support percentage for 2022 (I					14	82.47 %
	Public support percentage from 2021					15	80.34 %
	33 1/3% support test - 2022. If the o	~					
	stop here. The organization qualifies						
	33 1/3% support test - 2021. If the o	-					
	and stop here. The organization qual						
	10% -facts-and-circumstances tes						
	and if the exacpiration meets the feet	s-and-circumstanc	es test, check this	box and stop her	·	VI how the organiz	ation
	and if the organization meets the fact						
	meets the facts-and-circumstances to	est. The organization		*	-		
	meets the facts-and-circumstances to 10% -facts-and-circumstances tes	est. The organization t - 2021. If the organic	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	
	meets the facts-and-circumstances te 10% -facts-and-circumstances tes more, and if the organization meets the	est. The organization t - 2021. If the organic facts and circum	anization did not c nstances test, che	check a box on line	e 13, 16a, 16b, or a cop here. Explain in	17a, and line 15 is n Part VI how the	10% or
	meets the facts-and-circumstances to 10% -facts-and-circumstances tes	est. The organization t - 2021. If the organication the facts and circum the facts and the circum the facts and the facts and the facts and the facts and the facts are also as the facts and the facts are as a fact and the fact are as a fact are	anization did not c nstances test, che ne organization qu	check a box on line ock this box and st alifies as a publicly	e 13, 16a, 16b, or ² c op here. Explain ir y supported organ	17a, and line 15 is n Part VI how the ization	10% or

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to					1	
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital					1	
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>	
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
	check this box and stop here		•				<u></u>
	ction C. Computation of Publ					1 1	
	Public support percentage for 2022 (15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					l l	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2022. If the						17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 $1/3\%$, che						
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in:	structions	

232023 12-09-22

Schedule A (Form 990) 2022

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	_		
	3с		
	40		
	4a		
	41-		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	ฮม		
	9c		
	46		
	10a		
	10b		
4	A (Earr	~ 000	0000

Pa	Triv Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, 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			
<u></u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)-		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		,	
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	istructio		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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.	2a		
a	Did the activities described on line 2a, above, 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	OI-		
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		26		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

PITT___1

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on	Nov. 20, 1970 (e <i>xplain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrate	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ıed)	
Secti	on D - Distributions				Current Year
1					
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsiv	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
	Breakdown of line 7:				
	Excess from 2018				
<u>b</u>	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

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

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

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.

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

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

Name of organization **Employer identification number** UNIVERSITY OF PITTSBURGH 25-0965591 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? Nο 4a Was a correction made? No b If "Yes," describe in Part IV. 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? 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. (b) Address (d) Amount paid from (a) Name (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. 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) 2022

LHA

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Pá	cart II-A Complete if the org section 501(h)).	ganizatio	on is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	election under
		ition belon	as to an affi	liated group (and list in	n Part IV each affiliated	group member's nar	me. address. FIN.
	expenses, and sha		•	•		9 1	,,,
В	Check if the filing organiza	tion check	ed box A ar	nd "limited control" pro	ovisions apply.		
			oying Expe leans amou	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1:	a Total lobbying expenditures to infl	uence pub	lic opinion (grassroots lobbying)			
-	Total lobbying expenditures to infl	uence a le	gislative boo	dy (direct lobbying)			
	Total lobbying expenditures (add I	ines 1a an	d 1b)				
	d Other exempt purpose expenditur						
	Total exempt purpose expenditure				ī		
	Lobbying nontaxable amount. Ent		unt from the	e following table in bot	h columns.		
	If the amount on line 1e, column (a) of	or (b) is:	The lob	bying nontaxable am	ount is:		
	Not over \$500,000		20% of	the amount on line 1e.			
	Over \$500,000 but not over \$1,00	0,000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	500,000		0 plus 10% of the exc			
	Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
	Over \$17,000,000		\$1,000,	000.			
	g Grassroots nontaxable amount (er						
	Subtract line 1g from line 1a. If zer	•					
	Subtract line 1f from line 1c. If zero						
	j If there is an amount other than ze	_					
	reporting section 4911 tax for this	year?		eraging Period Under	Castian FO1/h)		Yes No
	(Some organizations t		a section 5		have to complete all	of the five columns	below.
		Lobi	ying Expe	nditures During 4-Yea	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) :	2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
	a Lobbying nontaxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	Total lobbying expenditures						
	d Grassroots nontaxable amount						
	Grassroots ceiling amount						
	(150% of line 2d, column (e))						
	f Grassroots lobbying expenditures						v.la Q (Farra 000) 0000

Schedule C (Form 990) 2022

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 e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(1	o)
of th	e lobbying activity.	Yes	No	Amo	ount
1	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:				
а	Volunteers?	Х			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х			
	Media advertisements?	Х			16,624.
	Mailings to members, legislators, or the public?		Х		
	Publications, or published or broadcast statements?		Х		
	Grants to other organizations for lobbying purposes?		Х		050 006
	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х	77		958,286.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	x	Х		101 700
١	Other activities?	Α		1	101,780.
J	Total. Add lines 1c through 1i		v	Ι,	076,690.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5) or se	ction	
ı	501(c)(6).	011 00 1(0)	(0), 01 30	Otion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part	III-A, lin	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
С	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II	-A, lines 1 a	and 2 (See	
instrı	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART	! II-B, LINE 1, LOBBYING ACTIVITIES:				
LINE	E A: VOLUNTEERS- THE UNIVERSITY UTILIZES ALUMNI AND STUDENTS TO				
ADVO	CATE FOR STATE SUPPORT FOR THE UNIVERSITY THROUGH LETTER WRITING,				
EMA]	LS AND VISITS TO LEGISLATORS AND STATE OFFICIALS.				
LINF	B: STAFF MEMBERS- THE UNIVERSITY GOVERNMENTAL RELATIONS OFFICE				
				lo C (Form	

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022

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.

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

OMB No. 1545-0047

Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number 25-0965591

Par			s or Accounts.Complete	if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other ac	counts
1	Total number at end of year	(4,7 = 2.1.2. = 2.1.1.2. = 2.1.1.2.	(-,	
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 advis	sed funds	
•	are the organization's property, subject to the organization's	_		No
6	Did the organization inform all grantees, donors, and donor a			
•	for charitable purposes and not for the benefit of the donor of			
				No
Par				
1	Purpose(s) of conservation easements held by the organizat			
	Preservation of land for public use (for example, recrea		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 quali	fied 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
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after July 25,2006, and not on a		
	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax	
	year			
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the pe			
	violations, and enforcement of the conservation easements			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servation easements during t	the year
_				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the ye	ear
	Does each conservation easement reported on line 2(d) abor	vo catiofy the requirements of coation 170	\/b\/4\/D\/i\	
8		•		No No
9	and section 170(h)(4)(B)(ii)?			, NO
3	balance sheet, and include, if applicable, the text of the foot	•		
	organization's accounting for conservation easements.	note to the organization 3 linariolal statem	ichts that describes the	
Par	t III Organizations Maintaining Collections of	f Art. Historical Treasures. or C	ther Similar Assets.	
	Complete if the organization answered "Yes" on Form	•		
1a	If the organization elected, as permitted under FASB ASC 95		and balance sheet works	
	of art, historical treasures, or other similar assets held for pu	·		
	service, provide in Part XIII the text of the footnote to its fina		•	
b	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public	· ·		
	provide the following amounts relating to these items:	,	,	
	(i) Revenue included on Form 990, Part VIII, line 1		\$	149,020.
				25,191,568.
2	If the organization received or held works of art, historical tre		······· +	. ,
•	the following amounts required to be reported under FASB A		J /1	
а	Revenue included on Form 990, Part VIII, line 1		\$	
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instruction		Schedule D (Fo	orm 990) 2022

	34416 B (1 61111 666) 2622	NIVERSITY OF						25-0965			age 2
Pai	rt III Organizations Mai	ntaining Col	llections of A	rt, Historical Tr	easures, o	or Othe	er Siı	nilar Ass	ets(contin	iued)	
3	Using the organization's acquis	ition, accession,	, and other record	ds, check any of the	following tha	t make s	signific	ant use of it	S		
	collection items (check all that a	apply):									
а	X Public exhibition		d	I <u> </u> Loan or exc	hange progra	am					
b	Scholarly research		е	e U Other							
С	X Preservation for future ge	nerations									
4	Provide a description of the org	anization's colle	ections and explai	n how they further t	he organizati	on's exe	mpt p	urpose in Pa	rt XIII.		
5	During the year, did the organize	ation solicit or re	eceive donations	of art, historical trea	sures, or oth	er similaı	r asse	ts _	_	_	,
	to be sold to raise funds rather	than to be main	tained as part of t	the organization's co	ollection?			<u></u>	Yes	X	No
Pai	rt IV Escrow and Custo	_	•	ete if the organizatio	n answered	"Yes" on	Form	990, Part IV	, line 9, or		
	reported an amount on F	Form 990, Part X	(, line 21.								
1a	Is the organization an agent, tru								_	_	1
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement	nt in Part XIII and	d complete the fo	ollowing table:			_				
									Amount	[
С	Beginning balance							С			
d	Additions during the year							d			
е	Distributions during the year						⊢	е			
f	Ending balance							lf			T
	Did the organization include an							∟	Yes		∐No
	If "Yes," explain the arrangement										<u> </u>
Pai	rt V Endowment Funds		a) Current year	(b) Prior year				ree years back	(e) Four	veare	hack
	Decimalism of accusing lands			*							
1a	Beginning of year balance			5,680,225,886.			_	2,563,405			
D	Contributions		57,290,000. 128,738,000.			1,000.		0,445,000 1,518,000		,709, ,836,	
C	Net investment earnings, gains,		23,746,000.	20,435,624.				7,886,528		,830, ,170,	
a	Grants or scholarships		23,740,000.	20,433,024.	13,27	3,340.		7,000,320	' ' '	,170,	023.
е	Other expenditures for facilities		185,462,095.	148,676,865.	124,05	6 830	13	6,090,224	89	,627,	51/
_	and programs		14,873,000.		<u> </u>			4,039,179		,513,	
'	Administrative expenses			5,557,014,429.							
9 2	End of year balance Provide the estimated percenta					3,000.	4,20	3,414,414	• • • • • • • • • • • • • • • • • • • •	, 303 ,	103.
_	Board designated or quasi-endo		60,1000	% Coldinin (8	ajj rielu as.						
b	Permanent endowment	39.5000	%								
	Term endowment	.4000 %									
Ŭ	The percentages on lines 2a, 2b		d equal 100%								
За	Are there endowment funds not		•	ation that are held a	nd administe	ered for t	he				
	organization by:		· · · · · · · · · · · · · · · · · · ·							Yes	No
	(i) Unrelated organizations								3a(i)	х	
	(ii) Related organizations								3a(ii)		Х
b	If "Yes" on line 3a(ii), are the rela	ated organizatio	ns listed as requi	red on Schedule R?					3b		
4	Describe in Part XIII the intende										
Pai	rt VI Land, Buildings, ar	nd Equipme	nt.								
	Complete if the organiza	tion answered "	Yes" on Form 990	0, Part IV, line 11a. S	See Form 990), Part X,	line 1	0.			
	Description of propert		(a) Cost or o	ther (b) Cost	or other	(c) A	ccumi	ılated	(d) Book	κ valuε	- <u>-</u>
			basis (investr		(other)	dep	orecia	tion			
1a	Land			116	,294,016.				116	,294,	016.
b	Buildings			4,284	,235,751.	2,5	83,1	96,894.	1,701,	,038,	857.
	Leasehold improvements										
d	Equipment				,484,134.	6	597,3	68,660.	254	,115,	474.
	Other				,941,344.	3	316,0	57,897.		,883,	
Tota	I. Add lines 1a through 1e. (Colur	mn (d) must equ	al Form 990, Part	X, column (B), line 1	0c.)				2,640,	,331,	794.

Schedule D (Form 990) 2022

Part VII	Investments -	Other Securities

Complete if the organization answered	"Voo" on	Earm 000	Dort IV	line 11h	Soo Form 000	Dort V line 12
Complete il the organization answered	165 01	i Fullii 990,	railiv,	mie i ib.	See Fulli 990,	rail A, IIIIe 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	2,914,878,551.	END-OF-YEAR MARKET VALUE
(B) COMMINGLED INVESTMENTS IN PUBLIC SEC.	1,208,657,817.	END-OF-YEAR MARKET VALUE
(C) INSURANCE CSV & INSURANCE SURPLUS	1,909,484.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	4,125,445,852.	

