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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at *www IRS gov/form990*

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
WASHINGTON UNIVERSITY

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
700 ROSEDALE AVENUE CB 1034

City or town, state or province, country, and ZIP or foreign postal code
SAINT LOUIS, MO 631121408

D Employer identification number
43-0653611

E Telephone number
(314) 935-8283

G Gross receipts $ 6,675,944,434

F Name and address of principal officer
MARK S WRIGHTON
ONE BROOKINGS DR
ST LOUIS, MO 63130

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www wustl edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1905

M State of legal domicile MO

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
The Washington University is a co-educational, nondenominational university with a long and distinguished history of teaching, research and community service Its schools and colleges contd on Schedule O

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	60
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	54
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	23,127
6	Total number of volunteers (estimate if necessary)	6	15,000
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	13,075,799
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	637,042,644	702,970,970
	9	Program service revenue (Part VIII, line 2g)	1,984,704,608	2,159,919,056
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	460,808,020	281,683,939
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	46,788,086	40,749,718
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,129,343,358	3,185,323,683
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	307,162,515	330,432,725
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,473,835,883	1,549,565,826
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶35,291,214		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	984,088,440	1,114,713,119
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,765,086,838	2,994,711,670
	19	Revenue less expenses Subtract line 18 from line 12	364,256,520	190,612,013

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	11,216,781,000	11,081,059,000
	21	Total liabilities (Part X, line 26)	2,168,114,000	2,336,278,000
	22	Net assets or fund balances Subtract line 21 from line 20	9,048,667,000	8,744,781,000

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, in
my knowledge and belief, it is true, correct, and complete Declaration o
preparer has any knowledge

Sign Here

******
Signature of officer

MICHAEL DUNLAP CONTROLLER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature
TRAVIS L PATTON	TRAVIS L PATTON

Firm's name ▶ PRICEWATERHOUSECOOPERS LLP

Firm's address ▶ 600 13TH ST NW STE 1000
WASHINGTON, DC 20005

May the IRS discuss this return with the preparer shown above? (see in

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

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 measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 1,922,761,092 including grants of $ 275,758,963) (Revenue $ 1,909,534,260)

INSTRUCTION - THIS CATEGORY INCLUDES EXPENDITURES FOR ALL ACTIVITIES THAT ARE PART OF AN INSTITUTIONS INSTRUCTION PROGRAM, WITH THE EXCEPTION OF EXPENDITURES FOR REMEDIAL AND TUTORIAL INSTRUCTION, WHICH ARE CATEGORIZED AS STUDENT SERVICES EXPENDITURES FOR CREDIT AND NON-CREDIT COURSES FOR ACADEMIC, OCCUPATIONAL, VOCATIONAL AND MEDICAL CARE INSTRUCTION, AND FOR REGULAR, SPECIAL AND EXTENSION SESSIONS ARE INCLUDED ATTENDANCE FALL SEMESTER 14,842 AND SPRING SEMESTER 14,212 APPROXIMATELY 426,249 PATIENTS WERE TREATED BY MEDICAL SCHOOL FACULTY AND STUDENTS

4b (Code) (Expenses $ 477,673,234 including grants of $ 51,730,308) (Revenue $ 144,114,796)

RESEARCH - THIS CATEGORY INCLUDES ALL EXPENDITURES FOR ACTIVITIES SPECIFICALLY ORGANIZED TO PRODUCE RESEARCH OUTCOMES, WHETHER COMMISSIONED BY AN AGENCY EXTERNAL TO THE INSTITUTION OR SEPARATELY BUDGETED BY AN ORGANIZATIONAL UNIT WITHIN THE INSTITUTION SUBJECT TO THESE CONDITIONS, IT INCLUDES EXPENDITURES FOR INDIVIDUAL AND/OR PRODUCT RESEARCH AS WELL AS THOSE OF THE INSTITUTES AND RESEARCH CENTERS REVENUES EXCLUDE GOVERNMENT GRANTS WHICH ARE REPORTED AS CONTRIBUTIONS DURING FISCAL YEAR 2016, THE UNIVERSITY RECEIVED 2,708 DIRECT AND INDIRECT AWARDS

4c (Code) (Expenses $ 195,344,000 including grants of $) (Revenue $ 106,270,000)

AUXILIARY AND STUDENT SUPPORT SERVICES - EXPENSES INCURRED ARE PRIMARILY FOR THE SUPPORT OF STUDENTS AUXILIARY ACTIVITIES INCLUDING STUDENT HOUSING, FOOD SERVICE, TRANSPORTATION AND CAMPUS PARKING STUDENT SERVICES ARE THOSE ACTIVITIES THAT DIRECTLY SUPPORT THE STUDENTS BUT DO NOT QUA- LIFY AS MANAGEMENT AND GENERAL COSTS SIGNIFICANT COMPONENTS INCLUDE CENTRAL AND SCHOOL-SPECIFIC ADMISSIONS, REGISTRARS, CAREER PLANNING AND PLACEMENT OFFICES, STUDENT FINANCIAL AID LOAN OFFICES, STUDENT HEALTH SERVICES, ATHLETICS, STUDENT ACTIVITES OFFICE, INTERNATIONAL STUDENTS OFFICE, AND THE VICE CHANCELLOR FOR STUDENTS OFFICE

4d Other program services (Describe in Schedule O)

(Expenses $ 192,321,498 including grants of $ 2,943,454) (Revenue $ 27,119,723)

4e **Total program service expenses ▶** 2,788,099,824

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

Part IV Checklist of Required Schedules *(continued)*

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	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
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 Schedule J*	23	Yes	
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 Schedule K If "No," go to line 25a*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	Yes	
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	Yes	
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V . . . . . ☑

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	20,221			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
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	23,127			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶ CI , CH , FR , GM , IT , SP See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		No
10	**Section 501(c)(7) organizations.** Enter					
a	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					
a	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				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	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.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure**

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 60			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 54			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6		No
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?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
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	Yes	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ OK

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Washington University Accounting Services 700 Rosedale Avenue CB 1034 Saint Louis, MO 631121408 (314) 935-8283

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	16,136,276		1,444,205

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 2,817

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
CLAYCO CONSTRUCTION COMPANY 2199 INNERBELT BUS CNTR DR ST LOUIS, MO 63114	CONSTRUCTION SERVICES	48,091,014
ALBERICI CONSTRUCTORS INC 8800 PAGE AVE ST LOUIS, MO 63114	CONSTRUCTION SERVICES	22,866,617
BSI CONSTRUCTORS INC 6767 SOUTHWEST AVE ST LOUIS, MO 63143	CONSTRUCTION SERVICES	19,464,115
PARIC CORPORATION 77 WESTPORT PLAZA DR STE 250 ST LOUIS, MO 63146	CONSTRUCTION SERVICES	16,783,763
BON APPETIT MANAGEMENT COMPANY 6515 WYDOWN BLVD ST LOUIS, MO 63130	FOOD SERVICES	16,579,726

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 ▶ 430

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	100,442			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	441,980,617			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	260,889,911			
	g	Noncash contributions included in lines 1a-1f $		76,102,923			
	h	**Total.** Add lines 1a-1f ▶			702,970,970		
Program Service Revenue			Business Code				
	2a	RESEARCH - CONTRACTS OTHER	541700		144,114,796		144,114,796
	b	TUITION AND FEES	611600		601,888,000	601,888,000	
	c	PATIENT, LAB AND HOSPITAL SUPPORT	621110		1,218,878,000	1,218,878,000	
	d	AUXILIARY SALES AND SERVICE	611710		106,270,000	989,760	105,280,240
	e	EDUCATIONAL SALES AND SERVICE	611710		88,768,260	77,437,129	2,596,992	8,734,139
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f ▶			2,159,919,056		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶			9,179,106	3,067,111	6,111,995
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶			6,045,661		6,045,661
			(i) Real	(ii) Personal			
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) ▶					
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory	3,763,088,711				
	b	Less cost or other basis and sales expenses	3,482,581,481	8,002,397			
	c	Gain or (loss)	280,507,230	-8,002,397			
	d	Net gain or (loss) ▶			272,504,833		272,504,833
	8a	Gross income from fundraising events (not including $ 100,442 of contributions reported on line 1c) See Part IV, line 18	a	36,647			
	b	Less direct expenses	b	36,873			
	c	Net income or (loss) from fundraising events ▶			-226		-226
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities ▶					
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
	c	Net income or (loss) from sales of inventory ▶					
		Miscellaneous Revenue	Business Code				
	11a	OTHER EDUCATIONAL SERVICES	611710		34,704,283	20,697,787	6,421,936	7,584,560
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d ▶			34,704,283		
	12	**Total revenue.** See Instructions ▶			3,185,323,683	1,918,900,916	13,075,799	550,375,998

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	47,672,746	47,672,746		
2 Grants and other assistance to domestic individuals See Part IV, line 22	274,967,379	274,967,379		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	7,792,600	7,792,600		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	10,464,643	1,006,121	8,151,317	1,307,205
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25,332,079	13,974,838	10,413,979	943,262
7 Other salaries and wages	1,214,419,064	1,166,156,048	32,270,332	15,992,684
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	73,135,675	69,812,464	2,385,818	937,393
9 Other employee benefits	154,150,703	143,781,365	7,847,657	2,521,681
10 Payroll taxes	72,063,662	67,767,137	3,189,066	1,107,459
11 Fees for services (non-employees)				
a Management	0			
b Legal	7,615,513	3,649,665	3,965,848	
c Accounting	724,967	27,128	697,839	
d Lobbying	204,272	40,250	164,022	
e Professional fundraising services See Part IV, line 17				
f Investment management fees	54,377,779		54,377,779	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	115,694,015	104,173,995	9,733,563	1,786,457
12 Advertising and promotion	2,310,578	2,253,262	54,128	3,188
13 Office expenses	155,020,065	142,567,476	10,242,114	2,210,475
14 Information technology	42,331,771	28,415,501	12,696,044	1,220,226
15 Royalties	0			
16 Occupancy	107,177,513	101,120,094	4,552,153	1,505,266
17 Travel	31,331,528	28,795,410	1,088,907	1,447,211
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	9,356	9,356		
19 Conferences, conventions, and meetings	7,284,165	5,835,321	355,594	1,093,250
20 Interest	52,311,037	50,377,498	1,888,883	44,656
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	170,443,000	164,973,502	5,176,732	292,766
23 Insurance	17,768,676	17,755,349	13,321	6
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a MEDICAL SUPPLIES	221,318,198	221,317,277	651	270
b CONTRACTUAL ALLOWANCE BAD DEBT EXPENSE	96,073,798	96,073,798		
c ENTERTAINMENT AND SOCIAL EXPENSES	20,921,437	16,875,563	1,496,034	2,549,840
d LIBRARY VOLUMES	15,002,614	15,002,614		
e All other expenses	-3,207,163	-4,093,933	558,851	327,919
25 **Total functional expenses.** Add lines 1 through 24e	2,994,711,670	2,788,099,824	171,320,632	35,291,214
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing			1	
	2	Savings and temporary cash investments		164,233,878	2	173,443,360
	3	Pledges and grants receivable, net		217,783,171	3	226,875,529
	4	Accounts receivable, net		284,056,336	4	347,341,078
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		439,243	6	396,271
	7	Notes and loans receivable, net		1,941,192	7	1,971,553
	8	Inventories for sale or use		3,355,632	8	3,277,395
	9	Prepaid expenses and deferred charges		8,841,673	9	8,079,855
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 4,413,363,851			
	b	Less accumulated depreciation	10b 2,134,875,513	2,140,760,895	10c	2,278,488,338
	11	Investments—publicly traded securities		4,252,781,000	11	3,904,726,000
	12	Investments—other securities See Part IV, line 11		3,854,876,000	12	3,837,016,000
	13	Investments—program-related See Part IV, line 11		111,156,929	13	107,618,484
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		176,555,051	15	191,825,137
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		11,216,781,000	16	11,081,059,000
Liabilities	17	Accounts payable and accrued expenses		364,123,819	17	393,014,507
	18	Grants payable			18	
	19	Deferred revenue		93,832,594	19	103,223,180
	20	Tax-exempt bond liabilities		904,517,015	20	622,927,955
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		38,408,000	23	49,231,000
	24	Unsecured notes and loans payable to unrelated third parties		546,526,985	24	944,197,045
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		220,705,587	25	223,684,313
	26	**Total liabilities.** Add lines 17 through 25		2,168,114,000	26	2,336,278,000
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		4,420,093,000	27	4,337,246,000
	28	Temporarily restricted net assets		3,019,380,000	28	2,699,302,000
	29	Permanently restricted net assets		1,609,194,000	29	1,708,233,000
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		9,048,667,000	33	8,744,781,000
	34	Total liabilities and net assets/fund balances		11,216,781,000	34	11,081,059,000

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,185,323,683
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,994,711,670
3	Revenue less expenses Subtract line 2 from line 1	3	190,612,013
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,048,667,000
5	Net unrealized gains (losses) on investments	5	-492,954,293
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 in Schedule O)	9	-1,543,720
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,744,781,000