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)		
otal (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)	
T-1-1 (October (b) result association 000 Port V and (P) line 15	

Total. (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	16,031,309.
(3)	PRESENT VALUE OF SPLIT INTEREST AGREEMENTS	14,562,543.
(4)	OTHER LIABILITIES	3,341,979.
(5)	CONDITIONAL ASSET REMEDIATION OBLIGATION	23,646,151.
(6)	INTEREST RATE SWAP AGREEMENTS	23,050,223.
(7)	AMOUNTS HELD IN CUSTODY	21,742,670.
(8)	RIGHT OF USE LEASE LIABILITIES	179,080,188.
(9)	ASSEMBLY BUILDING FINANCING	215,055,086.
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	496,510,149.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2022

sche	edule D (Form 990) 2022 UNIVERSITY OF PITTSBURGH		Z5-0965591	Page 4
Pai	rt XI Reconciliation of Revenue per Audited Financial St		nue per Return.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, Ii			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا مو ا		
	Net unrealized gains (losses) on investments			
b				
	Recoveries of prior year grants			
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 4- 1		
a	, , , ,			
	Other (Describe in Part XIII.)	•	4.	
	Add lines 4a and 4b			
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial St			
Га			enses per neturn.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, li		1.1	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ء ا		
b				
C	Other losses			
	Other (Describe in Part XIII.)	•		
	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)	-		
	Add lines 4a and 4b			
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 rt XIII Supplemental Information.	18.)	5	
		A. David IV. Barandala and Olar	Deat V. Bas A. Deat V. Bas O. Deat	M
	ride the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	•	Part V, line 4; Part X, line 2; Part	XI,
ines	22d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	any additional information.		
ח ס ג כ	TITT IIND A.			
AKI	T III, LINE 4:			
n1177	INTERPOLITY'S COLLEGIONS OF ARM HISMORICAL INDEASIDES. AN	ID OMITED		
THE	UNIVERSITY'S COLLECTIONS OF ART, HISTORICAL TREASURES, AN	ID OTHER		
тмт	TIAD ACCEMO THOUGHD A WARTEMY OF DATMITHOC COULDINGED DE	IOMOCD A DUC		
DIMI	ILAR ASSETS INCLUDE A VARIETY OF PAINTINGS, SCULPTURES, PH	OTOGRAPHS,		
N NTITLE A	TOTIES AND ETIDNISHINGS AS WELL AS SOUDIADLY DADEDS AND ADS	TUTVEC MUECE		
AIN.I. I	IQUES, AND FURNISHINGS AS WELL AS SCHOLARLY PAPERS AND ARC	CHIVES. THESE		
rmes	NG ARE HOUGED IN WARTOUG EAGILIMIEG AROUND GAMRUG INGLURIA	IO MILE EDION		
LIEN	MS ARE HOUSED IN VARIOUS FACILITIES AROUND CAMPUS INCLUDIN	IG THE FRICK		
PTNI	P ADMC DUTIDING MUE UTIIMAN ITDDADV AND MUE NAMTONAITMV	DOOMS MUE		
TNE	E ARTS BUILDING, THE HILLMAN LIBRARY, AND THE NATIONALITY	ROOMS. THE		
	VG OF ADM HIGHORIGAL MEDIAGUERG AND OWNER GIVILAR AGREGA	ADE HADD DOD		
WORK	KS OF ART, HISTORICAL TREASURES, AND OTHER SIMILAR ASSETS	ARE USED FOR		
ntin t	THE THURSDAY AND MUD DEPENDENT OF ADMITS ON AND AND AND	NIEG BOD WILL		
PORT	LIC EXHIBITION AND THE PRESERVATION OF ARTIFACTS AND ANTIC	UES FOR THE		
	DETM OF BUMUIDE GENERAMIONG . MUR GGUOLARIA RAPERG AND ARGU	ITVEC ADE ITCED		
3ENE	EFIT OF FUTURE GENERATIONS. THE SCHOLARLY PAPERS AND ARCH	IIVES AKE USED		
30p	DOMU ACADEMIC DECEADOU AND MUE DECEDUANTON OF DOCUMENTO	DELYMED MO		
OK	BOTH ACADEMIC RESEARCH AND THE PRESERVATION OF DOCUMENTS	KELATED TO		
7 57.7	UICHODICAL EIGIDEC AND EVENING			
Y E A	HISTORICAL FIGURES AND EVENTS.			

Schedule D (Form 990) 2022

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Schedule D (Form 990) 2022

36

SCHEDULE E

(Form 990)

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number

25-0965591

	UNIVERSITY OF PITTSBURGH	25-096	339I		
Pa	rt I				
				YES	NC
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,				
	bylaws, other governing instrument, or in a resolution of its governing body?		1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochu		-		
•	catalogues, and other written communications with the public dealing with student admissions, programs, and so	ı	2	Х	
		Si lolai si lips :			
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet				
	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the				
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the				
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general				
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II		3	Х	
	THROUGH ELECTRONIC AND PRINT DISTRIBUTION AT THE BEGINNING OF				
	EACH ACADEMIC TERM.				
ı	Does the organization maintain the following?				
-	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Х	
				X	\vdash
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminato	ry basis?	4b	Λ	\vdash
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing				
	with student admissions, programs, and scholarships?	r	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.				
		_			
5	Does the organization discriminate by race in any way with respect to:				
а	Students' rights or privileges?		5a		Х
	Admissions policies?		5b		Х
	Employment of faculty or administrative staff?		5c		Х
	Scholarships or other financial assistance?		5d		Х
	Educational policies?		5e		х
f			5f		х
'					X
	Athletic programs?		5g		X
n	Other extracurricular activities?		5h		_^
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.				
2 -	Does the erganization receive any financial aid or assistance from a severymental exercise		6-	х	
	Does the organization receive any financial aid or assistance from a governmental agency?		6a	- 21	Х
D	Has the organization's right to such aid ever been revoked or suspended?		6b		_^
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.				
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through				
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering				
	racial nondiscrimination? If "No," explain on Part II		7	Х	

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

Schedule E (Form 990) 2022

SCHEDULE F (Form 990)

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.

OMB No. 1545-0047
2022

Doen to Public

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization						Employer identification number		
UNIVERSITY OF PITTSBURG	ЭH				25-0965591			
		ctivities Ou	tside the United States. Comple	ete if the organ		Yes" on		
Form 990, Part IV								
=	-		ds to substantiate the amount of its gr			ı		
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	istance? 🗓	Yes No		
2 For grantmakers Door	ribo in Bort V the	organization's	procedures for monitoring the use of it	a aranta and a	thar assistance out	raida tha		
2 For grantmakers. Desc United States.	ribe in Part V the	e organization s	procedures for monitoring the use of it	s grants and o	ther assistance out	side trie		
	he following Part	: I. line 3 table ca	an be duplicated if additional space is	needed.)				
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total		
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and		
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)		e specific type (s) in the region	investments		
		in the region	recipients located in the region)	OI SEIVICE	(s) in the region	in the region		
				PROGRAM SEF	OVICES IN			
CENTRAL AMERICA AND					O EDUCATIONAL			
THE CARIBBEAN	1	13	PROGRAM SERVICES.	PROGRAMS.		501,700.		
						1		
				PROGRAM SEF	RVICES IN			
EAST ASIA AND THE				RELATION TO	EDUCATIONAL			
PACIFIC			PROGRAM SERVICES.	PROGRAMS.		1,979,958.		
				PROGRAM SEF	OUTCES IN			
					D EDUCATIONAL			
EUROPE			PROGRAM SERVICES.	PROGRAMS.		27,014,704.		
						1		
				PROGRAM SEF	RVICES IN			
MIDDLE EAST AND				RELATION TO	EDUCATIONAL			
NORTH AFRICA			PROGRAM SERVICES.	PROGRAMS.		616,377.		
				PROGRAM SEF	OVICES IN			
					D EDUCATIONAL			
NORTH AMERICA			PROGRAM SERVICES.	PROGRAMS.		6,149,564.		
				PROGRAM SEF	RVICES IN			
RUSSIA AND				RELATION TO	EDUCATIONAL			
NEIGHBORING STATES			PROGRAM SERVICES.	PROGRAMS.		99,287.		
				PROGRAM SEF	OVICES IN			
					EDUCATIONAL			
SOUTH AMERICA			PROGRAM SERVICES.	PROGRAMS.		854,373.		
						<u> </u>		
				PROGRAM SEF	RVICES IN			
				RELATION TO	EDUCATIONAL			
SOUTH ASIA			PROGRAM SERVICES.	PROGRAMS.		1,121,977.		
3 a Subtotal	1	13				38,337,940.		
b Total from continuation		_				04 116 303		
sheets to Part I	0	C				94,116,382.		
c Totals (add lines 3a and 3b)	1	13				132,454,322.		
LHA For Paperwork Reduct	ion Act Notice				Schedule F	(Form 990) 2022		

Totals

94,116,382.

Schedule F (Form 990) 2022 UNIVERSITY OF PITTSBURGH 25-0965591 Page 2

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.	513,258.	WIRE/CHECK	0.		_
		EUROPE	RESEARCH SUBCONTRACT.	3,038,691.	WIRE/CHECK	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	RESEARCH SUBCONTRACT.	474 518.	.WIRE/CHECK	0.		
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		NORTH AMERICA	RESEARCH SUBCONTRACT.	1,875,044.	WIRE/CHECK	0.		
		SOUTH ASIA	RESEARCH SUBCONTRACT.	425,884.	WIRE/CHECK	0.		
		SUB-SAHARAN AFRICA	RESEARCH SUBCONTRACT	442 272	WIRE/CHECK	0		
	1	SOUTH AMERICA -	RESEARCH SUBCONTRACT	443,2/3.	,WIRE/CHECK	0.		1
		ARGENTINA,						
		BOLIVIA, BRAZIL,						
		CHILE, COLUMBIA,	RESEARCH SUBCONTRACT.	8,855.	WIRE/CHECK	0.		
		L						
		RUSSIA AND						
		NEIGHBORING STATES	RESEARCH SUBCONTRACT.	5 526	.WIRE/CHECK	0.		
2 Enter total number of				-				

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax		
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	>	60
3	Enter total number of other organizations or entities	•	9

Schedule F (Form 990) 2022

25-0965591 Page **3**

Schedule F (Form 990) 2022

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.

UNIVERSITY OF PITTSBURGH

(a) Type of grant or assistance (b) Region (c) Number of recipients (d) Amount of recipients (d) Amount of cash grant (ash disbursement of cash disbursement on oncash assistance of valuation on oncash assistance of valuation on	Part III can be duplicated if a	dditional space is need						
	(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)

Schedule F (Form 990) 2022 Tent 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)	X 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; don't file with Form 990)	Yes	X 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)	X 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)	X 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)	X 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; don't file with Form 990)	X Yes	☐ No

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.
(cottinated number of respicitely, as applicable, 7 less complete this part to provide any additional information. See instituctions.
PART I, LINE 2:
THE THITTAL DETERMINATION OF PLICIBILITY AND ADDRODULATIONESS OF THE
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)

Department of the Treasury

Name of the organization

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.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number

UNIVERSITY	OF PITTSBURGH				25-0965591	
Part I Fundraising Activities required to complete this part	Complete if the organization answert.	ered "Y	'es" oı	n Form 990, Part IV,	line 17. Form 990-E2	filers are not
 1 Indicate whether the organization raise a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indi 	e X Solicitar f X Solicitar g X Special or oral agreement with any individual cart VII) or entity in connection with p	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees, or X Yes	
compensated at least \$5,000 by the	e organization.					
(i) Name and address of individual			Did aiser ustody trol of utions?	(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
DAVINCI DIRECT, INC 36	DIRECT MAIL SOLICITATION &	Yes	No			
CORDAGE PARK CIRCLE SUITE	CONSULTING		Х	397,420.	204,174.	193,246.
PLUS DELTA PARTNERS - 6965 EL						
CAMINO REAL, CARLSBAD, CA	CONSULTING-SEE PART IV		х	0.	113,153.	-113,153.
GRADUWAY INC - 2815 ELLIOTT					·	
AVE, SEATTLE, WA 98121	CONSULTING-SEE PART IV		х	0.	114,904.	-114,904.
RUFFALO, NOEL, LEVITZ - 1025						,
KIRKWOOD PKWY, CEDAR RAPIDS,	CONSULTING-SEE PART IV		х	0.	187,043.	-187,043.
WASHBURN & MCGOLDRICK - 24 N					,	,
BRYN MAWR AVENUE, BRYN MAWR,	CONSULTING-SEE PART IV		х	0.	27,500.	-27,500.
Total				397,420.	646,774.	-249,354.
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	s or has been notified	d it is exempt from re	egistration
AL,AK,AR,CO,CT,FL,GA,IN,KS,KY,M	D,MI,MN,MS,NJ,NH,NM,NC,ND,O	H,OK,	PA,R	I,SC,TN		
UT, VA, WV, HI, CA, DC, IL, MA, ME, NV, O	R,WA,WI					

232081 10-27-22

Schedule G (Form 990) 2022

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

SEE PART IV FOR CONTINUATIONS

Pa	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			
			UPMC CELEBRITY			(add col. (a) through			
			CLASSIC GOLF OUTIN		12	col. (c))			
ne			(event type)	(event type)	(total number)				
Revenue	١,	Our and an artists	167 400	1 202 005	160 647	1 720 012			
Be	1	Gross receipts	167,480.	1,393,885.	168,647.	1,730,012.			
	,	Less: Contributions	109,500.	1,264,932.	130,342.	1,504,774.			
	-		,	, ,	,	, ,			
	3	Gross income (line 1 minus line 2)	57,980.	128,953.	38,305.	225,238.			
	4	Cash prizes	1,095.			1,095.			
	_	Nanagah minag	1 280			1 280			
SS	5	Noncash prizes	1,280.			1,280.			
ense	6	Rent/facility costs	35,789.	153,563.	11,804.	201,156.			
άX			,	,	,	,			
Direct Expenses	7	Food and beverages	56,153.	198,460.	126,950.	381,563.			
Ë									
	8	Entertainment		· · · · · · · · · · · · · · · · · · ·		416,799.			
	9	Other direct expenses		778,087.	13,358.	818,158.			
	10					1,820,051. -1,594,813.			
Da	11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than								
1 6		\$15,000 on Form 990-EZ, line 6a.	answered fes on Form	1990, Part IV, line 19, or	reported more triair				
		\$10,000 0111 01111 000 EE, 11110 00.	(b) Pull tabs/instant			(d) Total gaming (add			
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))			
eve									
<u> </u>	1	Gross revenue			284,860.	284,860.			
Se	2	Cash prizes			142,460.	142,460.			
ens									
Ϋ́	3	Noncash prizes							
Direct Expenses	١,	Pont/facility costs							
ä	*	Rent/facility costs							
	5	Other direct expenses			43,185.	43,185.			
		,	Yes %	Yes %	Yes %	,			
	6	Volunteer labor	No No	No No	X No				
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			185,645.			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)			99,215.			
9	Fnt	ter the state(s) in which the organization condu	ucts gaming activities: PA	A					
		he organization licensed to conduct gaming a	<u> </u>			X Yes No			
b If "No," explain:									
		ere any of the organization's gaming licenses re			year?	Yes X No			
b	If "	Yes," explain:							

Sch	nedule G (Form 990) 2022 UNIVERSITY OF PITTSBURGH 25-09	65591		Page 3
11	Does the organization conduct gaming activities with nonmembers?	Х	Yes	No No
	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	X No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		58.80 %
b	An outside facility	13b		41.20 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name RYAN VARLEY			
	Address 3105 PETERSEN EVENTS CENTER - PITTSBURGH, PA 15260			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	х	Yes	☐ No
	o If "Yes," enter the amount of gaming revenue received by the organization of gaming revenue retained by the third party \$			
	Name BUMP WORLDWIDE			
	Address PO BOX 936714 - ATLANTA, GA 31193			
16	Gaming manager information:			
	Name SEE PART IV			
	Gaming manager compensation \$			
	Description of a misse quantitated			
	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			
Ĭ	retain the state gaming license?		Yes	X 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 \$			
Pa	IT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	art III, li	ines 9	, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
SCH	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
(I)	NAME OF FUNDRAISER: DAVINCI DIRECT, INC.			
	·			
(1)	ADDRESS OF FUNDRAISER:			
36	CORDAGE PARK CIRCLE SUITE 339, PLYMOUTH, MA 02360			
<u>(I)</u>	NAME OF FUNDRAISER: PLUS DELTA PARTNERS			
<u>(I)</u>	ADDRESS OF FUNDRAISER: 6965 EL CAMINO REAL, CARLSBAD, CA 92009			

Schedule G (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591 Page 4 Part IV | Supplemental Information (continued) (I) NAME OF FUNDRAISER: RUFFALO, NOEL, LEVITZ (I) ADDRESS OF FUNDRAISER: 1025 KIRKWOOD PKWY, CEDAR RAPIDS, IA 52404 (I) NAME OF FUNDRAISER: WASHBURN & MCGOLDRICK (I) ADDRESS OF FUNDRAISER: 24 N BRYN MAWR AVENUE, BRYN MAWR, PA 19010 SCHEDULE G, PART I THE UNIVERSITY RETAINS GRADUWAY, INC., PLUS DELTA PARTNERS, RUFFALO, NOEL, LEVITZ, AND WASHBURN & MCGOLDRICK 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 G, PART III LINE 15B BUMP WORLDWIDE \$18,890 PO BOX 936714 ATLANTA, GA 31193 PSSI \$12,658 3400 WATER ST. PITTSBURGH, PA 15203 BOM ADVISERS \$7,083 252 MARSHALL AVE.