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

Additional Data

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Name: WASHINGTON UNIVERSITY

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN D BEUERLEIN TRUSTEE	1 00	X						0	0	0
F GILBERT BICKEL III TRUSTEE	1 00	X						0	0	0
TODD M BLUEDORN TRUSTEE	1 00	X						0	0	0
GREGORY H BOYCE TRUSTEE	000 50	X						0	0	0
IQBAL SINGH BRAINCH TRUSTEE	1 80	X						0	0	0
STEPHEN F BRAUER TRUSTEE - VICE CHAIR	1 00	X		X				0	0	0
ANDREW M BURSKY TRUSTEE	1 00	X						0	0	0
HOWARD N CAYNE TRUSTEE	1 06	X						0	0	0
MAXINE CLARK TRUSTEE	1 43	X						0	0	0
DAVID P CONNOR TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CORINNA COTSEN TRUSTEE	1 00	X						0	0	0
GEORGE W COUCH III TRUSTEE	1 00	X						0	0	0
JOHN F DAINS TRUSTEE	1 00	X						0	0	0
WILLIAM H DANFORTH TRUSTEE	1 00	X						0	0	0
ARNOLD W DONALD TRUSTEE	1 00	X						0	0	0
JOHN P DUBINSKY TRUSTEE	1 00	X						0	0	0
LEE FIXEL TRUSTEE	000 50	X						0	0	0
SAM FOX TRUSTEE	000 50	X						0	0	0
ROBERT W FRICK TRUSTEE	000 50	X						0	0	0
HUGH GRANT TRUSTEE	000 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID V HABIF JR TRUSTEE	1 00	X						0	0	0
ROBERT E HERNREICH TRUSTEE	000 50	X						0	0	0
PRISCILLA L HILL-ARDOIN TRUSTEE	000 50	X						0	0	0
THOMAS J HILLMAN TRUSTEE	1 00	X						0	0	0
LOUIS G HUTT JR TRUSTEE	000 50	X						0	0	0
JAY JACOBS TRUSTEE	000 50	X						0	0	0
EUGENE S KAHN TRUSTEE	1 00	X						0	0	0
DAVID W KEMPER TRUSTEE - VICE CHAIR	1 00	X		X				0	0	0
JERALD L KENT TRUSTEE	1 00	X						0	0	0
STEVEN F LEER TRUSTEE	000 50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN H LIPSTEIN TRUSTEE	1 00	X						0	0	0
SANFORD C LOEWENTHEIL TRUSTEE	1 00	X						0	0	0
WILLIAM J MARSHALL TRUSTEE	000 50	X						0	0	0
RICHARD P MATTIONE TRUSTEE	1 00	X						0	0	0
JOHN F MCDONNELL TRUSTEE	1 45	X						0	0	0
W PATRICK MCGINNIS TRUSTEE	000 50	X						0	0	0
DENNIS A MUILENBURG TRUSTEE	000 50	X						0	0	0
ROBERT L MULLENGER TRUSTEE	1 62	X						0	0	0
RALPH J NAGEL TRUSTEE	000 50	X						0	0	0
ANDREW E NEWMAN TRUSTEE	1 36	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN C NICKERSON TRUSTEE	1 00	X						0	0	0
JAMES V O'DONNELL TRUSTEE	1 26	X						0	0	0
GEORGE PAZ TRUSTEE	000 50	X						0	0	0
MICHAEL POWELL TRUSTEE	1 00	X						0	0	0
SCOTT RUDOLPH TRUSTEE	000 50	X						0	0	0
RAKESH SACHDEV TRUSTEE	000 50	X						0	0	0
CRAIG D SCHNUCK TRUSTEE - CHAIR	1 82	X		X				0	0	0
HARRY J SEIGLE TRUSTEE	1 00	X						0	0	0
DIANE M SULLIVAN TRUSTEE	000 50	X						0	0	0
GARY M SUMERS TRUSTEE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANDREW C TAYLOR TRUSTEE	000 50	X						0	0	0
BARBARA SCHAPS THOMAS TRUSTEE	1 00	X						0	0	0
JACK E THOMAS TRUSTEE	000 50	X						0	0	0
LAWRENCE E THOMAS TRUSTEE	1 37	X						0	0	0
RONALD L THOMPSON TRUSTEE	000 50	X						0	0	0
ANN RUBENSTEIN TISCH TRUSTEE	000 50	X						0	0	0
ERIC B UPIN TRUSTEE	1 00	X						0	0	0
MARY ANN VAN LOKEREN TRUSTEE	000 50	X						0	0	0
WILLIAM P WIESMANN TRUSTEE	000 50	X						0	0	0
JOYCE F WOOD BUCHHEIT TRUSTEE	1 13	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JOHN A BERG VC FOR ADMISSIONS	40 00			X				320,842	0	41,857
DAVID T BLASINGAME EXEC VC FOR ALUMNI DEVELOPMENT	40 00			X				604,307	0	41,857
MICHAEL R CANNON EXEC VC GENERAL COUNSEL	40 00			X				582,810	0	41,857
LEGAIL CHANDLER VC FOR HUMAN RESOURSES	40 00			X				235,537	0	38,592
IDA H EARLY SECRETARY TO THE BD OF TRUSTEES	40 00			X				146,315	0	28,402
BARBARA A FEINER - RESIGNED 1231201 VC FOR FINANCE	40 00			X				379,654	0	41,857
JILL D FRIEDMAN VC FOR PUBLIC AFFAIRS	40 00			X				270,456	0	30,332
JOHN L GOHSMAN JR VC CHIEF INFORM OFFICER	40 00			X				297,571	0	18,172
AMY B KWESKIN - APPOINTED 112016 VC FOR FINANCE	40 00 2 00			X				217,737	0	37,200
JENNIFER K LODGE VC FOR RESEARCH	40 00			X				305,378	0	69,932

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
PAMELA S LOKKEN VC FOR GOVT COMM RELATIONS	40 00			X				279,431	0	41,857
DAVID H PERLMUTTER EXEC VC FOR MEDICAL AFFAIRS	40 00			X				369,504	0	943
LARRY J SHAPIRO EXEC VC FOR MEDICAL AFFAIRS	40 00 3 00			X				1,000,603	0	41,857
H HOLDEN THORP JR PROVOST/EXEC VC FOR ACAD AFFAIRS	40 00			X				641,028	0	79,932
KIMBERLY G WALKER CHIEF INVESTMENT OFFICER	40 00			X				1,000,435	0	54,932
HENRY S WEBBER EXEC VC FOR ADMINISTRATION	40 00 5 00			X				452,967	0	80,732
JAMES WERTSCH VC FOR INTERNATIONAL AFFAIRS	40 00			X				307,079	0	41,857
LORI S WHITE VC FOR STUDENT AFFAIRS	40 00			X				290,747	0	5,658
MARK S WRIGHTON CHANCELLOR	40 00			X				1,168,048	0	405,560
JOHN C CLOHISY DB VIEHMANN DIST PROF OF ORTHO SURG	40 00					X		1,605,806	0	41,857

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RALPH G DACEY DEPT HEAD NEUROSURGERY	40 00					X		1,179,008	0	41,857
TIMOTHY EBERLEIN CHAIR OF SURGERY/DIR SITEMAN CANCER CTR	40 00					X		1,170,420	0	41,857
RYAN M NUNLEY ASSOC PROF OF ORTHO SURGERY	40 00					X		1,264,922	0	30,732
RICK W WRIGHT JEROME J GILDEN MD DIST PROF OF ORTHO SURG	40 00					X		1,141,784	0	41,857
EVAN D KHARASCH FORMER VC FOR RESEARCH	40 00						X	332,128	0	41,857
EDWARD S MACIAS FORMER PROVOST/EVC FOR ACAD AFFAIRS	40 00						X	420,445	0	41,857
SHARON STAHL - retired 6302015 FORMER VC FOR STUDENT AFFAIRS	40 00						X	151,314	0	18,945

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☑ A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See**section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . . _____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

Cat No 11285F

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	660,227,830	654,013,656	646,699,419	637,042,644	702,970,970	3,300,954,519
2 Tax revenues levied for the organization'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	660,227,830	654,013,656	646,699,419	637,042,644	702,970,970	3,300,954,519
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						3,300,954,519

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	660,227,830	654,013,656	646,699,419	637,042,644	702,970,970	3,300,954,519
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	36,458,933	44,543,901	49,178,832	35,977,487	12,157,656	178,316,809
9 Net income from unrelated business activities, whether or not the business is regularly carried on	786,464			2,305,926	2,857,907	5,950,297
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	32,637,696	25,917,134	26,197,065	23,804,403	28,318,994	136,875,292
11 **Total support.** Add lines 7 through 10						3,622,096,917

12 Gross receipts from related activities, etc (see instructions) **12** 9,235,654,432

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) **14** 91 130 %

15 Public support percentage for 2014 Schedule A, Part II, line 14 **15** 90 340 %

16a **33 1/3% support test—2015.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support test—2014.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
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						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	0 %
16	Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	0 %
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
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*	1		
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)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
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*	3b		
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*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below*	4a		
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*	4b		
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*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) 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.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990)*	8		
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.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below*	10a		
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)*	10b		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	11c		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **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		

Section 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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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 in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard*	3		

Section 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 year **(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 government entity (see instructions).

2 Activities Test **Answer (a) and (b) below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **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		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		

3 Parent of Supported Organizations **Answer (a) and (b) below.**

a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	3b		

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

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

Section 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		

Section B - Minimum Asset Amount

			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**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 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount

				Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**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-functionally-integrated Type III supporting organization (see instructions) ☐

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

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

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

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).

Facts And Circumstances Test

Part II Section B Line 10 col a - Other income includes gross income from fundraising events, not including contributions, of 16,504 and income from other educational services of 32,621,192

Return Reference	Explanation
Part II Section B Line 10 col b	- Other income includes gross income from fundraising events, not including contributions, of 37,750 and income from other educational services of 25,879,384
Part II Section B Line 10 col c	- Other income includes gross income from fundraising events, not including contributions, of 50,376 and income from other educational services of 26,146,690
Part II Section B Line 10 col d	- Other income includes gross income from fundraising events, not including contributions, of 12,825 and income from other educational services of 23,791,578
Part II Section B Line 10 col e	- Other income includes gross income from fundraising events, not including contributions, of 36,647 and income from other educational services of 28,282,347

SCHEDULE C (Form 990 or 990-EZ)

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.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

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

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

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

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

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

Name of the organization	Employer identification number
WASHINGTON UNIVERSITY	43-0653611

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	204,272	
c	Total lobbying expenditures (add lines 1a and 1b)	204,272	
d	Other exempt purpose expenditures	2,894,620,617	
e	Total exempt purpose expenditures (add lines 1c and 1d)	2,894,824,889	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000	
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, enter -0-		
i	Subtract line 1f from line 1c If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	349,693	218,368	197,433	204,272	969,766
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a) Yes	(a) No	(b) Amount
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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

			Yes	No
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?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

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

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).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

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

Return Reference	Explanation

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	2	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)	532,423	
4	Aggregate value at end of year	-526,518	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☑ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☑ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	1
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	1
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

4 Number of states where property subject to conservation easement is located ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☑ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

a ☑ Public exhibition

b ☑ Scholarly research

c ☑ Preservation for future generations

d ☑ Loan or exchange programs

e ☑ Other EDUCATION

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,889,229,811	6,719,449,083	5,749,296,905	5,303,196,330	5,348,871,370
b Contributions	264,592,352	263,183,503	301,804,319	145,054,752	142,884,159
c Net investment earnings, gains, and losses	-190,069,399	328,106,791	915,277,287	633,447,457	64,264,653
d Grants or scholarships	32,850,645	31,635,004	29,688,243	25,420,873	25,159,436
e Other expenditures for facilities and programs	352,169,079	344,899,215	178,112,148	273,772,541	193,789,352
f Administrative expenses	52,007,267	44,975,347	39,129,037	33,208,220	33,875,064
g End of year balance	6,526,725,773	6,889,229,811	6,719,449,083	5,749,296,905	5,303,196,330

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

a Board designated or quasi-endowment ▶ 36 000 %

b Permanent endowment ▶ 25 000 %

c Temporarily restricted endowment ▶ 39 000 %

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

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

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)		No
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d) Book value
1a Land		137,906,042		137,906,042
b Buildings		3,781,460,742	1,666,713,901	2,114,746,841
c Leasehold improvements				
d Equipment		493,997,067	468,161,612	25,835,455
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				2,278,488,338

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other (A) Financial derivatives and other financial products		
(B) Closely-held equity interests		
(C) Hedged strategies	1,695,168,000	F
(D) Private Equity	1,368,001,000	F
(E) Real assets and other	572,496,000	F
(F) Investment in affiliates	41,990,000	F
(G) Other investments	159,361,000	F
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	3,837,016,000	

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
Total. *(Column (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
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
Federal income taxes	
Federal income taxes	
Liability under securities lending transactions	43,457,934
Deposits and advances	17,197,364
Professional liability	79,107,172
Liabilities under split-interest agreements	38,356,784
Government supported student loans	45,565,059
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	223,684,313

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

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

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

1	Total revenue, gains, and other support per audited financial statements			1	2,415,691,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-492,954,293		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	-222,337,484		
e	Add lines **2a** through **2d**			2e	-715,291,777
3	Subtract line **2e** from line **1**			3	3,130,982,777
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	54,377,779		
b	Other (Describe in Part XIII)	4b	-36,873		
c	Add lines **4a** and **4b**			4c	54,340,906
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	3,185,323,683

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

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

1	Total expenses and losses per audited financial statements			1	2,719,577,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	36,873		
e	Add lines **2a** through **2d**			2e	36,873
3	Subtract line **2e** from line **1**			3	2,719,540,127
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	54,377,779		
b	Other (Describe in Part XIII)	4b	220,793,764		
c	Add lines **4a** and **4b**			4c	275,171,543
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	2,994,711,670

Part XIII Supplemental Information

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

Return Reference	Explanation
II 9	- The reported easement was assigned for ten dollars to the university concurrent with acquisition of the property to which it applies As such, it is not reported separately in the universitys revenue and expense statement, balance sheet or the footnotes to the financial statements

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation
III 4	- The Mildred Lane Kemper Art Museum dates back to 1881 with the founding of the St Louis School and Museum of Fine Arts at Washington University Its collection was formed in large part by acquiring significant works by artists of the time, a legacy that continues today Now one of the finest university collections in the United States, the Museum contains strong holdings of 19th-, 20th-, and 21st-century European and American paintings, sculptures, prints, installations, and photographs The collection also includes some Egyptian and Greek antiquities and more than 100 Old Master prints
III 4	- contd The Museum is committed to preserving and developing its art collection and continuing its legacy of collecting significant art of the time, providing excellence in art historical scholarship, education, and exhibition, inspiring social and intellectual inquiry into the connection between art and contemporary life and engaging audiences on campus, in the local community, across the nation and worldwide In addition to the Museum, the Libraries Department of Special Collections archives rare book collections, works of art, literary works, archival collections, historical treasures and artifacts These collections are protected and preserved for public exhibition, education research and the furtherance of public service
V 4	- Washington Universitys endowment is an important financial resource that provides a meaningful source of revenue for university programs and operations This enduring support for purposes as designated by donors, including scholarships, professorships, research efforts, libraries and capital projects, enables the university to attract and retain outstanding faculty and students
X 2	- The university is exempt from federal income taxes under Section 501c3 of the Internal Revenue Code except to the extent the university has unrelated business income or consolidated for-profit affiliates incur taxes There was no significant provision for income taxes in the current year The university has no uncertain tax positions that result in material unrecognized tax expense/benefits
XI 2d	- Scholarships netted against tuition fees 221,218,000 and changes and reclassification of split-interest agreements 1,119,484
XI 4b	- Fundraising event expenses netted against fundraising event income 36,873
XII 2d	- Fundraising event expenses netted against fundraising event income 36,873
XII 4b	- Scholarships netted against tuition fees 221,218,000 and changes in uncollectible pledges reserve 424,236

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

Part II **Supplemental Information.**

Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)

Return Reference	Explanation
6a	- Washington University received funds from the Department of Education for the administration of campus-based student financial aid programs, including Perkin Loans, Pell Grants, SEOG Grants and federal w ork study funding The State of Missouri provides similar funding

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in region	**(d)** Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total					2,814,649,849
b Total from continuation sheets to Part I	17	181			17,539,298
c **Totals** (add lines 3a and 3b)	17	181			2,832,189,147

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities . . . . . ▶ 56

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of non-cash assistance	**(g)** Description of non-cash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☑ Yes ☐ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☑ Yes ☐ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☑ Yes ☐ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☑ Yes ☐ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☑ 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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I Line 2	- The University maintains a formal policy defining its procedures for monitoring the use of sponsored funds by subrecipients who are performing a portion of a sponsored project externally awarded to the University The policy provides guidance to ensure that subrecipients conduct their portions of a sponsored project in compliance with laws, regulations and terms and conditions of awards and subawards and that reimbursed costs incurred by subrecipients are allowed The policy addresses the roles and responsibilities of the central offices and academic departments of the University and describes the monitoring procedures for each area The full text of the Universitys Subrecipent Policy is available online at the following web address http//financialservices wustl edu/w fin-topic/sponsored-projects-accounting/

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I Line 2	- The grants reported in Part III are primarily scholarships to students The use of schol arships is controlled by applying such amounts directly against balances owed by the stude nt for tuition, fees and other educational expenses

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part II Line 2	- The University does not keep records that identify the charitable status of subgrantees Most subgrantees are universities, hospitals and research institutions

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part III Line A11	Column e - Scholarships are awarded by crediting directly to the students account with the University

Additional Data

Software ID: 15000290
Software Version: 15.3.0.0
EIN: 43-0653611
Name: WASHINGTON UNIVERSITY

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Alumni Events		300
East Asia and the Pacific			Alumni Events		265,773
Europe Including Iceland and Greenland			Alumni Events		38,487

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Alumni Events		5,629
South America			Alumni Events		695
Central America and the Caribbean			Grantmaking		78,913

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Grantmaking		1,325,289
Europe Including Iceland and Greenland			Grantmaking		4,112,704
Middle East and North Africa			Grantmaking		223,078

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Grantmaking		140,586
South America			Grantmaking		217,502
South Asia			Grantmaking		257,968

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Grantmaking		1,436,562
Central America and the Caribbean			Investments		2,586,990,645
Europe Including Iceland and Greenland			Investments		144,703,917

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Investments		45,105,919
Sub-Saharan Africa			Investments		29,745,882
East Asia and the Pacific			Investment Activities		17,952

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe Including Iceland and Greenland			Investment Activities		43,038
North America			Investment Activities		3,724
Russia and the Neighboring States			Investment Activities		1,109

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Investment Activities		2,963
Central America and the Caribbean		3	Program Services	Education	181,773
East Asia and the Pacific	3	86	Program Services	Education	3,101,457

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe Including Iceland and Greenland	10	63	Program Services	Education	7,580,867
Middle East and North Africa			Program Services	Education	306,613
North America			Program Services	Education	101,693

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Russia and the Neighboring States			Program Services	Education	2,733
South America	2	19	Program Services	Education	546,391
South Asia	1	9	Program Services	Education	441,998

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa	1	1	Program Services	Education	376,307
Antarctica			Program Services	Research	1,605
Central America and the Caribbean			Program Services	Research	161,846

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Research	515,496
Europe Including Iceland and Greenland			Program Services	Research	1,495,091
Middle East and North Africa			Program Services	Research	62,992

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program Services	Research	318,668
Russia and the Neighboring States			Program Services	Research	81,035
South America			Program Services	Research	102,453

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Program Services	Research	165,713
Sub-Saharan Africa			Program Services	Research	323,568
Central America and the Caribbean			Program Services	Seminars, Conferences	52,171

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Seminars, Conferences	385,033
Europe Including Iceland and Greenland			Program Services	Seminars, Conferences	667,963
Middle East and North Africa			Program Services	Seminars, Conferences	43,321

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program Services	Seminars, Conferences	298,881
Russia and the Neighboring States			Program Services	Seminars, Conferences	1,576
South America			Program Services	Seminars, Conferences	47,636

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Program Services	Seminars, Conferences	96,128
Sub-Saharan Africa			Program Services	Seminars, Conferences	9,504

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research	157,518	Check			
		East Asia and the Pacific	Research	21,708	Check			
		East Asia and the Pacific	Research	45,443	Check			
		East Asia and the Pacific	Research	5,562	Check			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research	42,253	Wire Transfer			
		East Asia and the Pacific	Research	27,940	Wire Transfer			
		East Asia and the Pacific	Research	93,053	Wire Transfer			
		East Asia and the Pacific	Research	101,010	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	Research	15,621	Wire Transfer			
		Europe Including Iceland and Greenland	Research	95,220	Check			
		Europe Including Iceland and Greenland	Research	145,816	Check			
		Europe Including Iceland and Greenland	Research	33,102	Check			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe Including Iceland and Greenland	Research	24,340	Check			
		Europe Including Iceland and Greenland	Research	81,179	Check			
		Europe Including Iceland and Greenland	Research	64,742	Wire Transfer			
		Europe Including Iceland and Greenland	Research	47,628	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe Including Iceland and Greenland	Research	5,625	Wire Transfer			
		Europe Including Iceland and Greenland	Research	47,092	Wire Transfer			
		Europe Including Iceland and Greenland	Research	38,799	Wire Transfer			
		Europe Including Iceland and Greenland	Research	17,481	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe Including Iceland and Greenland	Research	39,084	Wire Transfer			
		Europe Including Iceland and Greenland	Research	122,114	Wire Transfer			
		Europe Including Iceland and Greenland	Research	20,496	Wire Transfer			
		Europe Including Iceland and Greenland	Research	31,586	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe Including Iceland and Greenland	Research	15,205	Wire Transfer			
		Europe Including Iceland and Greenland	Research	61,085	Wire Transfer			
		Europe Including Iceland and Greenland	Research	32,856	Wire Transfer			
		Europe Including Iceland and Greenland	Research	8,499	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe Including Iceland and Greenland	Research	10,965	Wire Transfer			
		Europe Including Iceland and Greenland	Research	9,575	Wire Transfer			
		Europe Including Iceland and Greenland	Research	111,783	Wire Transfer			
		Europe Including Iceland and Greenland	Research	100,000	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe Including Iceland and Greenland	Research	20,223	Wire Transfer			
		Europe Including Iceland and Greenland	Research	78,068	Wire Transfer			
		Middle East and North Africa	Research	11,565	Wire Transfer			
		Middle East and North Africa	Research	83,043	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	Research	24,664	Check			
		North America	Research	17,577	Check			
		North America	Research	6,511	Check			
		North America	Research	30,812	Check			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	Research	24,048	Check			
		North America	Research	30,323	Wire Transfer			
		South America	Research	42,636	Wire Transfer			
		South Asia	Research	53,067	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Research	13,824	Wire Transfer			
		South Asia	Research	82,608	Wire Transfer			
		South Asia	Research	44,044	Wire Transfer			
		Sub-Saharan Africa	Research	14,408	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research	130,570	Wire Transfer			
		Sub-Saharan Africa	Research	15,000	Wire Transfer			
		Sub-Saharan Africa	Research	542,500	Wire Transfer			
		Sub-Saharan Africa	Research	55,961	Wire Transfer			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Research	168,250	Wire Transfer			
		Sub-Saharan Africa	Research	227,196	Wire Transfer			
		Sub-Saharan Africa	Research	38,500	Wire Transfer			
		Sub-Saharan Africa	Research	136,122	Wire Transfer			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Scholarships	Central America and the Caribbean	4	78,913	See Part V			
Scholarships	East Asia and the Pacific	33	653,366	See Part V			
Scholarships	Europe Including Iceland and Greenland	188	2,836,002	See Part V			
Scholarships	Middle East and North Africa	6	127,113	See Part V			
Scholarships	South America	17	171,426	See Part V			
Scholarships	South Asia	2	20,762	See Part V			
Scholarships	Sub-Saharan Africa	5	101,898	See Part V			
Fellowships	East Asia and the Pacific	38	24,181	Check			
Fellowships	Europe Including Iceland and Greenland	2	6,960	Check			
Fellowships	South America	3	334	Check			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Fellowships	South Asia	2	6,000	Check			
Fellowships	Sub-Saharan Africa	1	1,800	Check			
Prizes and Awards	East Asia and the Pacific	70	132,517	Check			
Prizes and Awards	Europe Including Iceland and Greenland	6	3,987	Check			
Prizes and Awards	Middle East and North Africa	2	1,357	Check			
Prizes and Awards	North America	5	1,840	Check			
Prizes and Awards	South America	4	3,106	Check			
Prizes and Awards	South Asia	10	32,575	Check			
Prizes and Awards	Sub-Saharan Africa	1	357	Check			

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a

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

▶ **Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www irs gov/form990***

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

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

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations

b ☐ Internet and email solicitations

c ☐ Phone solicitations

d ☐ In-person solicitations

e ☐ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

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

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 GOLF SCRAMBLE (event type)	(b) Event #2 WOMENS TENNIS (event type)	(c) Other events 1 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	115,150	12,487	9,452	137,089
	2 Less Contributions	87,955	12,487		100,442
	3 Gross income (line 1 minus line 2)	27,195		9,452	36,647
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	22,530	400		22,930
	7 Food and beverages	1,254	403	525	2,182
	8 Entertainment				
	9 Other direct expenses	7,382		4,379	11,761
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				36,873
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-226

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

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

b If "No," explain _____

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

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 252

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 35

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) SCHOLARSHIPS	8285	217,640,423			
(2) FELLOWSHIPS	3091	56,440,786			
(3) PRIZES AND AWARDS	1064	869,030			
(4) RESEARCH GRANTS	2	17,140			