Schedule G (Form 990)

CARNEGIE, PA 15106

SCHEDULE I (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990.

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

Open to Public Inspection

Name of the organization **Employer identification number** 25-0965591 UNIVERSITY OF PITTSBURGH 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 X Yes criteria used to award the grants or assistance? 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. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE 25-0969449 501(C)(3) RESEARCH- SUBCONTRACT PITTSBURGH, PA 15213 9,280,473 0 REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1111 FRANKLIN ST 10TH FL - OAKLAND, CA 94607 94-3067788 115 8,654,989 RESEARCH- SUBCONTRACT NEW YORK UNIVERSITY 726 BROADWAY- 9TH FL NEW YORK, NY 10003 13-5562308 501(C)(3) 7,527,121 0 RESEARCH- SUBCONTRACT REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S STATE ST - ANN ARBOR MI 48109 38-6006309 115 4 947 479 RESEARCH- SUBCONTRACT WASHINGTON UNIVERSITY IN ST. LOUIS 7425 FORSYTH WEST CAMPUS 501(C)(3) RESEARCH- SUBCONTRACT CLAYTON, MO 63105 43-0653611 4,546,015 0 UNIVERSITY OF ILLINOIS 506 S WRIGHT ST URBANA, IL 61801 37-6000511 4 165 193 0 RESEARCH- SUBCONTRACT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 320. 36. 3 Enter total number of other organizations listed in the line 1 table

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

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) BRIGHAM AND WOMENS HOSPITAL INC 75 FRANCIS ST BOSTON, MA 02115 04-2312909 501(C)(3) 3,169,951 0 RESEARCH- SUBCONTRACT UNIVERSITY OF SOUTHERN CALIFORNIA 837 W. DOWNEY WAY RM 315 LOS ANGELES, CA 90089 95-1642394 115 3,098,679 0 RESEARCH- SUBCONTRACT JOHNS HOPKINS UNIVERSITY 1101 EAST 33RD ST BALTIMORE, MD 21218 52-0595110 501(C)(3) 2,786,032 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CHICAGO 6054 S DREXEL AVE NO 300 CHICAGO, IL 60637 36-2177139 501(C)(3) 2,588,555 0 RESEARCH- SUBCONTRACT MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST 0 RESEARCH- SUBCONTRACT BOSTON, MA 02114 04-1564655 501(C)(3) 2,459,454 INDIANA UNIVERSITY 400 E 7TH ST RM 501 BLOOMINGTON, IN 47405 35-6001673 RESEARCH- SUBCONTRACT 115 2,351,531 0 BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM - 700 REGENT ST, STE 301 - MADISON, WI 53715 39-1805963 115 2 177 696 0 RESEARCH- SUBCONTRACT UNIVERSITY OF MARYLAND PO BOX 41428 BALTIMORE, MD 21203-6248 52-6002033 115 2,165,082 0 RESEARCH- SUBCONTRACT NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVE BOSTON, MA 02115 04-1679980 501(C)(3) 2,077,552 0 RESEARCH- SUBCONTRACT

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance assistance (book, FMV. appraisal, other) OHIO STATE UNIVERSITY 154 WEST 12TH AVE COLUMBUS, OH 43210 31-6025986 115 2,064,330 0 RESEARCH- SUBCONTRACT UNIVERSITY OF DELAWARE 83 E. MAIN ST. 3RD FL NEWARK, DE 19716 51-6000297 115 1,956,130 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - 104 AIRPORT DR -CHAPEL HILL, NC 27599 56-6001393 115 1,912,077 0 RESEARCH- SUBCONTRACT HARVARD UNIVERSITY 1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA 02138 04-2103580 501(C)(3) 1,777,845 0 RESEARCH- SUBCONTRACT CONSORTIUM FOR PUBLIC EDUCATION 410 9TH ST MCKEESPORT, PA 15132 25-1533592 501(C)(3) 0 RESEARCH- SUBCONTRACT 1,757,631 TRUSTEES OF COLUMBIA UNIVERSITY 615 W 131ST ST NEW YORK, NY 10027 13-5598093 501(C)(3) 1,689,247 RESEARCH- SUBCONTRACT 0 UNIVERSITY OF IOWA 201 GILMORE HALL IOWA CITY, IA 52242 42-6004813 115 1 497 210 0 RESEARCH- SUBCONTRACT TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - P221 FRANKLIN 3451 WALNUT ST - PHILADELPHIA, PA 19104-6205 23-1352685 501(C)(3) 1,457,543 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CINCINNATI 500 UNIVERSITY HALL CINCINNATI, OH 45221 31-6000989 115 1,419,804 0 RESEARCH- SUBCONTRACT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE LEVY PL NEW YORK, NY 10029 13-6171197 501(C)(3) 1,419,063 0 RESEARCH- SUBCONTRACT BROAD INSTITUTE INC 415 MATN ST CAMBRIDGE, MA 02142 26-3428781 501(C)(3) 1,367,131 0 RESEARCH- SUBCONTRACT ALBERT EINSTEIN COLLEGE OF MEDICINE - 500 WEST 185TH ST - NEW YORK, NY 10033 23-7075620 501(C)(3) 1,191,503 0 RESEARCH- SUBCONTRACT VANDERBILT UNIVERSITY MEDICAL CENTER - 2525 WEST END AVE STE 450 - NASHVILLE, TN 37203 35-2528741 501(C)(3) 1,186,352 0 RESEARCH- SUBCONTRACT UNIVERSITY OF MASSACHUSETTS 225 FRANKLIN ST 04-3167352 0 RESEARCH- SUBCONTRACT BOSTON, MA 02110 115 1,147,512 YALE UNIVERSITY 47 COLLEGE ST STE 203 NEW HAVEN, CT 06520 06-0646973 501(C)(3) RESEARCH- SUBCONTRACT 1,132,319 0 MAGEE-WOMENS RESEARCH INSTITUTE AND FOUNDATION - 3339 WARD ST -PITTSBURGH, PA 15213 25-1462312 501(C)(3) 1 090 806 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CALIFORNIA DAVIS 202 COUSTEAU PL STE 185 DAVIS, CA 95617 94-6036494 115 1,090,734 0 RESEARCH- SUBCONTRACT COMMUNITY HUMAN SERVICES CORP 374 LAWN ST PITTSBURGH, PA 15213 25-1219610 501(C)(3) 1,071,461 0 RESEARCH- SUBCONTRACT

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) OHIO STATE UNIVERSITY RESEARCH FOUNDATION - 1960 KENNY RD -COLUMBUS, OH 43210 31-6401599 501(C)(3) 1,047,983 0 RESEARCH- SUBCONTRACT UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER - 7703 FLOYD CURL DR - SAN ANTONIO, TX 78229 74-1586031 115 993,964 0 RESEARCH- SUBCONTRACT MAYO CLINIC ROCHESTER 200 FIRST ST SW ROCHESTER, MN 55905 41-6011702 501(C)(3) 975,145 0 RESEARCH- SUBCONTRACT UNIVERSITY OF TEXAS-MD ANDERSON CANCER CENTER - PO BOX 4930 -HOUSTON, TX 77210-4390 74-6001118 115 943,629 0 RESEARCH- SUBCONTRACT UNIVERSITY OF FLORIDA PO BOX 115500 GAINESVILLE, FL 32611 59-6002052 942,029 0 RESEARCH- SUBCONTRACT 501(C)(3) TEMPLE UNIVERSITY OF THE COMMONWEALTH SYSTEM OF HIGHER EDUCATION - 1805 N BROAD -PHILADELPHIA, PA 19122 23-1365971 501(C)(3) RESEARCH- SUBCONTRACT 863,003 0 THERMAOUIL INC 1020 WALNUT ST PHILADELPHIA, PA 19107 82-3445801 N/A 846 416 0 RESEARCH- SUBCONTRACT CHILDREN'S HOSPITAL OF PHILADELPHIA - 3615 CIVIC CENTER BLVD - PHILADELPHIA, PA 19104 23-1352166 501(C)(3) 844,865 0 RESEARCH- SUBCONTRACT UNIVERSITY OF UTAH 540 ARAPEEN DR. STE 250 SALT LAKE CITY, UT 84108 87-6000525 115 808 808 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE CLEVELAND, OH 44106 34-1018992 501(C)(3) 799,069 0 RESEARCH- SUBCONTRACT EMORY UNIVERSITY 201 DOWAN DR ATLANTA, GA 30322 58-0566256 501(C)(3) 797,141 0 RESEARCH- SUBCONTRACT VERSITI WISCONSIN, INC PO BOX 2178 MILWAUKEE, WI 53201 39-0807235 501(C)(3) 797,114 0 RESEARCH- SUBCONTRACT PENNSYLVANIA STATE UNIVERSITY ONE OLD MAIN UNIVERSITY PARK, PA 16802 24-6000376 115 795,913 0 RESEARCH- SUBCONTRACT BOARD OF TRUSTEES LELAND STANFORD UNIVERSITY - 3145 PORTER DR - PALO RESEARCH- SUBCONTRACT ALTO, CA 94304 94-1156365 501(C)(3) 795,458 0 THE FRED HUTCHINSON CANCER RESEARCH CENTER - 1100 FAIRVIEW AVE NORTH - SEATTLE, WA 98109 501(C)(3) RESEARCH- SUBCONTRACT 23-7156071 777,766 0 WEST VIRGINIA UNIVERSITY RESEARCH CORP - PO BOX 6005 - MORGANTOWN WV 26506 55-0665758 115 775 257 0 RESEARCH- SUBCONTRACT RUSH UNIVERSITY MEDICAL CENTER 1700 W VAN BUREN RM 150 CHICAGO, IL 60612 36-2174823 501(C)(3) 754,241 0 RESEARCH- SUBCONTRACT HENRY M JACKSON FOUNDATION 6720 ROCKLEDGE DR STE A BETHESDA, MD 20817 52-1317896 501(C)(3) 724,284 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) DUKE UNIVERSITY 324 BLACKWELL ST DURHAM, NC 27708 56-0532129 501(C)(3) 713,292 0 RESEARCH- SUBCONTRACT DANA-FARBER CANCER INSTITUTE 44 BINNER ST STE BP600 BOSTON, MA 02115 04-2263040 501(C)(3) 712.884 0 RESEARCH- SUBCONTRACT SCRIPPS RESEARCH INSTITUTE 10550 N TORREY PINES RD LA JOLLA, CA 92037 33-0435954 501(C)(3) 701,400 0 RESEARCH- SUBCONTRACT UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION - 301 PETERSON SERVICE BUILDING - LEXINGTON, KY 40506 61-6033693 501(C)(3) 683,355 0 RESEARCH- SUBCONTRACT RESEARCH FOUNDATION FOR MENTAL HYGIENE - 150 BROADWAY NO 301 -RESEARCH- SUBCONTRACT MENANDS, NY 12204 14-1410842 501(C)(3) 654,725 0 UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GTLMAN DR SAN DIEGO, CA 92093 95-6006144 RESEARCH- SUBCONTRACT 115 651,917 0 BOSTON UNIVERSITY 595 COMMONWEALTH AVE STE 700 BOSTON MA 02215 04-2103547 501(C)(3) 647,429 0 RESEARCH- SUBCONTRACT WEILL MEDICAL COLLEGE 1300 YORK AVE NEW YORK, NY 10021 13-1623978 501(C)(3) 637,335, 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NEBRASKA MEDICAL CENTER - 987835 NEBRASKA MEDICAL CENTER - OMAHA, NE 68198 47-0771713 115 625 294 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) KUMC RESEARCH INSTITUTE INC 300 EXECUTIVE DR STE 150 WEST ORANGE, NJ 07052 48-1108830 501(C)(3) 604,070 0 RESEARCH- SUBCONTRACT UNIVERSITY OF WASHINGTON GERBERDING HALL G80 SEATTLE, WA 98195 91-6001537 115 598,945 0 RESEARCH- SUBCONTRACT WILLIAM MARSH RICE UNIVERSITY 6100 MAIN ST HOUSTON, TX 77005 74-1109620 501(C)(3) 586,130 0 RESEARCH- SUBCONTRACT AMIDA TECHNOLOGY SOLUTIONS INC 1640 RHODE ISLAND AVE. NW SE 650 WASHINGTON, DC 20036 46-2882019 562,500 0 RESEARCH- SUBCONTRACT N/A UNIVERSITY OF ROCHESTER PO BOX 278893 16-0743209 RESEARCH- SUBCONTRACT ROCHESTER, NY 14627 115 553,707 0 TURTLE CREEK VALLEY MH/MR INC 723 BRADDOCK AVE BRADDOCK, PA 15104 25-1250510 501(C)(3) RESEARCH- SUBCONTRACT 538,162 0 UNIVERSITY OF ALABAMA AT BIRMINGHAM - 1530 3RD AVE -BIRMINGHAM, AL 35294 63-6005396 115 537,350 0 RESEARCH- SUBCONTRACT MED-ALLY LLC PO BOX 975 GOOSE CREEK, SC 29445 45-4662780 N/A 531,096 0 RESEARCH- SUBCONTRACT JACKSON LABORATORY PO BOX 254 BAR HARBOR, ME 04609 01-0211513 501(C)(3) 518,108 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY - 65 DAVIDSON RD- RM 317 - PISCATAWAY, NJ 08854 22-6001086 115 517,278 0 RESEARCH- SUBCONTRACT CITY OF HOPE 1500 E DUARTE RD DUARTE, CA 91010 95-3435919 501(C)(3) 510,109 0 RESEARCH- SUBCONTRACT OREGON HEALTH & SCIENCE UNIVERSITY FOUNDATION - 1121 SW SALMON ST -PORTLAND, OR 97205 23-7083114 501(C)(3) 498,723 0 RESEARCH- SUBCONTRACT UNIVERSITY OF ARIZONA 888 N EUCLID AVE TUCSON, AZ 85722-3607 74-2652689 115 495,648 0 RESEARCH- SUBCONTRACT HEALTH FEDERATION OF PHILADELPHIA 1211 CHESTNUT ST STE 801 PHILADELPHIA, PA 19107 RESEARCH- SUBCONTRACT 23-2244355 501(C)(3) 468,620 0 UNIVERSITY OF MISSOURI COLUMBIA 15 JESSE HALL COLUMBIA, MO 65211 43-6003859 RESEARCH- SUBCONTRACT 115 462,228 0 NEW YORK GENOME CENTER INC 101 AVENUE OF THE AMERICAS NEW YORK, NY 10013 80-0631734 501(C)(3) 457,969 0 RESEARCH- SUBCONTRACT CARNEGIE FOUNDATION FOR THE ADVANCEMENT OF TEACHING - 51 VISTA LN - STANFORD, CA 94305 13-1623924 501(C)(3) 457,435, 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CALIFORNIA SAN FRANCISCO - 220 MONTGOMERY ST. 5TH FL - SAN FRANCISCO, CA 94104 94-6036493 115 454,745 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant noncash organization or government if applicable cash grant valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) UNIVERSITY OF COLORADO 1800 N GRANT ST DENVER, CO 80203 84-6000555 115 441,292 0 RESEARCH- SUBCONTRACT REGENTS OF THE UNIVERSITY OF MINNESOTA - 2221 UNIVERSITY AVE SE - MINNEAPOLIS, MN 55414 41-6007513 115 440,296 0 RESEARCH- SUBCONTRACT UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION - 2215 S BROOK ST -LOUISVILLE, KY 40208 61-1029626 501(C)(3) 423,438 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER - 3500 CAMP BOWIE BLVD - FORT WORTH, TX 76107 71-0986983 419,745 0 RESEARCH- SUBCONTRACT 1115 FOCUS ON RENEWAL 701 CHARTIERS AVE MCKEES ROCKS, PA 15136 RESEARCH- SUBCONTRACT 23-7181440 501(C)(3) 413,071 0 INOVA HEALTH CARE SERVICES 2832 JUNIPER ST STE 104 FAIRFAX, VA 22031 54-0620889 RESEARCH- SUBCONTRACT 501(C)(3) 407,763 0 BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA NO T100 HOUSTON, TX 77030 74-1613878 501(C)(3) 400 299 0 RESEARCH- SUBCONTRACT WEST VIRGINIA UNIVERSITY PO BOX 6005 MORGANTOWN, WV 26506 55-6000842 501(C)(3) 389,170 0 RESEARCH- SUBCONTRACT MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVE NE 49-3131 - CAMBRIDGE, MA 02139 04-2103594 501(C)(3) 376 891 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) VIRGINIA COMMONWEALTH UNIVERSITY 800 EAST LEHIGH ST RICHMOND, VA 23219 54-6001758 115 374,083 0 RESEARCH- SUBCONTRACT NORTHWESTERN UNIVERSITY 619 CLARK ST RM 217 EVANSTON, IL 60208 36-2167817 501(C)(3) 363,707 0 RESEARCH- SUBCONTRACT GEORGETOWN UNIVERSITY 37TH O ST NW STE 400 WASHINGTON, DC 20057 53-0196603 501(C)(3) 363,164 0 RESEARCH- SUBCONTRACT WAKE FOREST UNIVERSITY 1834 WAKE FOREST RD WINSTON-SALEM, NC 27106 56-0532138 501(C)(3) 361,222 0 RESEARCH- SUBCONTRACT ARIZONA STATE UNIVERSITY BOX 873503 86-0196696 0 RESEARCH- SUBCONTRACT TEMPE, AZ 85287 115 359,174 HOWARD UNIVERSITY 576 W ST NW WASHINGTON, DC 20059 53-0204707 501(C)(3) RESEARCH- SUBCONTRACT 354,041 0 CHILDRENS RESEARCH INSTITUTE 700 CHILDRENS DR COLUMBUS, OH 43205 31-4379441 501(C)(3) 351 665 0 RESEARCH- SUBCONTRACT MAYO CLINIC ARIZONA 200 FIRST ST SW ROCHESTER, MN 55905 86-0800150 501(C)(3) 349,629 0 RESEARCH- SUBCONTRACT VITALANT PO BOX 1867 SCOTTSDALE, AZ 85252 86-0098929 501(C)(3) 345,253 0 RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) VANDERBILT UNIVERSITY VU STATION B BOX 356310 NASHVILLE, TN 37235 62-0476822 501(C)(3) 333,269 0 RESEARCH- SUBCONTRACT UNIVERSITY OF MIAMI PO BOX 248106 CORAL GABLES, FL 33124 59-0624458 115 329,234 0 RESEARCH- SUBCONTRACT GLOBAL COALITION FOR ADAPTIVE RESEARCH INC - PO BOX 49272 - LOS ANGELES, CA 90049 82-1199380 501(C)(3) 320,401 0 RESEARCH- SUBCONTRACT THOMAS JEFFERSON UNIVERSITY 1101 MARKET ST PHILADELPHIA, PA 19107 23-1352651 115 317,101 0 RESEARCH- SUBCONTRACT UNIVERSITY OF VIRGINIA BOX 4001953 54-6001786 RESEARCH- SUBCONTRACT CHARLOTTESVILLE, VA 22904 115 316,897 0 THE MIRIAM HOSPITAL 164 SUMMIT AVE PROVIDENCE, RI 02906 05-0258905 501(C)(3) 315,230 RESEARCH- SUBCONTRACT 0 CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE 34-0966056 CLEVELAND, OH 44115 115 303 496 0 RESEARCH- SUBCONTRACT EAST CAROLINA UNIVERSITY 209 E 5TH ST GREENVILLE, NC 27858 56-6000403 115 299,689 0 RESEARCH- SUBCONTRACT TRUSTEES OF PRINCETON UNIVERSITY WASHINGTON ROAD PRINCETON, NJ 08544 21-0634501 501(C)(3) 293,700 0 RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) HEKTOEN INSTITUTE FOR MEDICAL RESEARCH - 1339 S WOOD ST NO G -CHICAGO, IL 60608 36-2244897 501(C)(3) 291,741 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NEBRASKA-LINCOLN 1400 R ST LINCOLN, NE 68588 47-0491233 115 286,767 0 RESEARCH- SUBCONTRACT GE GLOBAL OPERATIONS 3135 EASTON TURNPIKE FAIRFIELD, CT 06828 14-0689340 N/A 282,075 0 RESEARCH- SUBCONTRACT UNIVERSITY OF MISSISSIPPI MEDICAL CENTER - 2500 N STATE ST -JACKSON, MS 39216 64-6008520 115 280,158 0 RESEARCH- SUBCONTRACT VETERANS RESEARCH FOUNDATION OF PITTSBURGH - 7180 HIGHLAND DR -25-1666090 RESEARCH- SUBCONTRACT PITTSBURGH, PA 15206 501(C)(3) 264,987 0 WESTERN INSTITUTE FOR BIOMEDICAL RESEARCH - PO BOX 58719 - SALT LAKE CITY, UT 84158 87-0470748 501(C)(3) RESEARCH- SUBCONTRACT 261,971 0 TIES TEACHING INSTITUTE FOR EXCELLENCE IN STEM LLC - PO BOX 18050 - CLEVELAND HEIGHTS, OH 44118 33-1014138 N/A 257 257 0 RESEARCH- SUBCONTRACT RESEARCH FOUNDATION FOR STATE UNIVERSITY OF NEW YORK - PO BOX 9 - ALBANY, NY 12201 14-1368361 501(C)(3) 255,572 0 RESEARCH- SUBCONTRACT UNIVERSITY OF VERMONT 850 SO PROSPECT ST RM 333 BURLINGTON, VT 05405 03-0179440 115 253,949 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) COMMUNITY HEALTH AND SOCIAL SERVICES CENTER INC - 5635 W FORT ST - DETROIT, MI 48209 38-3094394 501(C)(3) 253,846 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NEVADA, RENO 2601 ENTERPRISE RD RENO, NV 89512 88-6000024 115 252,593 0 RESEARCH- SUBCONTRACT GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR FAIRFAX, VA 22030 54-0836354 115 243,469 0 RESEARCH- SUBCONTRACT NORTH CAROLINA STATE UNIVERSITY CAMPUS BOX 7214 RALEIGH, NC 27695 56-6000756 115 238,301 0 RESEARCH- SUBCONTRACT GEISINGER CLINIC N ACADEMY AVE RESEARCH- SUBCONTRACT DANVILLE, PA 17822 23-6291113 501(C)(3) 237,219 0 UPMC CENTER FOR HIGH-VALUE HEALTHCARE - 600 GRANT ST FL 56 -PITTSBURGH, PA 15219 45-2178782 501(C)(3) RESEARCH- SUBCONTRACT 235,010 0 CHRISTIANA CARE HEALTH SERVICES PO BOX 2653 WILMINGTON, DE 19805 51-0103684 501(C)(3) 232 586 0 RESEARCH- SUBCONTRACT UNIVERSITY OF KANSAS CENTER FOR RESEARCH INC - 2385 IRVING HILL RD - LAWRENCE, KS 66045 48-0680117 501(C)(3) 229,971 0 RESEARCH- SUBCONTRACT UNIVERSITY OF TENNESSEE 201 ANDY HOLT TOWER KNOXVILLE, TN 37996 62-6001636 115 225,426 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON - 7000 FANNIN ST - HOUSTON, TX 75303 74-1761309 115 190,807 0 RESEARCH- SUBCONTRACT AKRON CHILDRENS HOSPITAL 6505 MARKET ST YOUNGSTOWN, OH 44512 34-0714357 501(C)(3) 188,614 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NOTRE DAME DU LAC 724 GRACE HALL NOTRE DAME, IN 46556 35-0868188 501(C)(3) 186,271 0 RESEARCH- SUBCONTRACT ALLEGHENY-SINGER RESEARCH INSTITUTE - TWO ALLEGHENY CENTER PITTSBURGH, PA 15212 25-1320493 501(C)(3) 180,626 0 RESEARCH- SUBCONTRACT NRECA RESEARCH 4301 WILSON BLVD ARLINGTON, VA 22203 RESEARCH- SUBCONTRACT 84-2724646 501(C)(3) 180,407 0 CINCINNATI CHILDRENS HOSPITAL MEDICAL CENTER - 3333 BURNET 501(C)(3) AVENUE - CINCINNATI, OH 45229 RESEARCH- SUBCONTRACT 31-0833936 175,165 0 CURADA BIO INC 45 TANAGER ST ARLINGTON, MA 02476 88-0712517 N/A 174,741 0 RESEARCH- SUBCONTRACT GEORGIA TECH RESEARCH CORP 550 TENTH ST NW ATLANTA, GA 30332 58-0603146 501(C)(3) 172,016 0 RESEARCH- SUBCONTRACT MOREHOUSE SCHOOL OF MEDICINE INC 720 WESTVIEW DR SW ATLANTA, GA 30301 58-1438873 501(C)(3) 171,064 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) US NAVAL ACADEMY 1 121 BLAKE RD ANNAPOLIS, MD 21402 52-1261462 115 66,794 0 RESEARCH- SUBCONTRACT INSIGHT POLICY RESEARCH INC. 1901 N MOORE ST ARLINGTON, VA 22209 52-2300796 N/A 63,304 0 RESEARCH- SUBCONTRACT UNIVERSITY OF MISSISSIPPI 306 KINARD UNIVERSITY MS 38677 64-6001159 501(C)(3) 62,369 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CALIFORNIA IRVINE 120 THEORY STE 200 IRVINE, CA 92617 95-2226406 115 61,522 0 RESEARCH- SUBCONTRACT ALLEGHENY COUNTY TREASURER 436 GRANT ST PITTSBURGH, PA 15219 115 0 RESEARCH- SUBCONTRACT 61,339 DUQUESNE UNIVERSITY OF THE HOLY SPIRIT - 600 FORBES AVE -PITTSBURGH, PA 15219 25-1035663 501(C)(3) RESEARCH- SUBCONTRACT 60,968 0 CHILDREN'S HOSPITAL OF PITTSBURGH OF UPMC - 600 GRANT ST FL 58 -PITTSBURGH, PA 15219 25-0402510 501(C)(3) 60 175 0 RESEARCH- SUBCONTRACT RESEARCH TRIANGLE INSTITUTE PO BOX 12194 RESEARCH TRIANGLE PARK, NC 27709 56-0686338 501(C)(3) 57,976 0 RESEARCH- SUBCONTRACT URBANKIND INSTITUTE 5 ESTHER ST. PITTSBURGH, PA 15227 N/A 57,381 0 RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ALBERT EINSTEIN HEALTHCARE NETWORK 5501 OLD YORK RD PHILADELPHIA, PA 19141 23-2290323 501(C)(3) 55,734 0 RESEARCH- SUBCONTRACT SICKLE CELL 101 25 RIO ROBIES SAN JOSE, CA 95134 46-4141467 501(C)(3) 54,501 0 RESEARCH- SUBCONTRACT DIGITAL PROMISE GLOBAL 1929 E WASHINGTON ST NEW CASTLE, PA 16101 46-5460594 501(C)(3) 53,203 0 RESEARCH- SUBCONTRACT BUCK INSTITUTE FOR RESEARCH ON AGING - 8001 REDWOOD BLVD. -NOVATO, CA 94945 94-3030609 501(C)(3) 52,239 0 RESEARCH- SUBCONTRACT USDA 1400 INDEPENDENCE AVE SW WASHINGTON, DC 20250 72-0564834 RESEARCH- SUBCONTRACT 115 51,592 0 METROHEALTH SYSTEM 2500 METROHEALTH DRIVE CLEVELAND, OH 44109 34-6004382 RESEARCH- SUBCONTRACT 115 50,000 0 RHODE ISLAND COLLEGE 600 MT PLEASANT AVE PROVIDENCE, RI 02908 05-6016315 115 49 683 0 RESEARCH- SUBCONTRACT CATHOLIC UNIVERSITY OF AMERICA 620 MICHIGAN AVE NE WASHINGTON, DC 20064 53-0196583 501(C)(3) 49,405 0 RESEARCH- SUBCONTRACT THE GENEVA FOUNDATION 917 PACIFIC AVE TAACOMA, WA 98402 91-1593913 501(C)(3) 49,128, 0 RESEARCH- SUBCONTRACT