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

Return Reference	Explanation
Part I Line 2	- The University maintains a formal policy defining its procedures for monitoring the use of sponsored funds by subrecipients who are performing a portion of a sponsored project externally awarded to the University The policy provides guidance to ensure that subrecipients conduct their portions of a sponsored project in compliance with laws, regulations and terms and conditions of awards and subawards and that reimbursed costs incurred by subrecipients are allowed The policy addresses the roles and responsibilities of the central offices and academic departments of the University and describes the monitoring procedures for each area The full text of the Universitys Subrecipent Policy is available online at the following web address http//financialservices wustl edu/wfin-topic/sponsored-projects-accounting/
Part III Line 1	- The grants reported in Part III line 1 are scholarships to students The use of scholarships is controlled by applying such amounts directly against balances owed by the student for tuition, fees and other qualifying educational expenses
Part III Line 2	- The grants reported in Part III line 2 are fellowships awarded to students who may use them to pay qualified educational expenses or to support their living expenses while completing their course of study The use of fellowship awards is not monitored by the University however an award is discontinued if the recipient student discontinues his/her course of study
Part III Line 3	- Prizes and awards reported in Part III Line 3 are awarded to students or other individuals for, among other reasons, academic excellence, writing competitions, design competitions, research and service to the local community and other students

Additional Data

Software ID: 15000290
Software Version: 15.3.0.0
EIN: 43-0653611
Name: WASHINGTON UNIVERSITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
A MILLION STARS INC 12 MARYLAND PLAZA ST LOUIS,MO 63108	20-4768985	501C3	10,000				Sponsorship
A STEP AHEAD FOUNDATION PO BOX 41601 MEMPHIS,TN 381741601	45-1828684	501C3	24,053				Research
ALBERT EINSTEIN COLLEGE MEDICINE INC 1300 MORRIS PARK AVENUE BRONX,NY 104611900	47-2209056	501C3	488,253				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ALBERT EINSTEIN HEALTHCARE NETWORK 5501 OLD YORK RD KORMAN RM 100 PHILADELPHIA,PA 19141	23-2664784	501C3	6,550				Research
ALLIANCE FOR CLINCIAL TRIALS IN ONCOLO 230 WEST MONROE STREET CHICAGO,IL 606064901	02-0464400	501C3	10,740				Research
ALPHA OMEGA ALPHA PO BOX 7322 SAN FRANCISCO,CA 941209847	36-6082049	501C3	5,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AMERICAN CANCER SOCIETY 4207 LINDELL BLVD ST LOUIS,MO 63108	74-1185665	501C3	6,000				Sponsorship
AMERICAN HEART ASSOCIATION INC 4643 LINDELL ST LOUIS,MO 63108	13-5613797	501C3	13,500				Sponsorship
APPLIED PARTICLE TECHNOLOGY LLC 911 WASHINGTON AVE SUITE 501 ST LOUIS,MO 63101	47-1547700		50,000				Prizes and Awards

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARIZONA STATE UNIVERSITY 1001 S MCALLISTER AVE TEMPE,AZ 85287	86-0196696	STATE OF AZ	200,260				Research
ARTS & EDUCATION COUNCIL OF GREATER ST 3547 OLIVE ST LOUIS,MO 631031014	43-0790672	501C3	12,500				Sponsorship
ASSOCIATION FOR RESEARCH IN PERSONALIT 13 OAK DRIVE HAMILTON,NY 13346	20-1890534	501C3	10,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ATLANTA WOMENS MEDICAL CENTER INC 235 WEST WIEUCA ROAD ATLANTA,GA 30342	23-2060652		5,600				Research
BARNES JEWISH HOSPITAL 4353 CLAYTON AVE CAB ROOM 143 ST LOUIS,MO 63110	43-0653255	501C3	45,301				Research
BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA HOUSTON,TX 77030	74-1613878	501C3	162,120				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BAYLOR UNIVERSITY ONE BEAR PLACE 97360 WACO,TX 767987360	74-1159753	501C3	24,104				Research
BE THE MATCH FOUNDATION 3001 BROADWAY ST NE MINNEAPOLIS,MN 554131762	41-1704734	501C3	7,500				Sponsorship
BENAROYA RESEARCH INSTITIUTE AT VIRGIN FLOW CYTOMETRY CORE LABORATORY SEATTLE,WA 981012795	91-0653422	501C3	40,322				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETH ISRAEL MEDICAL CENTER 330 BROOKLINE AVENUE BR264 BOSTON,MA 02215	13-5564934	501C3	69,008				Research
BIOSTL 7515 FORSYTH BLVD ST LOUIS,MO 63105	45-2137574	501C3	2,000,000				Sponsorship
BJC HEALTHCARE 4444 FOREST PARK BLVD ST LOUIS,MO 63108	43-0654870	501C3	30,068				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOSTON UNIVERSITY 72 E CONCORD ST B-606 BOSTON,MA 02118	04-2103547	501C3	747,566				Research
BRIGHAM AND WOMENS HOSPITAL 75 FRANCIS STREET BOSTON,MA 021156110	04-2312909	501C3	246,098				Research
BROAD INSTITUTE INC 7 CAMBRIDGE CENTER CAMBRIDGE,MA 02142	26-3428781	501C3	2,632,037				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVE WASHINGTON,DC 20036	53-0196577	501C3	59,420				Research
BROWNRIDGE PEDIATRICS PC 637 DUNN RD STE 144 HAZELWOOD,MO 63042	43-1597560		15,500				Research
BUTLER HOSPITAL 345 BLACKSTONE BLVD PROVIDENCE,RI 029064829	05-0258812	501C3	74,696				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CANCER CARE FOUNDATION INC 1 CLARKSON LAKE COURT CHESTERFIELD,MO 63017	45-2775463	501C3	8,150				Sponsorship
CANCER SUPPORT COMMUNITY OF GREATER ST 1058 OLD DES PERES ROAD SAINT LOUIS,MO 63131	43-1587517	501C3	7,000				Sponsorship
CASA DE SALUD 3200 CHOUTEAU AVE ST LOUIS,MO 63103	27-0732049	501C3	27,500				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVENUE CLEVELAND CLINIC,OH 441064919	34-1018992	501C3	653,155				Research
CENTER FOR HEALTH & LEARNING 28 VERNON STREET BRATTLEBORO,VT 05301	03-0351024	501C3	10,000				Research
CENTER FOR RESEARCH TECHNOLOGY AND ENT 4678 WORLD PARKWAY CIRCLE ST LOUIS,MO 63134	30-0082817	501C3	15,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CENTER OF CREATIVE ARTS 524 TRINITY AVENUE ST LOUIS,MO 63130	43-1395056	501C3		6,200	FMV	Temporary use of space	Sponsorship
CHILDRENS HOSPITAL BOSTON CORPORATION 333 LONGWOOD AVENUE BOSTON,MA 021155711	04-2774441	501C3	43,704				Research
CHILDRENS HOSPITAL LOS ANGELES 4650 SUNSET BLVD MS 97 LOS ANGELES,CA 90027	95-1690977	501C3	39,672				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDRENS HOSPITAL OF ORANGE COUNTY 455 SOUTH MAIN STREET ORANGE,CA 92868	95-2321786	501C3	29,520				Research
CHILDRENS HOSPITAL OF PHILADELPHIA 3615 CIVIC CENTER BLVD PHILADELPHIA,PA 191044318	23-1352166	501C3	223,191				Research
CHILDRENS MERCY HOSPITAL & CLINIC 2401 GILLHAM ROAD KANSAS CITY,MO 64108	44-0605373	501C3	101,986				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDRENS NATIONAL MEDICAL CENTER CRI 111 MICHIGAN AVE NW WASHINGTON, DC 200102916	52-1654453	501C3	13,938				Research
CHRISTIANA CARE HEALTH SYSTEMS 4755 OGLETOWN STANTON ROAD NEWARK, DE 19713	52-1479538	501C3	5,750				Research
CINCINNATI CHILDRENS HOSPITAL 3333 BURNET AVE ML 7029 CINCINNATI, OH 45229	31-0833936	501C3	558,641				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF ST LOUIS 1900 HAMPTON AVE ST LOUIS,MO 63139	43-6003231	GOVERNMENT	69,269				Research
CITY UNIVERSITY OF NEW YORK 205 E 42ND STREET NEW YORK,NY 100175706	13-1760098	501C3	168,999				Research
CIVIWIKI 4907 BUCKINGHAM CT APT 1S ST LOUIS,MO 63108	81-0917468	501C3	15,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLAREMONT GRADUATE UNIVERSITY 150 EAST TENTH STREET CLAREMONT,CA 917116160	95-1664100	501C3	76,585				Research
CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVE CLEVELAND,OH 44195	34-0714585	501C3	33,716				Research
COLORADO STATE UNIVERSITY CAMPUS BOX 2002 FORT COLLINS,CO 805232002	38-2526538	STATE OF CO	56,331				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COLUMBIA UNIVERSITY 2950 BROADWAY ATTN SAL NEW YORK,NY 10027	13-5598093	501C3	342,815				Research
COLUMBIA UNIVERSITY 622 WEST 168TH STREET NEW YORK,NY 100323072	13-6031092	501C3	11,041				Research
CONSTRUCTION FORUM STL 101 SOUTH HANLEY ROAD SUITE 800 ST LOUIS,MO 63105	46-4035566		5,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CURATORS OF THE UNIVERSITY OF MISSOURI PO BOX 808008 KANSAS CITY, MO 641808008	43-6003859	501C3	308,049				Research
DARTMOUTH COLLEGE 11 ROPE FERRY ROAD HANOVER, NH 03755	02-0222111	501C3	27,842				Research
DESALES COMMUNITY HOUSING 2759 RUSSELL BLVD ST LOUIS, MO 63130	43-1103762	501C3	11,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
DOORWAYS 4385 MARYLAND AVENUE ST LOUIS,MO 63108	43-1484279	501C3	5,000				Sponsorship
DOWNTOWN ST LOUIS FOUNDATION INC 720 OLIVE STREET SUITE 450 ST LOUIS,MO 63101	43-1289304	501C3	54,000				Sponsorship
DUKE UNIVERSITY 2424 ERWIN ROAD DURHAM,NC 27705	56-0532129	501C3	1,080,082				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DWIGHT DAVIS TENNIS CLUB INC 5620 GRAND DRIVE SAINT LOUIS,MO 63112	43-6056087	501C3	15,000				Sponsorship
EASTERN VIRGINIA MEDICAL SCHOOL 855 W BRAMBLETON AVENUE NORFOLK,VA 235101005	54-6055378	501C3	12,956				Research
ECONOMIC COUNCIL OF ST LOUIS COUNTY 121 S MERAMEC AVE SUITE 1111 ST LOUIS,MO 63105	43-1361364	501C3	5,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELECTRIC POWER RESEARCH INSTITUTE INC 3420 HILLVIEW AVENUE PALO ALTO,CA 94304	23-7175375	501C3	23,126				Research
EMORY UNIVERSITY 1599 CLIFTON RD 1599-001-1AD ATLANTA,GA 30322	58-0566256	501C3	293,166				Research
ENTREPRENEUR STARTUP BUSINESS DEVELOPM DBA ARCH GRANTS ST LOUIS,MO 63101	27-4875945	501C3	5,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
EXECUTIVE FUNCTION MANAGEMENT INC 1201 6TH AVENUE NORTH HUMBOLDT,IA 50548	42-1521693		17,500				Sponsorship
EYE CONSULTANTS OF ATLANTA 3225 CUMBERLAND BLVD ATLANTA,GA 303395971	58-1129515		12,032				Research
FAMILY CARE HEALTH CENTERS 401 HOLLY HILLS AVE ST LOUIS,MO 631112410	23-7076112	501C3	93,265				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FASHION FOOTWEAR CHARITABLE FOUNDATION 232 MADISON AVENUE SUITE 1407 NEW YORK,NY 10016	13-4112482	501C3	50,000				Sponsorship
FOOD OUTREACH INC 3117 OLIVE ST ST LOUIS,MO 63103	43-1492878	501C3	6,000				Sponsorship
FOREST PARK FOREVER INC 5595 GRAND DRIVE IN FOREST PARK ST LOUIS,MO 63112	43-1427062	501C3	7,625				Sponsorship

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FOUNDATION FOR BARNES JEWISH HOSPITAL 600 SOUTH TAYLOR SUITE 120 ST LOUIS, MO 63110	43-1648435	501C3	17,500				Sponsorship
FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 1100 FAIRVIEW AVE SEATTLE, WA 981091024	23-7156071	501C3	65,375				Research
FRIENDS OF KIDS WITH CANCER 530 MARYVILLE CENTER DR LL5 ST LOUIS, MO 63141	43-1614563	501C3	5,000				Sponsorship

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GATEWAY MENS CHORUS 3547 OLIVE ST LOUIS,MO 63103	43-1499328	501C3		5,852	FMV	Temporary use of space	Sponsorship
GENERAL HOSPITAL CORP DBA MASSACHUSETT PO BOX 3829 BOSTON,MA 022413829	04-2697983	501C3	2,023,764				Research
GEOCHEMICAL SOCIETY 5241 BROAD BRANCH RD RM G05 WASHINGTON,DC 200151305	52-0783490	501C3	14,682				Sponsorship

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GEORGE WASHINGTON UNIVERSITY 2300 I STREET NW ROOM 725 WASHINGTON, DC 20037	53-0196584	501C3	55,659				Research
GLOBALHACK INC 911 WASHINGTON AVE SUITE 657 ST LOUIS, MO 63101	46-3747215	501C3	10,000				Sponsorship
GREAT LAKES EYE INSTITUTE PC 2393 SCHUST RD SAGINAW, MI 486031334	38-2334055		5,298				Research

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H LEE MOFFITT CANCER CENTER 12902 MAGNOLIA DR TAMPA,FL 336129497	59-2451713	501C3	9,252				Research
HARBOR UCLA RESEARCH AND EDUCATION INS 1124 WEST CARSON STREET TORRANCE,CA 905022006	95-2138184	501C3	374,036				Research
HARVARD UNIVERSITY PO BOX 4999 BOSTON,MA 022124999	04-2103580	501C3	8,572				Research

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HARVEY MUDD COLLEGE 301 PLATT BOULEVARD CLAREMONT,CA 91711	95-1911219	501C3	39,606				Research
HEBREW REHABILITATION CENTER FOR AGED 1200 CENTRE STREET BOSTON,MA 021311097	04-2104298	501C3	53,318				Research
HENRY FORD HEALTH SYSTEM 2799 WEST GRAND BLVD 542 DETROIT,MI 48202	38-1357020	501C3	5,645				Research

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HENRY M JACKSON FOUNDATION 6720 A ROCKLEDGE DR STE 100 BETHESDA,MD 20817	52-1317896	501C3	141,574				Research
HILLEL FOUNDATION 6300 FORSYTH BLVD ST LOUIS,MO 63105	19-4386553		33,141				Sponsorship
HOLY NAME HOSPITAL 718 TEANECK ROAD TEANECK,NJ 076664281	22-1487322	501C3	11,600				Research

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HONEYWELL INTERNATIONAL INC 1985 DOUGLAS DRIVE GOLDEN VALLEY,MN 55422	22-2640650		16,748				Research
HOPE HAPPENS 101 S HANLEY ROAD SUITE 1320 ST LOUIS,MO 63105	20-2523211	501C3	6,250				Sponsorship
HOSPITAL FOR SPECIAL SURGERY 535 EAST 70TH STREET NEW YORK,NY 10021	13-6714749	501C3	252,750				Research

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HUBBARD BROADCASTING INC 11647 OLIVE BLVD ST LOUIS,MO 63141	41-1427680		5,688				Sponsorship
HUMAN RIGHTS CAMPAIGN 6218 MARDEL AVENUE ST LOUIS,MO 63109	52-1243457	501C4	5,000				Sponsorship
IDEA LABS 20 S SARAH STREET ST LOUIS,MO 63108	46-5658453	501C3	89,023				Sponsorship

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IDEALTAP LLC 7238 PERSHING AVENUE UNIT B UNIVERSITY CITY,MO 63130	47-4248952		25,000				Prizes and Awards
IHC HEALTH SERVICES INC PO BOX 577000 MURRAY,UT 841577000	94-2854057	501C3	21,990				Research
INDIANA UNIVERSITY 1133 EAST SEVENTH STREET BLOOMINGTON,IN 474055401	35-6001673	501C3	272,518				Research

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INSITE MENTOR CAPITAL 25 EAST 63RD STREET SUITE 6 NEW YORK,NY 10065	05-0539236	501C3	25,000				Sponsorship
INVITRO SELECT 4320 FOREST PARK AVENUE ST LOUIS,MO 63108	81-1453522		15,000				Prizes and Awards
INVIVOSCIENCES 510 CHARMANY DR STE 265 MADISON,WI 537191235	86-1051370		184,120				Research

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J DAVID GLADSTONE INSTITUTES 1650 OWENS ST SAN FRANCISCO,CA 941582261	23-7203666	501C3	86,627				Research
JACKSON LABORATORY 610 MAIN STREET BAR HARBOR,ME 046091500	01-0211513	501C3	14,354				Research
JOHNS HOPKINS UNIVERSITY 1101 EAST 33RD E STREET BALTIMORE,MD 212051832	52-0595110	501C3	825,077				Research

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JOHNSON PEDIATRICS PC 6973 OLIVE BLVD ST LOUIS,MO 63130	43-1890673		7,020				Research
JUVENILE DIABETES RESEARCH FOUNDATION 432 PARK AVE SOUTH NEW YORK,NY 101570706	23-1907729	501C3	5,000				Sponsorship
KENT STATE UNIVERSITY 134 CARTWRIGHT HALL KENT,OH 442420001	31-6402079	501C3	26,314				Research

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LEGACY HEALTH 1225 NE SECOND AVE PO BOX 3950 PORTLAND,OR 972083950	93-0386823	501C3	8,685				Research
LEUKEMIA AND LYMPHOMA SOCIETY 77 WEST PORT PLAZA ST LOUIS,MO 63146	13-5644916	501C3	10,000				Sponsorship
LOUISIANA STATE UNIVERSITY 6400 PERKINS PENNINGTON BIOMED BATON ROUGE,LA 708084124	72-6000848	501C3	298,194				Research

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LOYOLA UNIVERSITY AT CHICAGO 2160 S FIRST AVENUE MAYWOOD,IL 601533328	36-1408475	501C3	73,844				Research
LUNG CANCER CONNECTION INC 1919 DEWITT RIDGE DRIVE CHESTERFIELD,MO 63017	38-3794112	501C3	5,000				Sponsorship
LURIE CHILDRENS HOSPITAL OF CHICAGO 225 E CHICAGO AVE CHICAGO,IL 606112605	36-3357006	501C3	101,191				Research

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MACROGENICS INC 1500 EAST GUDE DRIVE ROCKVILLE,MD 20850	06-1591613		159,965				Research
MARCH OF DIMES POB 932852 ATLANTA,GA 31193	13-1846366	501C3	25,000				Sponsorship
MARFAN FOUNDATION INC 22 MANHASSET AVENUE PORT WASHINGTON,NY 11050	52-1265361	501C3	10,000				Sponsorship

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MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE 46 3160 CAMBRIDGE,MA 02139	04-2103594	501C3	31,199				Research
MAVUNO 20 SOUTH SARAH STREET ST LOUIS,MO 63108	46-5627434	501C3	5,000				Prizes and Awards
MAYFAIRE EYE ASSOCIATES 6921 FRANKFORD AVE SUITE D PHILADELPHIA,PA 191351613	23-3032921		28,065				Research

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MAYO CLINIC PO BOX 4006 ROCHESTER,MN 55905	41-6011702	501C3	629,178				Research
MAYO FOUNDATION 4500 SAN PABLO ROAD JACKSONVILLE,FL 322241865	59-3337028	501C3	216,587				Research
MEDICAL COLLEGE OF WISCONSIN PO BOX 1997 MILWAUKEE,WI 532011997	39-0806261	501C3	106,843				Research

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MEMORIAL SLOAN-KETTERING CANCER CENTER 1257 YORK AVE BOX 509 NEW YORK, NY 10065	13-1924236	501C3	20,139				Research
MEMPHIS HEALTH CENTER INC 360 EAST EH CRUMP BLVD MEMPHIS, TN 381265310	62-0818892	501C3	23,343				Research
MICHIGAN STATE UNIVERSITY 301 ADMINISTRATION BUILDING EAST LANSING, MI 48824	38-6005984	501C3	11,684				Research

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MISSOURI ENERGY INITIATIVE 238 EAST HIGH STREET JEFFERSON CITY, MO 65101	26-4827677	501C3	5,000				Sponsorship
MISSOURI PHYSICIANS HEALTH PROGRAM 680 CRAIG ROAD STE 308 ST LOUIS, MO 63141	43-1572458	501C3	10,000				Sponsorship
MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE LEVY PLACE NEW YORK CITY, NY 10029	13-6171197	501C3	571,208				Research

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NATIONAL CONGRESS OF AMERICAN INDIANS 1516 P STREET NW WASHINGTON,DC 20005	53-6017907	501C3	83,997				Research
NATIONAL COUNCIL ON ALCOHOLISM 9355 OLIVE ST LOUIS,MO 63132	43-0827852	501C3	48,497				Research
NATIONAL HUMANITIES CENTER P O BOX 12256 RESEARCH TRIANGLE,NC 277092256	59-1735367	501C3	5,000				Sponsorship

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NATIONAL REHABILITATION HOSPITAL 102 IRVING STREET NW WASHINGTON, DC 200102949	52-1369749	501C3	12,685				Research
NATIONWIDE CHILDRENS HOSPITAL INC COLUMBUS CHILDRENS HOSPITAL COLUMBUS, OH 432057696	31-4379441	501C3	26,073				Research
NEW ENGLAND MEDICAL CENTER 800 WASHINGTON ST BOX 7611 BOSTON, MA 02111	04-3400617	501C3	131,079				Research

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NEW YORK SOCIETY FOR THE RELIEF OF THE 535 EAST 70TH STREET NEW YORK,NY 10021	13-1624135	501C3	5,748				Research
NEW YORK STATE ASSOC COUNTY HEALTH ONE UNITED WAY ALBANY,NY 122055555	14-1747742	501C3	10,000				Research
NEW YORK UNIVERSITY MEDICAL CENTER 550 FIRST AVENUE NEW YORK,NY 10016	13-5562309	501C3	136,240				Research

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NORTH CAROLINA STATE UNIVERSITY BOX 7621 RALEIGH,NC 27695	56-6000756	STATE OF NC	503,652				Research
NORTH DAKOTA STATE UNIVERSITY SPONSORED PROGRAMS ADMINISTRATI FARGO,ND 581086050	45-6002439	STATE OF ND	30,410				Research
NORTHEASTERN STATE UNIVERSITY 2800 VENTURE DRIVE NORMAN,OK 730698216	73-6017987	STATE OF OK	36,566				Research

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NORTHWESTERN UNIVERSITY 2220 CAMPUS DRIVE EVANSTON,IL 60208	36-2167817	501C3	211,645				Research
NRG ONCOLOGY FOUNDATION INC 1600 JFK BLVD SUITE 1020 PHILADELPHIA,PA 19103	90-0912747	501C3	102,797				Research
NURSES FOR NEWBORNS FOUNDATION 7259 LANSDOWNE ST LOUIS,MO 63119	43-1601329	501C3	10,499				Research

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OHIO STATE UNIVERSITY 484 W 12TH AVE COLUMBIA,OH 43210	31-6025986	501C1	1,004,097				Research
OPHTHALMIC CONSULTANTS OF CLEVELAND 1611 SOUTH GREEN RD STE 306A SOUTH EUCLID,OH 441214100	34-1783241		10,402				Research
OREGON HEALTH & SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK ROAD PORTLAND,OR 97239	93-1176109	501C3	135,577				Research

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OREGON HEALTH AND SCIENCE UNIVERSITY 20000 NW WALKER AVENUE BEAVERTON,OR 97006	04-5408239	STATE OF OR	457,811				Research
ORTHOPAEDIC RESEARCH AND EDUCATION FOU 9400 W HIGGINS ROAD STE 215 ROSEMONT,IL 60018	36-6009467	501c3	5,000				Sponsorship
PACIFIC GRADUATE SCHOOL OF PSYCHOLOGY 1791 ARASTRADERO ROAD PALO ALTO,CA 943041337	94-2340692	501C3	152,569				Research

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PALO ALTO INSTITUTE FOR RESEARCH AND E 3801 MIRANDA AVENUE PALO ALTO,CA 94304	77-0207331	501C3	185,335				Research
PENNSYLVANIA STATE UNIVERSITY 115 HENNING BUILDING UNIVERSITY PARK,PA 16802	24-6000376	501C3	440,016				Research
PERRY INITIATIVE 130 ACADEMY ST SPENCER RM 126 NEWARK,DE 19716	27-3728166	501C3	6,800				Sponsorship

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PIPELINE INC P O BOX 30096 KANSAS CITY,MO 64112	26-4399870	501C3	27,250				Sponsorship
PLACES FOR PEOPLE INC 4130 LINDELL BLVD ST LOUIS,MO 63108	23-7433924	501C3	27,673				Research
PLANNED PARENTHOOD OF THE ST LOUIS REG 4251 FOREST PARK AV ST LOUIS,MO 63108	43-0652666	501C3	19,580				Research

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PRINCETON UNIVERSITY 4 NEW SOUTH BLDG BOX 36 PRINCETON,NJ 08544	21-0634501	501C3	103,624				Research
PRO ARC DIAGNOSTICS 4058 BOTANICAL AVENUE ST LOUIS,MO 63110	47-4884157		5,000				Prizes and Awards
PROJECT COPE ONE METROPOLITAN SQUARE SUITE 1300 ST LOUIS,MO 63102	43-1416762	501C3	5,000				Sponsorship