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Schedule I (Form 990)

Schedule I (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV. assistance appraisal, other) UNIVERSITY OF CALIFORNIA SANTA BARBARA - 3201 SAASB BUILDING -SANTA BARBARA, CA 93106 95-6006145 115 34,512 0 RESEARCH- SUBCONTRACT RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK - 230 WEST 41ST ST - NEW YORK, NY 10036 13-1988190 501(C)(3) 34,075 0 RESEARCH- SUBCONTRACT TEXAS A&M RESEARCH FOUNDATION 400 HARVEY MITCHELL PKWY S NO 300 COLLEGE STATION, TX 77845 74-1238434 115 33,164 0 RESEARCH- SUBCONTRACT URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD ST PITTSBURGH, PA 15222 25-0965592 501(C)(3) 32,945 0 RESEARCH- SUBCONTRACT MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK RD MILWAUKEE, WI 53226 39-0806261 RESEARCH- SUBCONTRACT 501(C)(3) 32,670 0 HARVARD EYE ASSOCIATES 23961 CALLE DE LA MAGDALENA LAGUNA HILLS, CA 92653 95-3873981 RESEARCH- SUBCONTRACT N/A 32,556 0 MASSACHUSETTS EYE AND EAR INFIRMARY - 399 REVOLUTION DR -SOMERVILLE MA 02145 04-2103591 501(C)(3) 31 873 0 RESEARCH- SUBCONTRACT LOS ALAMOS NATIONAL LABORATORY 1112 PLAZA DEL NORTE ESPANOLA, NM 87532 74-2853972 501(C)(3) 31,658 0 RESEARCH- SUBCONTRACT ROBERT MORRIS UNIVERSITY 6001 UNIVERSITY BLVD MOON TOWNSHIP, PA 15108 25-1120678 501(C)(3) 31,542 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant noncash organization or government if applicable cash grant valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) MEHARRY MEDICAL COLLEGE 1005 DR D B TODD JR BLVD NASHVILLE, TN 37208 62-0488046 501(C)(3) 30,659 0 RESEARCH- SUBCONTRACT LEGACY EMANUEL MEDICAL CENTER 2801 N GANTENBEIN AVE PORTLAND, OR 97227 93-0386823 501(C)(3) 30,392 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CONNECTICUT HEALTH CENTER - 263 FARMINGTON AVE -FARMINGTON, CT 06030 52-1725543 115 30,262 0 RESEARCH- SUBCONTRACT NEW YORK CITY HEALTH AND HOSPITALS CORPORATION - 40 SUNSHINE COTTAGE RD - VALHALLA, NY 10595 13-1099420 501(C)(3) 30,000 0 RESEARCH- SUBCONTRACT NORTH DAKOTA STATE UNIVERSITY P.O. BOX 6050 FARGO, ND 58108 45-6002439 RESEARCH- SUBCONTRACT 115 30,000 0 HEALTHPARTNERS INSTITUTE PO BOX 1309 MINNEAPOLIS, MN 55440 41-1670163 501(C)(3) RESEARCH- SUBCONTRACT 29,958 0 PALO ALTO VETERANS INSTITUTE FOR RESEARCH - 3801 MIRANDA AVE - PALO ALTO CA 94304 77-0207331 501(C)(3) 29 544 0 RESEARCH- SUBCONTRACT RAND CORPORATION 1776 MAIN ST SANTA MONICA, CA 90407 95-1958142 N/A 28,728 0 RESEARCH- SUBCONTRACT ALLEGHENY COUNTY HEALTH DEPARTMENT 542 FOURTH AVE PITTSBURGH, PA 15219 115 28,544 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) SUNRISE COMMUNITY COUNSELING CENTER - 537 S ALVARADO ST - LOS ANGELES, CA 90057 95-3128532 501(C)(3) 28,301 0 RESEARCH- SUBCONTRACT GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION - 58 EDGEWOOD AVE 3RD FL - ATLANTA, GA 30303 58-1845423 501(C)(3) 26,207 0 RESEARCH- SUBCONTRACT ICAN TALK CLINIC 1100 WASHINGTON AVE CARNEGIE, PA 15106 27-2398365 501(C)(3) 26,195 0 RESEARCH- SUBCONTRACT ATTUNE HEALTH RESEARCH INC 8750 WILSHIRE BLVD SUITE 350 BEVERLY HILLS, CA 90211 82-1842765 25,674 0 RESEARCH- SUBCONTRACT N/A VAN ANDEL RESEARCH INSTITUTE 333 BOSTWICK AVE NE GRAND RAPIDS, MI 49503 52-2000823 RESEARCH- SUBCONTRACT 501(C)(3) 25,145 0 HEALTHY START INC 400 N LEXINGTON AVE 25-1691864 PITTSBURGH, PA 15208 501(C)(3) RESEARCH- SUBCONTRACT 25,000 0 ADVENTIST HEALTH SYSTEM-SUNBELT INC - 601 E ROLLINS ST - ORLANDO 59-0724459 FL 32803 501(C)(3) 24 636 0 RESEARCH- SUBCONTRACT ARISTOSYS LLC 208 FOX RUN DR VENETIA, PA 15367 82-0893712 N/A 23,586 0 RESEARCH- SUBCONTRACT SPOKANE EYE CLINICAL RESEARCH 427 S BERNARD ST SPOKANE, WA 99204 45-2887234 22,633 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ACADEMYHEALTH 1666 K ST NW STE 1100 WASHINGTON, DC 20006 52-1260918 501(C)(3) 22,592 0 RESEARCH- SUBCONTRACT UNIVERSITY OF HAWAII 1408 LOWER CAMPUS RD HONOLULU, HI 96822 99-6000354 115 22,151 0 RESEARCH- SUBCONTRACT CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD LOS ANGELES, CA 90048 95-1644600 501(C)(3) 21,756 0 RESEARCH- SUBCONTRACT DONALD GUTHRIE FOUNDATION 1 GUTHRIE SQ SAYRE, PA 18840 24-6022957 501(C)(3) 21,000 0 RESEARCH- SUBCONTRACT ROWAN UNIVERSITY 201 MULLICA HILL RD GLASSBORO, NJ 08028 22-2764819 RESEARCH- SUBCONTRACT 115 20,890 0 UNIVERSITY OF CALIFORNIA SANTA CRUZ - 1156 HIGH ST - SANTA CRUZ CA 95064 94-1539563 RESEARCH- SUBCONTRACT 115 20,569 0 BOISE STATE UNIVERSITY 1910 UNIVERSITY DRIVE BOISE, ID 83725-1135 82-0290701 115 20 081 0 RESEARCH- SUBCONTRACT WESTED 730 HARRISON ST SAN FRANCISCO, CA 94107 94-3233542 115 20,003 0 RESEARCH- SUBCONTRACT SOUTHERN UNIVERSITY LAW CENTER 3050 DR. MARTIN LUTHER KING, JR. D SHREVEPORT, LA 71106 72-6000817 115 20,000 RESEARCH- SUBCONTRACT 0

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Schedule I (Form 990)

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) THE COOPER HEALTH SYSTEM 1 FEDERAL ST CAMDEN, NJ 08103 21-0634462 501(C)(3) 20,000 0 RESEARCH- SUBCONTRACT ST LOUIS UNIVERSITY ONE NORTH GRAND BLVD ST LOUIS, MO 63103 43-0654872 501(C)(3) 20,000 0 RESEARCH- SUBCONTRACT COREPOWER MAGNETICS INC 1435 BEDFORD AVE PITTSBURGH, PA 15219 85-2354132 N/A 19,998 0 RESEARCH- SUBCONTRACT OPHTHALMOLOGY ASSOCIATES PO BOX 911791 75-2664866 19,844 0 RESEARCH- SUBCONTRACT DALLAS, TX 75391 N/A RESEARCH INSTITUTE AT NATIONWIDE CHILDREN'S HOSPITAL - PO BOX RESEARCH- SUBCONTRACT 715245 - COLUMBUS, OH 43271 31-6056230 501(C)(3) 19,445 0 UNIVERSITY OF MAINE SYSTEM 16 MAIN ST BANGOR, ME 04401 01-6000769 RESEARCH- SUBCONTRACT 115 19,309 0 ASSOCIATION OF AMERICAN MEDICAL COLLEGES - 655 K ST NW STE 100 -WASHINGTON, DC 20001 36-2169124 501(C)(3) 18 263 0 RESEARCH- SUBCONTRACT PLANETARY SCIENCE INSTITUTE 1700 E FT LOWELL RD TUCSON, AZ 85719 33-0175263 501(C)(3) 18,112, 0 RESEARCH- SUBCONTRACT ST JOSEPH'S HOSPITAL AND MEDICAL CENTER - 350 W THOMAS RD -PHOENIX, AZ 85013 72-1561134 501(C)(3) 17,657 0 RESEARCH- SUBCONTRACT

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) THE FORUM FOR YOUTH INVESTMENT 7064 EASTERN AVE NW WASHINGTON, DC 20012 52-2242472 501(C)(3) 17,272 0 RESEARCH- SUBCONTRACT PPD DEVELOPMENT LP 26361 NETWORK PLACE CHICAGO, IL 60693-1263 74-2325267 N/A 16,297 0 RESEARCH- SUBCONTRACT HEALTH RESEARCH INC 150 BROADWAY MENANDS, NY 12204 14-1402155 501(C)(3) 16,265 0 RESEARCH- SUBCONTRACT CLEVELAND CLINIC PO BOX 931517 CLEVELAND, OH 44193 34-0714585 501(C)(3) 16,099 0 RESEARCH- SUBCONTRACT COLLEGE OF NEW JERSEY 1872 PENNINGTON RD EWING TOWNSHIP, NJ 08618 22-2797398 0 RESEARCH- SUBCONTRACT 115 16,011 KEAN UNIVERSITY 1000 MORRIS AVE UNION, NJ 07083 22-2960726 RESEARCH- SUBCONTRACT 115 15,513 0 UNIVERSITY OF CONNECTICUT 438 WHITNEY RD EXT STORRS CT 06269 06-0772160 115 15 488 0 RESEARCH- SUBCONTRACT CENTER OF LIFE 161 HAZELWOOD AVE PITTSBURGH, PA 15207 01-0617023 501(C)(3) 15,000 0 RESEARCH- SUBCONTRACT NEIGHBORHOOD LEGAL SERVICES ASSOCIATION - 928 PENN AVE -PITTSBURGH, PA 15222 25-1157129 501(C)(3) 15,000 0 RESEARCH- SUBCONTRACT

Schedule I (Form 990)

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) SOUTHWESTERN PENNSYLVANIA LEGAL SERVICES INC - 10 W CHERRY AVE -WASHINGTON, PA 15301 25-1192139 501(C)(3) 15,000 0 RESEARCH- SUBCONTRACT ZYLO THERAPEUTICS INC 105A BEN HAMBY DR. GREENVILLE, SC 29615 83-3038824 N/A 14,996 0 RESEARCH- SUBCONTRACT UNIVERSITY OF TEXAS AT EL PASO 500 W UNIVERSITY AVE EL PASO, TX 79968 74-6000813 115 14,928 0 RESEARCH- SUBCONTRACT WILLS EYE HOSPITAL 840 WALNUT ST PHILADELPHIA, PA 19107 23-6000204 501(C)(3) 13,947 0 RESEARCH- SUBCONTRACT STEADMAN PHILIPPON RESEARCH INSTITUTE - 181 WEST MEADOW DR -88-0245022 RESEARCH- SUBCONTRACT VAIL, CO 81657 501(C)(3) 13,517 0 MGH INSTITUTE OF HEALTH PROFESSIONS INC - 36 1ST AVE -04-2868893 RESEARCH- SUBCONTRACT BOSTON, MA 02129 501(C)(3) 13,279 0 NATIONAL JEWISH HEALTH 1400 JACKSON ST DENVER CO 80206 74-2044647 501(C)(3) 13 009 0 RESEARCH- SUBCONTRACT GEORGE WASHINGTON UNIVERSITY 45155 RESEARCH PL 260 ASHBURN, VA 20147 53-0196584 501(C)(3) 12,801 0 RESEARCH- SUBCONTRACT EMMA PENDLETON BRADLEY HOSPITAL 1011 VETERANS MEMORIAL PKWY RIVERSIDE, RI 02915 05-0258806 501(C)(3) 12,628 RESEARCH- SUBCONTRACT 0

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ART OF DEMOCRACY LLC 51 ROYCROFT AVE PITTSBURGH, PA 15288 81-0775443 12,150 0 RESEARCH- SUBCONTRACT N/A US GEOLOGICAL SURVEY USGS 12201 SUNRISE VALLEY DR RESTON, VA 20192 53-0196958 115 11,668 0 RESEARCH- SUBCONTRACT FASTWATT LLC 6 BRASSFIELD CT CLIFTON PARK, NY 12065 N/A 11,545 0 RESEARCH- SUBCONTRACT ARRHYTHMIA RESEARCH GROUP LLC 114 E OAK AVE. JONESBORO, AK 72401 83-3328484 10,580 0 RESEARCH- SUBCONTRACT N/A PINNACLE HEALTH CARDIOVASCULAR INSTITUTE INC - 409 S SECOND ST -HARRISBURG, PA 17104 32-0321362 0 RESEARCH- SUBCONTRACT N/A 10,380 UNIVERSITY OF TEXAS AT ARLINGTON BOX 19198 701 S NEDDERMAN DR ARLINGTON, TX 76019 75-6000121 RESEARCH- SUBCONTRACT 115 10,202 0 SWARTHMORE COLLEGE 500 COLLEGE AVE SWARTHMORE, PA 19081 23-1352683 501(C)(3) 10 131 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CALIFORNIA BERKELEY 1608 FOURTH ST BERKELEY, CA 94710 94-6002123 115 10,004 0 RESEARCH- SUBCONTRACT CITY OF STEUBENVILLE 3900 SUNSET BLVD. STEUBENVILLE, OH 43952 34-6002729 115 10,000 0 RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) HAZELWOOD INITIATIVE INC 4901 2ND AVE PITTSBURGH, PA 15207 25-1825591 501(C)(3) 10,000 0 RESEARCH- SUBCONTRACT TEMS JOINT AMBULANCE DISTRICT 201 S 4TH ST TORONTO, OH 43964 76-0712710 115 10,000 0 RESEARCH- SUBCONTRACT VILLAGE OF MINGO JUNCTION 501 COMMERCIAL STREET MINGO JUNCTION, OH 43938 34-6001908 115 10,000 0 RESEARCH- SUBCONTRACT WINTERSVILLE VOL FIRE DEPT INC PO BOX 2448 WINTERSVILLE, OH 43953 51-0172600 501(C)(3) 10,000 0 RESEARCH- SUBCONTRACT SEATTLE INSTITUTE FOR BIOMEDICAL AND CLINICAL RESEARCH - 1660 SOUTH COLUMBIAN WAY - SEATTLE, WA 98108 RESEARCH- SUBCONTRACT 91-1452438 501(C)(3) 9,800 0 COLORADO SCHOOL OF MINES 1500 ILLINOIS ST GOLDEN, CO 80401 84-6000551 RESEARCH- SUBCONTRACT 115 9,598 0 UNIVERSITY OF ALASKA 3211 PROVIDENCE DR ANCHORAGE, AK 99508 92-6000147 115 9 000 0 RESEARCH- SUBCONTRACT UNIVERSITY MEDICAL CENTER INC 530 S JACKSON ST 501(C)(3) LOUISVILLE, KY 40202 61-1293786 8,990 0 RESEARCH- SUBCONTRACT JULIE FRANTSVE-HAWLEY CONSULTING LLC - 621 BRIER ST - KENILWORTH, IL 60043 8,742 0 RESEARCH- SUBCONTRACT N/A

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) SPARROW CLINICAL RESEARCH INSTITUTE - 1200 E MICHIGAN AVE -LANSING, MI 48912 38-3075242 501(C)(3) 8,309 0 RESEARCH- SUBCONTRACT OKLAHOMA STATE UNIVERSITY P.O. BOX 645 STILLWATER, OK 74076 73-1383996 115 7,814 0 RESEARCH- SUBCONTRACT LOUISIANA STATE UNIVERSITY 204 THOMAS BOYD HALL BATON ROUGE, LA 70803 72-6000848 115 7,300 0 RESEARCH- SUBCONTRACT HENRY FORD HEALTH SYSTEM 1 FORD PL DETROIT, MI 48202 38-1357020 501(C)(3) 7,072 0 RESEARCH- SUBCONTRACT WASHINGTON STATE UNIVERSITY PO BOX 641024 91-6001108 RESEARCH- SUBCONTRACT PULLMAN, WA 99164 115 6,581 0 WHITWORTH UNIVERSITY 300 W HAWTHORNE ROAD 91-0473310 SPOKANE, WA 99251 501(C)(3) RESEARCH- SUBCONTRACT 6,229 0 RHODE ISLAND HOSPITAL 593 EDDY ST PROVIDENCE, RI 02903 05-0258954 501(C)(3) 6 065 0 RESEARCH- SUBCONTRACT METIS FOUNDATION 300 CONVENT ST STE 1330 SAN ANTONIO, TX 78205 47-2219464 501(C)(3) 5,134 0 RESEARCH- SUBCONTRACT BRIGHAM YOUNG UNIVERSITY PO BOX 21128 PROVO, UT 84602 87-0217280 501(C)(3) 5,100. 0 RESEARCH- SUBCONTRACT

UNIVERSITY OF PITTSBURGH 25-0965591 Schedule I (Form 990)

Page 1 Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT - 425 SIXTH AVE -PITTSBURGH, PA 15219 25-0965213 501(C)(3) 100,000 0 SPONSORSHIP OAKLAND BUSINESS IMPROVEMENT DISTRICT - 235 ATWOOD ST -PITTSBURGH, PA 15213 25-1833743 N/A 100,000 0 SPONSORSHIP AMERICAN HEART ASSOCIATION 7777 PENN CENTER BLVD PITTSBURGH, PA 15235 13-5613797 501(C)(3) 53,090 0 SPONSORSHIP CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE PITTSBURGH, PA 15213 25-0969449 501(C)(3) 50,000 0 SPONSORSHIP PITTSBURGH BUSINESS TIMES 45 S 23RD STREET 43-1366184 0 SPONSORSHIP PITTSBURGH, PA 15219 N/A 42,500 ALBERT SCHWEITZER FELLOWSHIP PITTSBURGH - 5614 ELGIN ST -46-3414778 PITTSBURGH, PA 15206 501(C)(3) SPONSORSHIP 40,000 0 CAVE CANEM 20 JAY ST 13-3932909 BROOKLYN, NY 11201 501(C)(3) 40 000 0 SPONSORSHIP IRELAND FUNDS AMERICA 10 POST OFFICE SQUARE N950 BOSTON, MA 02109 25-1306992 501(C)(3) 25,000 0 SPONSORSHIP PITTSBURGH PROMISE 1901 CENTRE AVENUE PITTSBURGH, PA 15219 26-1982661 501(C)(3) 25,000 0 SPONSORSHIP

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) RUSH TO CRUSH CANCER 600 GRANT STREET 58TH FL CORP TAX PITTSBURGH, PA 15219 87-4771624 501(C)(3) 24,746 0 SPONSORSHIP CHILDREN'S HOSPITAL OF PITTSBURGH 600 GRANT STREET 58TH FL CORP TAX PITTSBURGH, PA 15219 25-0402510 501(C)(3) 20,951 0 SPONSORSHIP AMERICAN ACADEMY OF NURSING 1000 VERMONT AVENUE NW WASHINGTON, DC 20005 52-2213870 501(C)(3) 15,000 0 SPONSORSHIP STOP THE VIOLENCE PITTSBURGH 1106 SUCCESS ST PITTSBURGH, PA 15212 15,000 0 SPONSORSHIP N/A NASPAA 1028 VERMONT AVE NW STE 1100 WASHINGTON, DC 20005 52-1080991 0 SPONSORSHIP 501(C)(3) 13,500 PITTSBURGH SYMPHONY ORCHESTRA 600 PENN AVE PITTSBURGH, PA 15222 25-0986052 501(C)(3) SPONSORSHIP 13,500 0 PA CHAMBER OF BUS & INDUSTRY 417 WALNUT STREET 23-0961100 HARRISBURG, PA 17101 501(C)(6) 12 000 0 SPONSORSHIP PITTSBURGH PARKS CONSERVANCY 45 SOUTH 23RD ST STE 101 PITTSBURGH, PA 15203 23-2882145 501(C)(3) 11,000 0 SPONSORSHIP AMERICAN CANCER SOCIETY 320 BILMAR DR PITTSBURGH, PA 15205 25-1798733 501(C)(3) 10,347 0 SPONSORSHIP

Schedule I (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) HILLEL JEWISH UNIVERSITY CENTER 4607 FORBES AVE PITTSBURGH, PA 15213 25-6065236 501(C)(3) 10,000 0 SPONSORSHIP STATE SCIENCE & TECHNOLOGY INSTITUTE - 5015 PINE CREEK DRIVE - WESTERVILLE, OH 43081 31-1448843 501(C)(3) 10,000 0 SPONSORSHIP PENNSYLVANIA INNOCENCE PROJECT 1515 MARKET STREET SUITE 300 PHILADELPHIA, PA 19102 26-3176893 501(C)(3) 10,000 0 SPONSORSHIP INDEPENDENCE VISITOR CENTER CORPORATION - 6TH AND MARKET 501(C)(3) STREETS - PHILADELPHIA, PA 19106 23-2952488 10,000 0 SPONSORSHIP PITTSBURGH DOWNTOWN PARTNERSHIP 307 FOURTH AVE BANK TOWER 2 FL 25-1728064 PITTSBURGH, PA 15222 0 SPONSORSHIP 501(C)(3) 10,000 SHAPIRO DAVIS INAUGURATION 1617 JFK BLVD PHILADELPHIA, PA 19103 92-1042075 SPONSORSHIP N/A 10,000 0 MARY FURLONG & ASSOCIATES 3257 MT DIABLE BLVD LAFAYETTE, CA 94549 25-1902889 N/A 8 500 0 SPONSORSHIP KYIV SCHOOL OF ECONOMICS 2403 AVENUE X BROOKLYN, NY 11235 52-2264611 501(C)(3) 8,500 0 SPONSORSHIP GRANTMAKERS OF WESTERN PA 650 SMITHFIELD ST STE 210 PITTSBURGH, PA 15222 25-1496312 501(C)(3) 8 000 0 SPONSORSHIP

Schedule I (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) AMERICAN SOCIETY FOR PUBLIC ADMINISTRATION - 1730 RHODE ISLAND AVE NW - WASHINGTON, DC 20036 36-2340300 501(C)(3) 7,500 0 SPONSORSHIP CHILDRENS MUSEUM OF PITTSBURGH 10 CHILDRENS WAY ALLEGHENY SW PITTSBURGH, PA 15212 25-1379704 501(C)(3) 7,500 0 SPONSORSHIP GREATER PITTSBURGH CHAMBER OF COMMERCE - 11 STANWIX ST FL 17 -PITTSBURGH, PA 15222 25-0399620 501(C)(6) 7,500 0 SPONSORSHIP JUVENILE DIABETES RESEARCH FOUNDATION INTERNATIONAL - 120 WALL ST - NEW YORK, NY 10005 23-1907729 501(C)(3) 7,500 0 SPONSORSHIP AMERICAN RED CROSS 2801 LIBERTY AVE PITTSBURGH, PA 15222 SPONSORSHIP 25-0965231 501(C)(3) 6,000 0 HELLO NEIGHBOR 6587 HAMILTON AVENUE 1E PITTSBURGH, PA 15206 82-3695047 501(C)(3) SPONSORSHIP 6,000 0 STANLEY M MARKS BLOOD CANCER RESEARCH FUND - 5150 CENTRE AVE -PITTSBURGH, PA 15323 82-3369773 501(C)(3) 6 000 0 SPONSORSHIP MARCH OF DIMES INC 1550 CRYSTAL DRIVE 1300 ARLINGTON, VA 22202 13-1846366 501(C)(3) 5,856. 0 SPONSORSHIP ASSOCIATION FOR PUBLIC POLICY ANALYSIS AND MANAGEMENT - 1100 VERMONT AVENUE NW 650 -WASHINGTON, DC 20005 52-2193861 501(C)(3) 5,500 0 SPONSORSHIP

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
URBAN LEAGUE OF GREATER PITTSBURGH											
PITTSBURGH, PA 15222	25-0965592	501(C)(3)	5,260.	0.			SPONSORSHIP				
							Cabadula I /Farra 00				

Schedule I (Form 990) 2022 UNIVERSITY OF PITTSBURGH 25-0965591 Page 2

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	19390	264,195,545.	0.		
UITION REMISSION	2129	29,030,724.	0.		
TUITION REMISSION- STUDENTS ATTENDING OTHER UNIVERSITIES	66	1,309,648.	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

Page 2 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 SPONSORED PROGRAMS. 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 SPONSORED PROGRAMS 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

Schedule I (Form 990)

232291

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

UNIVERSITY OF PITTSBURGH

Employer identification number 25-0965591

Pa	art i Questions Regarding Compensation				
	·			Yes	No
1a	Check the appropriate box(es) if the organization provide	ded 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.			
	X First-class or charter travel	X Housing allowance or residence for personal use			
	X Travel for companions	Payments for business use of personal residence			
	X Tax indemnification and gross-up payments	X Health or social club dues or initiation fees			
	Discretionary spending account	X Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the orga	nization follow a written policy regarding payment or			
_	-	ribed above? If "No," complete Part III to explain	1b	х	
2	Did the organization require substantiation prior to reim		- 1.0		
		ector, regarding the items checked on line 1a?	2	х	
	and one of the original and of the original and of the original and or	sotor, regulating the norme encoured errimle rat.	_		
3	Indicate which if any of the following the organization	used to establish the compensation of the organization's			
_		neck any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director,				
	X Compensation committee	Written employment contract			
	X Independent compensation consultant	X Compensation survey or study			
	X Form 990 of other organizations	X Approval by the board or compensation committee			
	Tom ood of other organizations				
4	During the year, did any person listed on Form 990, Par	rt VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:				
а	Receive a severance payment or change-of-control pay	ment?	4a		х
		nonqualified retirement plan?		Х	
		compensation arrangement?			Х
	If "Yes" to any of lines 4a-c, list the persons and provide	e the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organ	nizations must complete lines 5-9.			
5		a 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:				
а	_		5a		х
					Х
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line	e 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:				
а	The organization?		6a		Х
	Any related organization?		6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.				
7	•	a 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Pa	ırt III	7		Х
8		or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations sect	ion 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the re	buttable presumption procedure described in			
	Regulations section 53 4958-6(c)?		9	l	1