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PROJECT PEANUT BUTTER 7435 FLORA AVE ST LOUIS,MO 63143	59-3785405	501C3	15,000				Research
PULITZER CENTER ON CRISIS REPORTING 1779 MASSACHUSETTS AVE NW SUITE 615 WASHINGTON,DC 20036	27-0458242	501C3	7,500				Sponsorship
RAINBOW PEDIATRICS INC 1224 GRAHAM ROAD STE 3009 FLORISSANT,MO 63031	43-1788391		13,060				Research

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REGENTS OF THE UNIVERISTY OF CALIFORNI 101 THE CITY DRIVE SOUTH ORANGE,CA 92868	95-2226406	501C3	237,291				Research
REGENTS OF THE UNIVERSITY OF CALIFORNI 9500 GILMAN DRIVE LA JOLLA,CA 920930008	95-6006144	501C3	2,306,345				Research
REGENTS OF THE UNIVERSITY OF CALIFORNI 9510 UNIVERSITY OF CALIFORNIA SANTA BARBARA,CA 931069510	95-6006145	501C3	193,464				Research

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REGENTS OF THE UNIVERSITY OF MINNESOTA 222 21ST AVENUE SOUTH MINNEAPOLIS,MN 554550439	41-6007513	501C3	910,026				Research
REGENTS OF UNIVERSITY OF CALIFORNIA DA 2795 2ND STREET STE 400 DAVIS,CA 95618	94-6036494	501C3	23,750				Research
REGENTS OF UNIVERSITY OF CALIFORNIA LO 11000 KINROSS AVENUE LOS ANGELES,CA 900951406	95-4372298	STATE OF CA	183,170				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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REGENTS OF UNIVERSITY OF MICHIGAN 3003 SOUTH STATE STREET ANN ARBOR,MI 481090340	38-6066309	STATE OF MI	861,036				Research
REGIONAL UNION CONSTRUCTION CENTER PO BOX 771091 ST LOUIS,MO 63177	20-5160448	501C3	20,000				Sponsorship
RESEARCH AMERICA INC 99 CANAL CENTER PLAZA SUITE 250 ALEXANDRIA,VA 22314	52-1609875	501C3	7,500				Sponsorship

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RESEARCH FOUNDATION OF SUNY W5510 MELVILLE LIBRARY STONY BROOK,NY 117943362	14-1368361	501C3	268,091				Research
RESEARCH INSTITUTE AT NATIONWIDE CHILD 700 CHILDRENS DR RM WA1300 COLUMBUS,OH 43205	31-6056230	501C3	19,465				Research
RESEARCH TRIANGLE INSTITUTE 3040 CORNWALLIS ROAD RESEARCH TR PARK,NC 277092194	56-0686338	501C3	100,185				Research

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RHO FEDERAL SYSTEMS DIVISION INC 6330 QUADRANGLE DRIVE CHAPEL HILL,NC 275177813	56-1927659		21,501				Research
RHODE ISLAND HOSPITAL 593 EDDY STREET PROVIDENCE,RI 02903	05-0258954	501C3	7,800				Research
RIVERBEND HEAD START & FAMILY SERVICES PO BOX 250 ALTON,IL 620020250	37-0681548	501C3	13,766				Research

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ROBERT H JACKSON MEMORIAL CENTER INC 305 EAST FOURTH STR BOX 879 JAMESTOWN,NY 14701	16-1605121	501C3	11,000				Sponsorship
RUSH UNIVERSITY 1653 W CONGRESS PKWY CHICAGO,IL 60612	36-2174823	501C3	29,244				Research
RUTGERS STATE UNIVERSITY OF NEW JERSEY 145 BEVIER RD BUSINESS OFFICE PISCATAWAY,NJ 08854	22-6001086	501C3	251,814				Research

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RUTGERS UNIVERSITY SCHOOL OF BUSINESS CAMDEN,NJ 08102	22-2425855	501C3	40,597				Research
SAINT ELIZABETH REGIONAL MEDICAL CENTE 555 SOUTH 70TH STREET LINCOLN,NE 68510	47-0379836	501C3	5,250				Research
SAINT LOUIS FASHION FUND PO BOX 16551 ST LOUIS,MO 63105	37-1760557	501C3	5,000				Sponsorship

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SALUS UNIVERSITY 8360 OLD YORK ROAD ELKINS PARK,PA 19027	23-1413680	501C3	11,235				Research
SANFORD BURNHAM MEDICAL RESEARCH INSTI 6400 SANGER RD ORLANDO,FL 328277400	51-0197108	501C3	165,038				Research
SEATTLE CHILDRENS HOSPITAL 2001 EIGHTH AVENUE SEATTLE,WA 981212615	91-0564748	501C3	55,494				Research

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SHAKESPEARE FESTIVAL ST LOUIS 462 N TAYLOR SUITE 202 ST LOUIS,MO 63108	43-1815139	501C3	10,000				Sponsorship
SICKLE CELL ASSOCIATION PO BOX 2751 FLORISSANT,MO 630322751	36-4713585	501C3	10,000				Research
SIEMENS MEDICAL SYSTEMS INC 810 INNOVATION DRIVE KNOXVILLE,TN 379322571	22-2417778		26,831				Research

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SOCIETY FOR ACADEMIC EMERGENCY MEDICIN 1111 E TOUHY SUITE 540 DES PLAINES,IL 60018	20-4866532	501C3	5,000				Sponsorship
SOCIETY FOR MEDICAL DECISION MAKING 390 AMWELL ROAD STE 402 HILLSBOROUGH,NJ 08844	31-0992960	501C3	5,000				Sponsorship
SOCIETY FOR SOCIAL WORK AND RESEARCH 11240 WAPLES MILL ROAD STE 200 FAIRFAX,VA 22030	13-3768131	501C3	10,500				Sponsorship

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ST JOSEPH HOSPITAL 1100 WEST STEWART DRIVE ORANGE,CA 92868	95-1643359	501C3	8,500				Research
ST JUDE CHILDRENS RESEARCH HOSPITAL IN 262 DANNY THOMAS PLACE MS 742 MEMPHIS,TN 38105	62-0646012	501C3	44,787				Research
ST LOUIS AMERICAN FOUNDATION 4144 LINDELL BOULEVARD ST LOUIS,MO 63108	43-1686282	501C3	5,800				Sponsorship

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ST LOUIS BLACK REPERTORY COMPANY 4709 DELMAR ST LOUIS,MO 63108	43-1220180	501C3	50,000	51,020	FMV	Temporary use of space	Sponsorship
ST LOUIS BUSINESS JOURNAL CORP 815 OLIVE ST STE 100 ST LOUIS,MO 63101	13-4029609		12,000				Sponsorship
ST LOUIS CENTER FOR INTERNATIONAL RELA 121 SOUTH MERAMEC ST LOUIS,MO 63105	43-1491605	501C3	11,250				Sponsorship

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ST LOUIS COUNTY 7900 FORSYTH BLVD CLAYTON,MO 63105	43-6003242	GOVERNMENT	6,486				Research
ST LOUIS INTEGRATED HEALTH NETWORK 1520 MARKET STREET SUITE 4034 ST LOUIS,MO 63103	20-3288245	501C3	60,373				Research
ST LOUIS METROMARKET 4322 WYOMING STREET ST LOUIS,MO 63116	35-2496871	501C3	58,000				Prizes and Awards

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ST LOUIS OVARIAN CANCER AWARENESS 12015 MANCHESTER RD STE 130 SAINT LOUIS,MO 63131	05-0523962	501C3	5,000				Sponsorship
ST LOUIS PEDIATRIC PRACTITIONERS INC 3737 N KINGSHIGHWAY ST LOUIS,MO 631151645	43-0966995		14,160				Research
ST LOUIS REGIONAL CHAMBER P O BOX 958148 ST LOUIS,MO 631958148	43-0975222	501C6	15,000				Sponsorship

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ST LOUIS SCIENCE CENTER FOUNDATION 5050 OAKLAND AVE ST LOUIS, MO 63110	43-0984610		7,500				Sponsorship
ST LOUIS SYMPHONY 560 TRINITY AVENUE AT DELMAR ST LOUIS, MO 63130	43-0666769	501C3	29,000				Sponsorship
ST LOUIS UNIVERSITY CAROLINE BLDG RM C305 ST LOUIS, MO 63104	43-0654872	501C3	1,063,827				Research

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ST VINCENT MEDICAL GROUP INC 8333 NAAB ROAD SUITE 400 INDIANAPOLIS,IN 46260	27-2039417	501C3	6,550				Research
STANFORD UNIVERSITY 651 SERRA ST SUITE 220 STANFORD,CA 94305	94-1156365	501C3	586,731				Research
STARKLOFF DISABILITY INSTITUTE 133 SOUTH 11TH STREET ST LOUIS,MO 63102	84-1616567	501C3	6,000				Sponsorship

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STATEN ISLAND UNIVERSITY HOSPITAL 475 SEAVIEW AVENUE STATEN ISLAND,NY 10305	11-2868878	501C3	5,050				Research
SUSAN G KOMEN FOUNDATION INC PO BOX 66971 DEPT KO ST LOUIS,MO 63166	75-1835298	501C3	50,000				Sponsorship
TASK FORCE FOR GLOBAL HEALTH 325 SWANTON WAY DECATUR,GA 30030	58-1698648	501C3	24,600				Research

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TEMPLE UNIVERSITY 3400 NORTH BROAD STREET PHILADELPHIA,PA 19140	23-1365971	501C3	20,500				Research
TEXAS A&M UNIVERSITY SYSTEM 1470 WILLIAM D FITCH PKWY COLLEGE STATION,TX 778434645	74-1974733	STATE OF TX	84,515				Research
THOMAS JEFFERSON UNIVERSITY 111 SOUTH 11TH STREET PHILADELPHIA,PA 191075097	23-1352651	501C3	7,163				Research

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THRIVE NETWORK INC 525 MARKET STREET SAN FRANCISCO,CA 94104	46-1148366		34,563				Research
TOLEDO HOSPITAL JOBST VASCULAR CENTER 2142 N COVE TOLEDO,OH 43606	34-4428256	501C3	14,000				Research
TOTS THRU TEENS INC 12255 DEPAUL DRIVE BRIDGETON,MO 630442588	43-1894300		5,280				Research

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TRUMAN MEDICAL CENTER 2301 HOLMES STREET KANSAS CITY,MO 641082640	44-0661018	501C3	32,417				Research
TRUSTEES OF PURDUE UNIVERSITY 24025 NETWORK PLACE CHICAGO,IL 606731240	35-6002041	501C3	323,189				Research
TRUSTEES UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST PHILADELPHIA,PA 19104	23-1352685	501C3	41,528				Research

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TULANE UNIVERSITY 1440 CANAL STREET SL18 NEW ORLEANS, LA 701122699	72-0423889	501C3	633,123				Research
UNIVERSITY OF AKRON RESEARCH SERVICES AKRON, OH 443252102	01-0725371	STATE OF OH	21,459				Research
UNIVERSITY OF ALABAMA BIRMINGHAM 1665 UNIVERSITY BLVD RPHB327 BIRMINGHAM, AL 35294	63-6005396	501C3	740,062				Research

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UNIVERSITY OF ARIZONA 4717 EAST FORT LOWELL RD TUCSON,AZ 857121201	74-2652689	STATE OF AR	188,661				Research
UNIVERSITY OF ARKANSAS FOR MED SCIENCE 4301 WEST MARKHAM LITTLE ROCK,AR 722057199	71-6046242	STATE OF AR	20,592				Research
UNIVERSITY OF CALIFORNIA BERKELEY B202 STANLEY HALL BERKELEY,CA 947203220	94-6002123	501C3	207,403				Research

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UNIVERSITY OF CALIFORNIA DAVIS 1850 RESEARCH PARK DR STE 300 DAVIS,CA 95618	65-4684995	501C3	177,214				Research
UNIVERSITY OF CALIFORNIA LOS ANGELES 607 C YOUNG EAST - 4359 YOUNG LOS ANGELES,CA 900951569	95-6006143	501C3	20,526				Research
UNIVERSITY OF CALIFORNIA RIVERSIDE UNIVERSITY OFFICE BLDG 200 RIVERSIDE,CA 92521	94-6602123	501C3	387,081				Research

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UNIVERSITY OF CALIFORNIA SAN FRANCISCO MT ZION CANCER CENTER BOX 1330 SAN FRANCISCO,CA 94143	94-6036493	501C3	137,239				Research
UNIVERSITY OF CHICAGO 11030 S LANGLEY AVE CHICAGO,IL 60628	36-2177139	501C3	267,493				Research
UNIVERSITY OF COLORADO DENVER 12700 E 19TH AVENUE AURORA,CO 800452560	84-6000555	501C3	168,363				Research

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UNIVERSITY OF DELAWARE 210 HULLIHEN HALL NEWARK,DE 19716	51-6000297	501C3	136,031				Research
UNIVERSITY OF FLORIDA PO BOX 115500 GAINESVILLE,FL 326115500	59-6002052	STATE OF FL	106,008				Research
UNIVERSITY OF ILLINOIS E102 MSB MC937 835 S WOLCOTT CHICAGO,IL 60612	37-6000511	501C3	828,335				Research

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UNIVERSITY OF IOWA B5 JESSUP HALL IOWA CITY,IA 52242	42-6004813	STATE OF IL	553,511				Research
UNIVERSITY OF KANSAS CENTER FOR RESEAR 2385 IRVING HILL ROAD LAWRENCE,KS 660457568	48-0680117	501C3	25,000				Research
UNIVERSITY OF KENTUCKY 1401 UNIVERSITY DR UNIV KENTCKY LEXINGTON,KY 405460236	61-6001218	501C3	98,596				Research

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UNIVERSITY OF MARYLAND BALTIMORE 655 W BALTIMORE BRESSLER BLDG BALTIMORE,MD 21201	52-1125663	501C3	40,063				Research
UNIVERSITY OF MASSACHUSETTS 364 PLANTATION ST WORCESTER,MA 016052324	04-3167352	501C1	191,146				Research
UNIVERSITY OF MIAMI 4600 RICKENBACKER CAUSEWAY MIAMI,FL 33149	59-0624458	501C3	294,976				Research

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UNIVERSITY OF MICHIGAN 1000 VICTORS WAY SUITE 1A ANN ARBOR,MI 481082744	38-6006309	501C3	111,688				Research
UNIVERSITY OF MISSISSIPPI MEDICAL CENT 200 NORTH STATE ST ROOM U020 JACKSON,MS 392164505	64-6008520	501C3	54,658				Research
UNIVERSITY OF NEBRASKA 985818 NEBRASKA MEDICAL CTR OMAHA,NE 681985818	47-4049123	STATE OF NE	65,671				Research

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UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE,NM 871310001	85-6000642	501C3	175,553				Research
UNIVERSITY OF NORTH CAROLINA 120 MASON FARM RD 5081 GMB CHAPEL HILL,NC 27599	56-6001393	501C3	718,830				Research
UNIVERSITY OF NOTRE DAME 940 GRACE HALL NOTRE DAME,IN 465565708	35-0868188	501C3	36,860				Research

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UNIVERSITY OF OREGON 3181 SW SAM JACKSON PARK ROAD PORTLAND,OR 972393098	93-6001786	STATE OF OR	797,161				Research
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT STREET PHILADELPHIA,PA 191046205	23-2743077		688,300				Research
UNIVERSITY OF PITTSBURGH 130 DE SOTO A660 CRABTREE HALL PITTSBURGH,PA 15261	25-0965591	501C3	884,143				Research

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UNIVERSITY OF ROCHESTER 252 ELMWOOD AVENUE ROCHESTER,NY 14642	16-0743209	501C3	119,910				Research
UNIVERSITY OF SOUTHERN CALIFORNIA 837 DOWNEY WAY ROOM 330 LOS ANGELES,CA 900891147	95-1642394	501C3	79,775				Research
UNIVERSITY OF TENNESSEE 62 SOUTH DUNLAP SUITE 300 MEMPHIS,TN 381630001	62-6001636	501C3	7,980				Research

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UNIVERSITY OF TEXAS AT AUSTIN 1 UNIVERSITY STA A6700 FRANCISC AUSTIN,TX 787120183	74-6000203	501C3	168,391				Research
UNIVERSITY OF TEXAS DALLAS PO BOX 830688 RICHARDSON,TX 750830688	05-0559514	501C3	65,180				Research
UNIVERSITY OF TEXAS HEALTH SCIENCE CEN 1200 HERMAN PRESSLER DR HOUSTON,TX 770303900	74-1761309	501C3	284,738				Research

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UNIVERSITY OF TEXAS MD ANDERSON CANCER 7435 FANNIN STREET HOUSTON,TX 77054	74-6001118	501C3	569,829				Research
UNIVERSITY OF TEXAS MEDICAL BRANCH 301 UNIVERSITY BLVD GALVESTON,TX 77555	74-6000949	STATE OF TX	10,506				Research
UNIVERSITY OF TEXAS SOUTHWESTERN 5323 HARRY HINES BLVD DALLAS,TX 753909141	75-6042147	501C3	1,698,270				Research

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UNIVERSITY OF TEXAS SOUTHWESTERN PO BOX 841765 DALLAS,TX 752841765	75-6002868	STATE OF TX	157,187				Research
UNIVERSITY OF TX SOUTHWESTERN MED 5323 HARRY HINES BLVD DALLAS,TX 753907208	20-4101612	501C3	46,611				Research
UNIVERSITY OF UTAH 15 N MEDICAL DR EAST RM 4100 SALT LAKE CITY,UT 84112	87-6000525	501C3	811,466				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNIVERSITY OF VIRGINIA PO BOX 400202 CHARLOTTESVILLE,VA 229044202	54-6001796	501C3	63,484				Research
UNIVERSITY OF WASHINGTON BOX 359472 SEATTLE,WA 981959472	91-6001537	501C3	1,130,370				Research
UNIVERSITY OF WISCONSIN 433 BABCOCK DRIVE MADISON,WI 537061544	39-6006492	STATE OF WI	55,612				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WISCONSIN OFFICE OF SPONSORED PROGRAMS MILWAUKEE,WI 53201	39-1805963	501C3	103,894				Research
US DEPARTMENT OF AGRICULTURE 10300 BALTIMORE AVENUE BELTSVILLE,MD 20705	41-0696271	GOVERNMENT	121,232				Research
US DEPARTMENT OF AGRICULTURE 1815 NORTH UNIVERSITY STREET PEORIA,IL 616043999	72-0564834	GOVERNMENT	29,989				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
USGBC ST LOUIS REGIONAL CHAPTER 4651 SHAW BLVD ST LOUIS,MO 63110	30-0001663	501C3	5,000				Sponsorship
VANDERBILT UNIVERSITY 2220 PIERCE AVE NASHVILLE,TN 37232	62-0476822	501C3	326,904				Research
VIRGINIA COMMONWEALTH UNIVERSITY PO BOX 980224 RICHMOND,VA 232980568	54-6001758	STATE OF VA	196,332				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA TECH CONTINUING EDUCATION 300 TURNER ST NW SUITE 4200 BLACKSBURG,VA 24061	54-6001805		22,548				Research
WAKE FOREST UNIVERSITY HEALTH SCIENCES HT RESEARCH CTR MEDICAL CTR BLV WINSTON SALEM,NC 27157	22-3849199	501C3	62,835				Research
WASHINGTON STATE UNIVERSITY 1715 NE SOUTH FAIRWAY RD PULLMAN,WA 991647520	91-6001108	STATE OF WA	25,462				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON UNIVERSITY STUDENT MEDIA IN ONE BROOKINGS DRIVE WASHINGTON UNIV,MO 63130	43-1869208	501C3	85,118				Sponsorship
WASHINTON UNIVERSITY NEWMAN CENTER 6352 FORYSTH ST LOUIS,MO 63105	43-0679176	501C3	90,905				Sponsorship
WAYNE STATE UNIVERSITY 5057 WOODWARD 13TH FL DETROIT,MI 482024050	38-6028429	STATE OF MI	60,126				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEILL CORNELL MEDICAL COLLEGE 1300 YORK AVE NEW YORK,NY 10065	13-1623978		692,231				Research
WHOS WHO DIVERSITY IN COLOR LLC 4818 WASHINGTON AVENUE SUITE 103 ST LOUIS,MO 63108	46-5467856		5,000				Sponsorship
WOMEN AND INFANTS HOSPITAL OF RHODE IS 350 DUNCAN DRIVE PROVIDENCE,RI 029067003	05-0258937	501C3	57,818				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOOTA LLC 172 SPYGLASS PARK LANE MONTGOMERY,TX 77316	81-2655943		20,000				Prizes and Awards
WYMAN CENTER INC 600 KIWANIS DRIVE EUREKA,MO 63025	43-0653263	501C3	12,800				Sponsorship
YALE UNIVERSITY SCHOOL OF MEDICINE PO BOX 208087 NEW HAVEN,CT 065208087	06-0646973	501C3	197,466				Research

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YESHIVA UNIVERSITY 1300 MORRIS PARK AVE VE 6B27 BRONX,NY 10461	13-1624225	501C3	24,858				Research
YOUNG MENS CHRISTIAN ASSOCIATION OF ST 1528 LOCUST STREET ST LOUIS,MO 63103	43-0653616	501C3	11,950				Sponsorship
YOUNG WOMENS CHRISTIAN ASSOCIATION 3820 WEST PINE BLVD ST LOUIS,MO 63108	43-0653618	501C3	5,000				Sponsorship

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YOUTH AND FAMILY CENTER 818 CASS AVENUE ST LOUIS, MO 631064505	43-0652663	501C3	8,854				Research
YOUTH IN NEED 1815 BOONES LICK ROAD ST CHARLES, MO 633012247	43-1033862	501C3	15,000				Research

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☑ First-class or charter travel ☑ Housing allowance or residence for personal use			
	☑ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☑ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		No
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	☑ Compensation committee ☑ Written employment contract			
	☐ Independent compensation consultant ☑ Compensation survey or study			
	☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**	Yes	
b	Any related organization?	**6b**		No
	If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**	Yes	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		No

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

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

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

(A) Name and Title	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

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

Return Reference	Explanation
Part I Line 1a 1b	- A Airfare upgrades or charter travel For all employees, the universitys travel policy provides reimbursement of standard commercial coach or equivalent airfare but does allow upgrade on flights in excess of five hours or for medical reasons Four members of executive management and one additional listed person were provided with airfare upgrades to first class in accordance with the universitys travel policy This benefit was not treated as taxable income B Travel for companions For all employees, the universitys travel policy provides reimbursement for incremental travel expenses of a spouse or other companion when there is a legitimate business purpose for their attendance and written authorization is obtained Three members of executive management were provided with travel for companions in accordance with the universitys travel policy This benefit was not treated as taxable income C Housing allowance or residence for personal use is subject to review and approval of the Board of Trustees or applicable committee thereof As a condition of his employment and as necessary for performance of his duties and the convenience of the university as his employer, the Chancellor is required to reside on campus in a university-owned residence This benefit is not treated as taxable income Five officers were provided housing allowances which were treated as taxable income D Health or Social club dues or initiation fees Five members of executive management and one additional listed person are reimbursed for the dues of a single social club Social club dues are paid for a limited number of members of executive management for the purpose of providing a venue conducive to the success of alumni and university business-related activities The decision to make these payments was approved by the Chancellor for senior executives and by the Chairman of the Board of Trustees for the Chancellor This benefit was not treated as taxable income E Personal services were made available in the form of housekeeping for the Chancellors residence, a university owned property, concurrent with employment As a condition of his employment and as necessary for performance of his duties and the convenience of the university as his employer, the Chancellor is required to reside on campus and housekeeping was included as part of the agreement
Part I Line 4b	- A David T Blasingame - university contribution to 457f plan of 50,000 B Michael R Cannon - university contribution to 457f plan of 60,000 C H Holden Thorp - university contribution to 457f plan of 50,000 D Henry S Webber - university contribution to 457f plan of 50,000 E Mark S Wrighton - accrued employer contribution of 323,466 under a defined benefit plan
Part I Line 6 7	- The universitys School of Medicine is organized into major Departments Each department has a faculty compensation plan that provides guidelines to the Chair of the Department for setting annual compensation of the individual faculty members Three of the five highest compensated employees listed in Part VII, Section A of the Form 990 are faculty in a department that had salaries determined under departmental guidelines that provide for base salaries that are fixed payments In these departments however, there are elements of compensation under the guidelines that are not fixed payments or determined by fixed formula The Chair of the Department determines, in full or in part, the amount of this element based on the employees performance Further, there is an element expressed as a percent of net surplus generated by the efforts of the employee The universitys Chief Investment Officer also receives a fixed payment based on the net earnings of an activity of the university See discussion of Part I, line 7 below for further information
Part I Line 7	- An incentive arrangement between the university and its Chief Investment Officer was amended and restated during fiscal year 2012 The agreement provides for three components of compensation two of which are based upon a fixed formula, and one of which is based on qualitative factors The level of the latter component is determined at the discretion of a governing board under authority assigned by the university Board of Trustees to oversee management of the universitys endowment
Part I Line 8	- Eleven of the officers listed in Part VII of the Form 990 received payments under initial employment agreements during fiscal year 2016 None were a disqualified person with respect to the university prior to entering into their employment agreements The employment agreements with these individuals provided for a substantial portion or all of the compensation reported in Form 990, Part VII All amounts, except for an amount paid under the incentive agreement with the CIO discussed above, are fixed payments and subject to the initial contract exception described in Regulation 53 4958-7a3
Part I Line 9	- The 2016 compensation payments referred to in line 8 above were subject to rebuttable presumption procedures described in Regulation section 53 4958-6c but the initial contracts under which they were paid were not
Part II Line 22 Column F	- Other reportable compensation for Timothy Eberlein includes a distribution of amounts under a supplemental retirement plan The amount was earned over an 8 year period commencing in 2006 and aggregated 111,255 57