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

Schedule J (Form 990) 2022

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	J-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PATRICK R. NARDUZZI	(i)	4,973,594.	1,423,333.	46,332.	234,800.	21,492.	6,699,551.	0.
HEAD FOOTBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) EDWARD J. GREFENSTETTE	(i)	0.	0.	0.	0.	0.	0.	0.
TRUSTEE	(ii)	789,908.	1,087,500.	257,068.	1,825,333.	29,410.	3,989,219.	1,337,240.
(3) F. JEFFREY CAPEL III	(i)	3,486,394.	25,000.	35,002.	23,200.	21,017.	3,590,613.	0.
HEAD MEN'S BASKETBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) HEATHER R. LYKE	(i)	1,066,967.	474,033.	16,361.	109,800.	20,562.	1,687,723.	0.
DIRECTOR OF ATHLETICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ARTHUR S. LEVINE	(i)	1,462,803.	0.	36,587.	34,800.	18,627.	1,552,817.	0.
FMR SVC HEALTH SCIENCES THRU 6/1/20	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ANANTHA SHEKHAR	(i)	995,834.	350,000.	33,057.	123,200.	34,575.	1,536,666.	0.
SVC HEALTH SCIENCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JEFFER CHOUDHRY	(i)	598,854.	740,000.	2,050.	14,000.	8,475.	1,363,379.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) RANDY V. BATES	(i)	803,010.	56,042.	9,486.	45,652.	23,754.	937,944.	0.
ASSISTANT FOOTBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) PATRICK D. GALLAGHER	(i)	664,355.	0.	15,030.	34,800.	105,169.	819,354.	0.
CHANCELLOR / CEO	(ii)	25,000.	0.	0.	0.	0.	25,000.	0.
(10) PAUL LAWRENCE	(i)	392,039.	324,447.	7,403.	57,378.	22,254.	803,521.	0.
TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) FRANK CIGNETTI	(i)	750,174.	2,797.	518.	23,200.	19,786.	796,475.	0,
ASSISTANT FOOTBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ANN E. CUDD	(i)	472,337.	0.	16,940.	42,050.	27,997.	559,324.	0.
PROVOST/SR VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ROBIN A. RUTENBAR	(i)	422,504.	0.	20,147.	40,311.	22,006.	504,968.	0.
SR VICE CHANCELLOR- RESEARCH	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) DAVID N. DEJONG	(i)	406,370.	0.	14,150.	59,450.	24,292.	504,262.	0.
SVC BUSINESS OPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) GEOVETTE E. WASHINGTON	(i)	426,693.	0.	18,230.	34,800.	12,858.	492,581.	0.
SVC & CHIEF LEGAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) NARAHARI SASTRY	(i)	394,191.	0.	9,697.	34,800.	22,176.	460,864.	0.
CFO/SR VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2022

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.

		(B) Breakdown of V	V-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(17) ROSALYN E. JONES	(i)	247,899.	0.	6,429.	20,000.	10,853.	285,181.	0.
VC/SECRETARY OF THE BOT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

90) 2022 UNIVERSITY OF PITTSBURGH 25-0965591 Page 3

Schedule J (Form 990) 2022 Part III Supplemental Information Provide the information, explanation, of

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

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Schedule J (Form 990) 2022 UNIVERSITY OF PITTSBURGH 25-0965591 Page 3

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, LINE 4B:

LINE 4B-SUPPLEMENTAL GTL INSURANCE PROGRAM FOR CERTAIN ACTIVE & RETIRED

OFFICERS, INCLUDING A TAX GROSS-UP- A. LEVINE-\$36,587.

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SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

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

2022
Open to Public Inspection

Name of the organization

Employer identification number

UNIVERSITY OF PITTSBURGH

25-0965591

	UNIVERSITY OF	F PITTSBURGH							Z:	0-096	5591			
Part I	Bond Issues	SEE PART VI FOR C	OLUMN (F) CONT	INUATIONS										
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ue price	(f) Description	on of purpose	(g) De	feased	(h) On	behalf	(i) Po	oled
											of is:	suer	finan	cing
									Yes	No	Yes	No	Yes	No
														l
A SEE	SCHEDULE K, PART VI	25-0965591	91335VJP2	09/18/14	96,		APITAL PROJ			Х		Х		Х
								ECTS; REFUND						l
B SEE	SCHEDULE K, PART VI	25-0965591	91335VKW5	04/15/21	210,	298,215.P	ORTION OF 2	018 PANTHERS		Х		Х		Х
C SEE	SCHEDULE K, PART VI	25-0965591	91335VKV7	12/03/19	200	000 000.C	APITAL PROJ	ECTS		x		х		Х
0 222	201122022 11, 21212 11		7 2 3 3 3 1 1 1 1	12,00,15		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
D														l
Part II	Proceeds		-						-	<u> </u>				
	_						В	С				D		
1 Ar	mount of bonds retired													
	mount of bonds legally defeased													
	otal proceeds of issue				5,645,580.	2	10,298,215.	200,	000,000	٥.				
	ross proceeds in reserve funds													
5 Ca	apitalized interest from proceeds													
6 Pr	oceeds in refunding escrows													
7 Iss	suance costs from proceeds				557,401.		769,716.		671,501	١.				
8 Cr	redit enhancement from proceeds													
9 W	orking capital expenditures from proce	eds												
10 Ca	apital expenditures from proceeds			90	5,065,099.		25,528,499.	199,	328,499	9.				
	ther spent proceeds						85,000,000.							
	ther unspent proceeds									\perp				
13 Ye	ear of substantial completion				2015		2021		019	4				
				Yes	No	Yes	No	Yes	No	\perp	Yes		No	
	ere the bonds issued as part of a refun		• •											
	ssued prior to 2018, a current refundin				X	Х			Х	+				
	ere the bonds issued as part of a refun	_												
	sued prior to 2018, an advance refundi				X	77	X	77	Х	-		_		
	as the final allocation of proceeds been			х		Х		Х		+		_		
	oes the organization maintain adequate		• •					v						
tin	al allocation of proceeds?			Х		Х		Х			alula M			

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

Schedule K (Form 990) 2022

Schedule K (Form 990) 2022 UNIVERSITY OF PITTSBURGH 25-0965591 Page 2

Par	t III Private Business Use								
			Ą		В		C)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		х		х		х		
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?	Х		Х		X			1
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?	Х		Х		Х			1
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?	Х		Х		X			1
С	Are there any research agreements that may result in private business use of								
	bond-financed property?	Х		х		X			1
d	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?	Х		х		X			1
4	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		.24 %		1.39 %		3.09 %		%
5	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		%		%		%		%
6	Total of lines 4 and 5		.24 %		1.39 %		3.09 %		%
7	Does the bond issue meet the private security or payment test?		х		х		x		
	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?		х		x		x		1
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or				·		_		
	disposed of		%		%		%		%
	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations		7.0		1		T		
	sections 1.141-12 and 1.145-2?								1
9	Has the organization established written procedures to ensure that all								
•	nonqualified bonds of the issue are remediated in accordance with the								1
	requirements under Regulations sections 1.141-12 and 1.145-2?	Х		х		Х			1
Par	t IV Arbitrage		1				1		
			Α		В		С		
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		х		х		х		
2	If "No" to line 1, did the following apply?		•		1		•		
	Rebate not due yet?		Х		х		Х		
	Exception to rebate?	Х		Х		Х			
	No rebate due?		Х		Х		Х		
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		•				•		
	performed								
3	Is the bond issue a variable rate issue?	Х		Х		Х			
					1		1		

UNIVERSITY OF PITTSBURGH 25-0965591 Schedule K (Form 990) 2022 Page 3

inued)

	Α		В		С)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х		X		X		
b Name of provider	N/A		N/A		N/A			
c Term of hedge								
d Was the hedge superintegrated?		Х		X		X		
e Was the hedge terminated?		Х		Х		X		
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		X		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х		Х		X		
7 Has the organization established written procedures to monitor the								
requirements of section 148?	х		Х		Х			
Part V Procedures To Undertake Corrective Action								

В Has the organization established written procedures to ensure that violations Yes No Yes No Yes No of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions.

SCHEDULE K, PART I, BOND ISSUES:

- (A) ISSUER NAME: SEE SCHEDULE K, PART VI
- (F) DESCRIPTION OF PURPOSE:

CAPITAL PROJECTS; REFUND PORTION OF 2018 PANTHERS BOND

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 (SERIES

2014)

B- UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER

EDUCATION-PITT ASSET NOTES TAX EXEMPT HIGHER EDUCATION REGISTERED

SERIES OF 2021

C- UNIVERSITY OF PITTSBURGH - OF THE COMMONWEALTH SYSTEM OF HIGHER

EDUCATION-PITT ASSET NOTES TAX EXEMPT HIGHER EDUCATION REGISTERED

SERIES OF 2019

D

No

Yes

Schedule K (Form 990) 2022 UNIVERSITY OF PITTSBURGH	25-0965591	Page 4
Part VI Supplemental Information. Provide additional information for responses to questions of	on Schedule K. See instructions. (continued)	
SCHEDULE K PART I BOND ISSUES- COLUMN (F)- DESCRIPTION OF PURPOSE		
A-FINANCE CAPITAL PROJECTS		
B- FINANCE CAPITAL PROJECTS AND EQUIPMENT; REFUND PORTION OF 2018		
PANTHERS		
C- FINANCE CAPITAL PROJECTS AND EQUIPMENT		
SCHEDULE K PART II, LINE 3 COLUMN (A), TOTAL PROCEEDS OF ISSUE		
AMOUNT INCLUDES INTEREST EARNED IN PROJECT FUNDS, LESS FEES.		
		

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open To Public Inspection

Name of the organization									Em	ploye	rident	ificati	on nu	mber
	TY OF PIT									0965				
Part I Excess Benefit Tra	nsactions	(section 5	01(c)(3	3), secti	ion 501(c	(4), and se	ection	501(c)(29) oı	ganizat	ions o	nly).			
Complete if the organizat	ion answered	d "Yes" on	Form 9	990, Pa	art IV, line	25a or 25h	b, or F	orm 990-EZ,	Part V,	line 40	Ob.			
(a) Name of disqualified person (b) Relationship between disqualified person and organization						10	r) Des	cription of tra	neactio	ion			(d) Correct	
(a) Name of disqualified person	pe	rson and o	rganiza	ation			5, D03	Chption of th	al ISaCti			Y	es	No
												_	_	
													_	
												\perp	_	
													_	
O Fatantha and of the incomed				15										
2 Enter the amount of tax incurred										Φ				
section 4958 3 Enter the amount of tax, if any, or														
3 Enter the amount of tax, if any, or	i iii le 2, abov	e, reimburs	seu by	uie orț	gariizatioi	'				Ф				
Part II Loans to and/or Fro	om Interes	sted Per	sons)										
Complete if the organizat					Part V Ii	ne 38a or l	Form	990 Part IV	line 26:	or if th	ne oraz	anizati	on	
reported an amount on F					, , , , , , ,			300,1 4,111,		01 11 11	io orga	ai iiLaci	011	
		Purpose	(d) Lo	an to or	(e) O	riginal	(f)	Balance due	(g) In	(h) Ap by bo	proved		/ritten
interested person with orga		of loan		n the ization?		l amount	``			ault?	comm	nittee?	agree	ment?
			То	From					Yes	No	Yes	No	Yes	No
			<u> </u>											
							_							
Part III Grants or Assistan	o Ronofil	ina Into	rocto	d Do	reone	<u>\$</u>								
Complete if the organizat		_				27								
(a) Name of interested person	1					mount of		(d) Typ	o of) Purp	000.0	f
(a) Name of interested person		elationship rested per				sistance		assista			•	assist		'
		he organiz												
										\dashv				
										\neg				

Schedule L (Form 990) 2022

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

Complete if the organization answer	red "Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
SEE SCH. L PART V	N/A	0.	N/A		Х
				1	
				+	
				1	
Provide additional information for re	sponses to questions on Schedule L (see i	instructions).			
SCHEDULE L PART IV					
(A) NAME OF INTERESTED PERSON: NEAL	BECKER				
(B) RELATIONSHIP BETWEEN INTERESTED	PERSON AND ORGANIZATION: FAMILY				
MEMBER OF ANN E. CUDD, SVC AND PROVO	ST.				
(C) AMOUNT OF TRANSACTION: \$130,700					
(D) DESCRIPTION OF MDANGACHTON - EMD	OVMENT				
(D) DESCRIPTION OF TRANSACTION: EMP	LOYMENT				
(E) SHARING OF ORGANIZATION'S REVENUE	ES? NO				
/					
(A) NAME OF INTERESTED PERSON: ALLE	GHENY STRATEGY PARTNERS, LLC				
(B) RELATIONSHIP BETWEEN INTERESTED	PERSON AND ORGANIZATION: FAMILY				
MEMBER OF PETER VARISCHETTI, A TRUST	EE.				
	•				
(C) AMOUNT OF TRANSACTION: \$129,020					
(D) DESCRIPTION OF TRANSACTION: BUS	INESS				
			Schedule I	(Earm 0	วบ) วบว

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: SEAN GALLAGHER

MEMBER OF PATRICK D. GALLAGHER, CEO/CHANCELLOR.

(C) AMOUNT OF TRANSACTION: \$102,765

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: DAVID HICKTON

MEMBER OF DAWNE S. HICKTON, A TRUSTEE.

(C) AMOUNT OF TRANSACTION: \$368,597

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION'S REVENUES? NO

(A) NAME OF INTERESTED PERSON: PEYTON KONDIS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FAMILY

Part V Supplemental Information

Schedule L (Form 990)

Schedule L (Form 990)

Schedule L (Form 990) 107 2022.05060 UNIVERSITY OF PITTSBURGH 14060514 785294 PITT PITT___1

232461 04-01-22

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Inspection Employer identification number

		UNIVERSITY OF PITT	SBURGH				25-0965	5591		
Par	rt I Typ	oes of Property								
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, lin	n	(d) Method of det noncash contribut			s
1	Art - Works	of art								
2		ical treasures								
3	Art - Fraction	onal interests								
4	Books and	publications								
5		nd household goods								
6	Cars and o	ther vehicles								
7	Boats and	planes								
8		property								
9	Securities -	Publicly traded	Х	171	5,318,	973. M EAI	N VALUE DATE	REC'I	D	
10	Securities -	Closely held stock								
11	Securities -	Partnership, LLC, or								
	trust intere									
12	Securities -	Miscellaneous								
13	-	onservation contribution -								
		uctures								
14		onservation contribution - Other								
15		e - Residential								
16		e - Commercial								
17		e - Other								
18		3	X	2	109,	570.WRI	TTEN APPRAISAL			
19		tory								
20		medical supplies	Х	1	6,	750.WRI	TTEN APPRAISAL			
21										
22		ırtifacts								
23		pecimens								
24		cal artifacts		1	F1	200 5757				
25	Other (ORACLE CLOUD PR)	X	1	51,	000.FMV				
26	Other (
27	Other (
28 29	Other (Forms 2000 reserved by the expens	tation durin	a the tay year far a	entributions	- 				
29		Forms 8283 received by the organi he organization completed Form 82							0	
	ior writeri ti	ne organization completed Form 62	05, Fait V, L	Donee Acknowledg	ement <u>29</u>				Yes	
302	During the	year, did the organization receive b	v contributio	on any property rea	oorted in Part I lines 1 t	hrough 2	8 that it		163	No
50a	-	for at least 3 years from the date of	-			-	b, triat it			
		rposes for the entire holding period						30a		х
h		escribe the arrangement in Part II.	·					000		
31	,	rganization have a gift acceptance	policy that r	equires the review	of any nonstandard co	ntribution	s?	31	х	
		rganization hire or use third parties	•	•	•		·			
∪∠u	contributio	•		ŭ	, ,	04011		32a		х
b		escribe in Part II.					·····	52u		
33		nization didn't report an amount in c	column (c) fo	or a type of propert	v for which column (a) i	s checker	_{1.}			
	describe in			, p. 3. p. sport	,	2501.00	,			
LHA		erwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule M	(Forn	າ 990)	2022

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.
SCHEDULE	M, PART I, COLUMN (B)
THE AMOU	NTS REPORTED IN COLUMN (B) REPRESENTS A COMBINATION OF ITEMS
RECEIVED	AND TOTAL NUMBER OF CONTRIBUTIONS.
232142 09-09	-22 Schedule M (Form 990) 2022

SCHEDULE 0 (Form 990)

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 Form 990-EZ

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service 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 \$243,868,683 AUXILIARY ENTERPRISES \$163,263,889 \$148,718,215 LIBRARIES \$60,413,058 PUBLIC SERVICE \$127,241,577 \$994,998 EXPENSES \$ 594,787,207. INCL GRANTS OF \$ 994,998. REVENUE \$ 148,718,215. 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

2022.05060 UNIVERSITY OF PITTSBURGH

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Schedule O (Form 990) 2022

PITT 1

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

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** UNIVERSITY OF PITTSBURGH 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 14, 2024 MEETING OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, A COPY OF THE DRAFT IRS FORMS 990 AND 990-T FOR FISCAL YEAR 2023 WAS DISTRIBUTED TO EACH COMMITTEE MEMBER. AT THE MAY 14TH 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 ALL MEMBERS OF ITS BOARD OF TRUSTEES 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 CHAIRPERSON AND THE CHAIRPERSON OF THE GOVERNANCE AND NOMINATING COMMITTEE FOR REVIEW AND POSSIBLE ACTION. THE GOVERNANCE AND NOMINATING COMMITTEE OF THE BOARD OF TRUSTEES OVERSEES TRUSTEE COMPLIANCE AND ADVISES, WHEN

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** UNIVERSITY OF PITTSBURGH 25-0965591 NECESSARY, ON MANAGING ANY POTENTIAL OR ACTUAL CONFLICTS. TRUSTEES 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 CHAIRPERSON). 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,

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** 25-0965591 UNIVERSITY OF PITTSBURGH THE CHAIR OF THE BUDGET COMMITTEE OF THE BOARD, AND OTHER TRUSTEES. NO TRUSTEE SERVING ON THE COMPENSATION COMMITTEE HAS A CONFLICT OF INTEREST WITH RESPECT TO THE CHANCELLOR'S OR OFFICERS' COMPENSATION ARRANGEMENTS. TO ASSIST THE COMPENSATION COMMITTEE IN MEETING ITS RESPONSIBILITIES, THE SERVICES OF A GLOBAL PROFESSIONAL SERVICES FIRM ARE USED FOR COMPENSATION CONSULTING AND MARKET RESEARCH. THAT FIRM PROVIDES THE COMPENSATION COMMITTEE WITH COMPENSATION DATA FROM A GROUP OF COMPARABLE U.S. UNIVERSITIES. 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.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

Name of the organization UNIVERSITY OF PITTSBURGH		Employer identification number 25-0965591
NON PERIODIC CHANGES IN BENEFIT PLANS	68,736,494.	

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

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

2022
Open to Public Inspection

OMB No. 1545-0047

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)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or		End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
3441 F STREET, LLC - 37-1893874					
251 LITTLE FALLS DRIVE					
WILMINGTON, DE 19808	REAL ESTATE HOLDING COMPANY	DELAWARE		1,966,101.	STONE MANSION, LLC
LIFEX GLOBAL, LLC - 83-1525466					
4200 FIFTH AVENUE					
PITTSBURGH, PA 15260	LIFE SCIENCES INCUBATOR	PENNSYLVANIA	1,206,224.	1,960,921.	LIFEX HOLDINGS, LLC
LIFEX HOLDINGS, LLC - 82-3620757					
4200 FIFTH AVENUE	LIFE SCIENCES INCUBATOR				UNIVERSITY OF
PITTSBURGH, PA 15260	HOLDING COMPANY	PENNSYLVANIA			PITTSBURGH
STONE MANSION, LLC - 82-5055695					
4200 FIFTH AVENUE					UNIVERSITY OF
PITTSBURGH, PA 15260	REAL ESTATE HOLDING COMPANY	PENNSYLVANIA		3,269.	PITTSBURGH

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	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
UNIVERSITY OF PITTSBURGH AND UPMC MEDICAL	TO INTEGRATE FUNDRAISING						İ
AND HEALTH SCIENCES FOUNDATION - 1, 3600	FOR THE UNIVERSITY OF						
FORBES AVE, SUITE 8084 FORBES TOWER,	PITTSBURGH AND UPMC	PENNSYLVANIA	501(C)(3)	12A			Х
BRADFORD EDUCATIONAL FOUNDATION - 25-1399653							
300 CAMPUS DRIVE	TO SUPPORT THE UNIVERSITY						
BRADFORD, PA 16701	OF PITTSBURGH AT BRADFORD	PENNSYLVANIA	501(C)(3)	12C			Х
JOHNSTOWN EDUCATIONAL FOUNDATION -							
25-1513720, UPJ,266 BLACKINGTON HALL,	TO SUPPORT THE UNIVERSITY				UNIVERSITY OF		
JOHNSTOWN, PA 15904	OF PITTSBURGH AT JOHNSTOWN	PENNSYLVANIA	501(C)(3)	12C	PITTSBURGH	х	
EYE AND EAR FOUNDATION - 25-1439732	ADVANCE EFFORTS OF						
BIOMEDICAL SCIENCES TOWER, 203 LOTHROP ST,	OTOLARYNGOLOGY AND						1
PITTSBURGH, PA 15213	OPTHALMOLOGY DEPARTMENTS	PENNSYLVANIA	501(C)(3)	12C			Х

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

Schedule R (Form 990) 2022

Schedule R (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591

Part I Continuation of Identification of Disregarded Entities

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity
LIFEX VENTURES, LLC - 30-1207043	LIFE SCIENCES INVESTMENT				
4200 FIFTH AVENUE	AND COMMERCIALIZATION				
PITTSBURGH, PA 15260	COMPANY	PENNSYLVANIA	43,709.	1,405,197.	LIFEX HOLDINGS, LLC
LIFEX MANAGEMENT, LLC - 85-3416978					
4200 FIFTH AVENUE	LIFE SCIENCES INCUBATOR				
PITTSBURGH, PA 15260	SERVICE PROVIDER	PENNSYLVANIA			LIFEX HOLDINGS, LLC

Schedule R (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591

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	(f) Direct controlling entity	contr	g) 512(b)(13) crolled ization?
J		Toroigh Godinay)		501(c)(3))	'	Yes	No
UNIVERSITY OF PITTSBURGH TRUST - 25-1465279	OVERSIGHT OF CERTAIN						
5TH AVE AND BIGELOW	UNIVERSITY AFFILIATED				UNIVERSITY OF		
PITTSBURGH, PA 15260	ENTITIES AND ASSETS	PENNSYLVANIA	501(C)(3)	12C	PITTSBURGH	х	
UNIVERSITY DENTAL HEALTH SERVICES -	TO PROVIDE TEACHING AND						
25-1762396, 3501 TERRACE STREET, PITTSBURGH,	PATIENT CARE IN A TEACHING				UNIVERSITY OF		
PA 15261	AND RESEARCH SETTING	PENNSYLVANIA	501(C)(3)	3	PITTSBURGH	х	
PITTSBURGH SKIN & CANCER FOUNDATION -	SUPPORT OF PROGRAMS,						
25-0965472, 190 LOTHROP STREET STE 145,	RESEARCH, AND EDUCATION				UNIVERSITY OF		
PITTSBURGH, PA 15213	WITHIN DERMATOLOGY	PENNSYLVANIA	501(C)(3)	7	PITTSBURGH	х	
MPC CORPORATION - 25-1128244	RESEARCH ACTIVITIES TO AID						
5000 FORBES AVENUE	EDUCATIONAL AND ECONOMIC						
PITTSBURGH, PA 15213	DEVELOPMENT IN PA	PENNSYLVANIA	501(C)(3)	12A			x
UPMC - 25-1423657	SUPPORTING SUBSIDIARIES						
600 GRANT STREET 58TH FLOOR	HEALTHCARE, EDUCATION, AND						
PITTSBURGH, PA 15219	RESEARCH PROGRAMS	PENNSYLVANIA	501(C)(3)	12C			x
DIETRICH FOUNDATION - 36-4711746	TO BENEFIT HIGHER						
600 GRANT STREET NO 5360	EDUCATION AND OTHER						
PITTSBURGH, PA 15219	CHARITABLE PURPOSES.	PENNSYLVANIA	501(C)(3)	12A			x
LIFEX GREENHOUSE, INC 88-1083211	FACILITATE RESEARCH &						
2730 SIDNEY ST, STE 300	ECONOMIC DEVELOPMENT IN				LIFEX HOLDINGS,		
PITTSBURGH, PA 15203	THE LIFE SCIENCES INDUSTRY	PENNSYLVANIA	501(C)(3)	8	LLC	х	
	-						
	1						

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. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(i	ո)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations?		amount in box	Gener mana partr	iging ner?	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
]											

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec.	i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(cont	b)(13) rolled ity?
		country)		ŕ				Yes	No
TSH CORPORATION - 25-1520417			UNIVERSITY OF						
124 CATHEDRAL OF LEARNING			PITTSBURGH						
PITTSBURGH, PA 15260	DORMANT	PA	TRUST	C CORP			5.00%	Х	
FORBES-SCHENLEY LAND COMPANY - EIN UNKNOWN									
5TH AVE AND BIGELOW			UNIVERSITY OF						
PITTSBURGH, PA 15260	DORMANT	PA	PITTSBURGH	C CORP			100.00%	Х	
SCHENLEY PARK APARTMENTS COMPANY - EIN									
UNKNOWN, 5TH AVE AND BIGELOW, PITTSBURGH, PA			UNIVERSITY OF						
15260	DORMANT	PA	PITTSBURGH	C CORP			100.00%	Х	
CARRILLO STEAM PRODUCTION ASSOCIATION, LLC -	SERVICE CORPORATION								
27-1073489, 400 EUREKA BUILDING, 3400 FORBES	TO MANAGE THE STEAM		UNIVERSITY OF						
AVENUE, PITTSBURGH, PA 15260	PLANT	PA	PITTSBURGH	C CORP	0.	0.	75.00%	Х	
VINCENT PAYMENT SOLUTIONS - 82-1101143									
2711 CENTERVILLE ROAD	PAYMENT SOLUTION		UNIVERSITY OF						
WILMINGTON, DE 19808	PROVIDER	DE		C CORP			50.00%		Х

Schedule R (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(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	Sect 512(b contro entir	tion (13) olled ity?
CHARITABLE REMAINDER TRUSTS(1)	CHARITABLE TRUST		UNIVERSITY OF PITTSBURGH					Yes X	NO_
	_								
									<u> </u>
	_								
	_								
	_								

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

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	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
	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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
d	Loans or loan guarantees to or for related organization(s)	1d	Х	
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
-1	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	n Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p	Х	
q	Reimbursement paid by related organization(s) for expenses	1q	Х	
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s)	1s		Х
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	Me	(d) ethod of determining amount involved
(1) JOHNSTOWN EDUCATIONAL FOUNDATION	С	160,008.	CASH	
(2) UNIVERSITY DENTAL HEALTH SERVICES	0	1,836,792.	CASH	
(3) UNIVERSITY DENTAL HEALTH SERVICES	Q	381,683.	CASH	
<u>(4)</u>				
<u>(5)</u>				
(6)	120			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners see 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat	or- Code V-UBI amount in box 2 of Schedule K-1	General of managing partner?	(k) Percentage ownership

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University of Pittsburgh Top 25 Highest Paid Non-Officers for the Year Ended June 30, 2023 Right to Know Disclosure

Ranking	<u>Name</u>	Total Gross				
1	Narduzzi, Patrick	\$	6,403,412.41			
2	Capel III, Jeffrey F.	\$	3,518,712.52			
3	Lyke, Heather R.	\$	1,547,863.58			
4	Levine, Arthur S.	\$	1,466,957.46			
5	Bates, Randy V.	\$	868,333.67			
6	Cignetti, Frank	\$	756,250.00			
7	Partridge, Charles J.	\$	747,917.04			
8	Becich, Michael J.	\$	728,460.92			
9	White, Lance B.	\$	641,537.56			
10	Imbrogno, Michael E.	\$	636,368.66			
11	Davitt, Kristen	\$	629,638.98			
12	James III, Alton E.	\$	621,541.14			
13	Fisher, Daniel T.	\$	614,923.33			
14	Almodovar, David R.	\$	615,254.48			
15	Reis, Steven E.	\$	614,000.02			
16	Gronenborn, Angela M.	\$	613,066.14			
17	Strick, Peter L.	\$	586,455.00			
18	Silverstein, Jonathan	\$	575,844.02			
19	Costello III, Bernard J.	\$	575,000.00			
20	Borbely, David	\$	539,604.09			
21	Geraci, Mark	\$	550,000.00			
22	Vesterlund, Lise D.	\$	537,500.00			
23	Shlomchik, Mark J.	\$	527,673.31			
24	Bahar, Ivet	\$	522,921.98			
25	Bell, Micahel J.	\$	503,337.62			