Additional Data

Software ID: 15000290
Software Version: 15.3.0.0
EIN: 43-0653611
Name: WASHINGTON UNIVERSITY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JOHN A BERG VC FOR ADMISSIONS	(i) (ii)	300,743 -	-	20,099 -	30,475 -	11,382 -	362,699 -	-
1 DAVID T BLASINGAME EXEC VC FOR ALUMNI DEVELOPMENT	(i) (ii)	502,313 -	-	101,994 -	30,475 -	11,382 -	646,164 -	-
2 MICHAEL R CANNON EXEC VC GENERAL COUNSEL	(i) (ii)	501,274 -	-	81,536 -	30,475 -	11,382 -	624,667 -	-
3 LEGAIL CHANDLER VC FOR HUMAN RESOURSES	(i) (ii)	234,008 -	-	1,528 -	27,210 -	11,382 -	274,128 -	-
4 IDA H EARLY SECRETARY TO THE BD OF TRUSTEES	(i) (ii)	127,488 -	-	18,826 -	17,020 -	11,382 -	174,716 -	-
BARBARA A FEINER - 5 RESIGNED 1231201 VC FOR FINANCE	(i) (ii)	356,831 -	-	22,823 -	30,475 -	11,382 -	421,511 -	-
6 JILL D FRIEDMAN VC FOR PUBLIC AFFAIRS	(i) (ii)	269,839 -	-	617 -	18,550 -	11,782 -	300,788 -	-
7 JOHN L GOHSMAN JR VC CHIEF INFORM OFFICER	(i) (ii)	296,305 -	-	1,265 -	6,790 -	11,382 -	315,742 -	-
AMY B KWESKIN - 8 APPOINTED 112016 VC FOR FINANCE	(i) (ii)	217,255 -	-	482 -	25,818 -	11,382 -	254,937 -	-
9 JENNIFER K LODGE VC FOR RESEARCH	(i) (ii)	285,807 -	-	19,571 -	58,550 -	11,382 -	375,310 -	-
10 PAMELA S LOKKEN VC FOR GOVT COMM RELATIONS	(i) (ii)	260,252 -	-	19,179 -	30,475 -	11,382 -	321,288 -	-
11 DAVID H PERLMUTTER EXEC VC FOR MEDICAL AFFAIRS	(i) (ii)	79,720 -	286,000 -	3,785 -	-	943 -	370,448 -	-
12 LARRY J SHAPIRO EXEC VC FOR MEDICAL AFFAIRS	(i) (ii)	928,193 -	-	72,409 -	30,475 -	11,382 -	1,042,459 -	-
13 H HOLDEN THORP JR PROVOST/EXEC VC FOR ACAD AFFAIRS	(i) (ii)	597,441 -	-	43,586 -	68,550 -	11,382 -	720,959 -	-
14 KIMBERLY G WALKER CHIEF INVESTMENT OFFICER	(i) (ii)	568,790 -	410,729 -	20,915 -	43,550 -	11,382 -	1,055,366 -	-
15 HENRY S WEBBER EXEC VC FOR ADMINISTRATION	(i) (ii)	432,857 -	-	20,110 -	68,550 -	12,182 -	533,699 -	-
16 JAMES WERTSCH VC FOR INTERNATIONAL AFFAIRS	(i) (ii)	285,208 -	-	21,871 -	30,475 -	11,382 -	348,936 -	-
17 LORI S WHITE VC FOR STUDENT AFFAIRS	(i) (ii)	199,514 -	-	91,233 -	-	5,658 -	296,405 -	-
18 MARK S WRIGHTON CHANCELLOR	(i) (ii)	943,073 -	-	224,974 -	353,941 -	51,620 -	1,573,608 -	-
19 JOHN C CLOHISY DB VIEHMANN DIST PROF OF ORTHO SURG	(i) (ii)	708,191 -	877,856 -	19,760 -	30,475 -	11,382 -	1,647,664 -	-

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 RALPH G DACEY DEPT HEAD NEUROSURGERY	(I) (II)	1,145,395		33,613	30,475	11,382 -	1,220,865 -	
1 TIMOTHY EBERLEIN CHAIR OF SURGERY/DIR SITEMAN CANCER CTR	(I) (II)	1,033,830		136,590	30,475	11,382 -	1,212,277 -	78,306
2 RYAN M NUNLEY ASSOC PROF OF ORTHO SURGERY	(I) (II)	587,483	658,832	18,608	18,550	12,182 -	1,295,655 -	
3 RICK W WRIGHT JEROME J GILDEN MD DIST PROF OF ORTHO SURG	(I) (II)	725,798	396,192	19,794	30,475	11,382 -	1,183,641 -	
4 EVAN D KHARASCH FORMER VC FOR RESEARCH	(I) (II)	291,398	21,409	19,321	30,475	11,382 -	373,985 -	
5 EDWARD S MACIAS FORMER PROVOST/EVC FOR ACAD AFFAIRS	(I) (II)	396,895		23,550	30,475	11,382 -	462,302 -	
SHARON STAHL - retired **6** 6302015 FORMER VC FOR STUDENT AFFAIRS	(I) (II)	103,466		47,848	12,278	6,667 -	170,259 -	

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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" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	Health & Educational Facilities Authority	43-1178966	606901N93	02-05-2003	25,135,000	See Part VI - Bond A		X		X		X
B	Health & Educational Facilities Authority	43-1178966	6069015E2	11-05-2008	191,448,400	See Part VI - Bond B	X			X		X
C	Health & Educational Facilities Authority	43-1178966	6069016J0	11-10-2009	98,872,250	See Part VI - Bond C		X		X		X
D	Health & Educational Facilities Authority	43-1178966	60636AAS2	06-29-2011	127,122,717	See Part VI - Bond D		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased		44,000,000		
3	Total proceeds of issue	25,142,853	191,558,286	98,875,659	127,123,185
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds	726,998	5,744,637	2,196,994	402,784
6	Proceeds in refunding escrows				102,941,118
7	Issuance costs from proceeds	108,340	1,416,555	754,636	177,442
8	Credit enhancement from proceeds	23,500			
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	24,281,880	184,397,090	95,923,942	23,601,836
11	Other spent proceeds	2,135	5	86	5
12	Other unspent proceeds				
13	Year of substantial completion	2003	2010	2011	2012

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X	X	
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

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

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

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X			X
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X		X		X		
c	Are there any research agreements that may result in private business use of bond-financed property?		X	X		X			X
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?				X		X		
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 ▶	1 270 %		1 050 %		0 820 %		0 730 %	
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	1 270 %		1 050 %		0 820 %		0 730 %	
7	Does the bond issue meet the private security or payment test?		X		X		X		X
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X		X		X	

Part IV **Arbitrage**

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X		X		X
b	Exception to rebate?	X		X			X		X
c	No rebate due?		X		X	X		X	
	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?	X			X		X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b	Name of provider	Not Applicable		Not Applicable		Not Applicable		Not Applicable	
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV **Arbitrage** *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b	Name of provider	Not Applicable		Not Applicable		Not Applicable		Not Applicable	
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?		X		X		X		X
7	Has the organization established written procedures to monitor the requirements of section 148? . . .	X		X		X		X	

Part V **Procedures To Undertake Corrective Action**

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

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

Return Reference	Explanation
Part I Line Bond A	- Provide funds for new construction, expansion and renovation of garages and buildings including fixed equipment

Return Reference	Explanation
Part I Line Bond B	- Provide funds for the new construction and renovations of buildings including fixed equipment, upgrades to utility systems, and the purchase of a building

Return Reference	Explanation
Part I Line Bond C	- Provide funds for the new construction of buildings including fixed equipment and upgrades to utility systems

Return Reference	Explanation
Part I Line Bond D	- Series 2011A - Provide funds for the new construction o buildings including fixed equipment Series 2011B - provide funds to defease a portion of Series 1998A issued February 15,1998 and a portion of Series 2001B issued August 15, 2001

Return Reference	Explanation
Part II Line 3	- Total proceeds of issue includes investment earnings - Bond A - 7,853, Bond B - 109,886, Bond C - 3,408, Bond D - 468

Return Reference	Explanation
Part IV Line 2c	- Date rebate calculation was performed - Bond C - 11/01/2012, and Bond D - 11/15/2012

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 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.
▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Interested (1) person				X		396,271		No		No	Yes	
Total		▶ $				396,271						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) Student		2,500		Student financial aid
(2) Student		33,132		Student financial aid

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V Supplemental Information

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

Return Reference	Explanation

Additional Data

Software ID: 15000290
Software Version: 15.3.0.0
EIN: 43-0653611
Name: WASHINGTON UNIVERSITY

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Berg Christine	Spouse of officer John Berg	112,616	Employment		No
(2) Early Gerald	Spouse of officer Ida Early	336,070	Employment		No
(3) Early Rosalind	Daughter of officer Ida Early	63,173	Employment		No
(4) Field Denise	Spouse of officer Michael Cannon	85,901	Employment		No
(5) Gohsman Mary	Spouse of officer John Gohsman	74,737	Employment		No
(6) Kharasch Karen	Spouse of former officer Evan Kharasch	223,754	Employment		No
(7) Macias Julia	Daughter of former officer Edward Macias	80,303	Employment		No
(8) Rosen Elizabeth	Daughter of trustee Howard Cayne	58,039	Employment		No
(9) Sobel Andrew	Spouse of officer Pamela Lokken	223,221	Employment		No
(10) Stahl Philip	Spouse of former officer Sharon Stahl	123,125	Employment		No
(11) Enterprise Holdings Inc & Enterprise Fleet Mgmt	Trustee Andrew Taylor and family own more than 35 of Enterprise	1,100,000	Auto leasing, auto rentals, fleet mgmt		No
(12) Exegy Inc	Trustee James O Donnell owns more than 35 of Exegy	883,546	Receipt of technology royalties		No
(13) Schnuck Markets Inc	Trustee Craig Schnuck and family own more than 35 of the company	228,457	Purchase foodstuff, supplies, gift cards, et al		No

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*

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Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	17	509	Opinion of expert/appraisal
2 Art—Historical treasures	X	1		
3 Art—Fractional interests				
4 Books and publications	X		7,834	Fair market value
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	331	52,161,255	Quoted mkt price-date of gift
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests	X	4	8,446,026	Discounted value of amt rcvd
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	6	2,003	Donor estimate
19 Food inventory				
20 Drugs and medical supplies	X	6	14,680,479	Fair market value
21 Taxidermy				
22 Historical artifacts	X	1		
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Historical Documents)	X	2	2	No value provided
26 Other ▶ (Musical Instruments)	X	2	118,900	Opinion of expert/appraisal
27 Other ▶ (Equipment)	X	5	682,880	Opinion of expert/appraisal
28 Other ▶ (Medications)	X	1	3,035	Retail value

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement | 29 | 21

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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.

Return Reference	Explanation
Part I Line - ALL	- Column b - Amounts reported in column b of Part I are the number of contributions received
Part I Line 1	- Revenue was not reported on line 1 for art works that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received
Part I Line 2	- Revenue was not reported on line 2 for historical treasures that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received
Part I Line 18	- Revenue was not reported on line 18 for collectibles that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received
Part I Line 22	- Revenue was not reported on line 22 for historical artifacts that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Return Reference	Explanation
Form 990, Part I, Line 1	contd encompass most areas of scholarship and professional training, with interschool centers and institutes, libraries, computing facilities, athletic programs and undergraduate and graduate housing The University offers undergraduate and graduate degrees and sponsors interdisciplinary institutes and centers engaged principally in research and advanced training Many educational programs include one or more practicum or experiential learning components The School of Medicine WUSM is among the leading medical research institutions in the nation WUSM carries out its educational, research, and clinical programs through 20 departments, approximately 60 divisions, and 4 programs in allied health professions, and provides patient care as part of its educational and research programs WUSM provides emergency and non-emergency medical care to all patients in its community, including those who are underinsured and non-insured as well as those who have adequate insurance coverage or the ability to pay for such care

Return Reference	Explanation
Form 990, Part I, Line 6	Volunteers support and benefit the organization in a wide variety of activities, programs, and services, including service as Trustees or advisors who receive no compensation for their service on various University Councils The total count provided is an estimate based on surveying departmental administrators

Return Reference	Explanation
Form 990, Part III, Line 1	Washington Universitys mission is to discover and disseminate knowledge, and protect the freedom of inquiry through research, teaching and learning Washington University creates an environment to encourage and support an ethos of wide-ranging exploration Washington Universitys faculty and staff strive to enhance the lives and livelihoods of students, the people of the greater St Louis community, the country, and the world Our goals are to welcome students, faculty, and staff from all backgrounds to create an inclusive community that is welcoming, nurturing, and intellectually rigorous to foster excellence in our teaching, research, scholarship, and service to prepare students with attitudes, skills, and habits of lifelong learning and leadership thereby enabling them to be productive members of a global society and to be an institution that excels by its accomplishments in our home community, St Louis, as well as in the nation and the world To this end we intend to judge ourselves by the most exacting standards to attract people of great ability from diverse backgrounds to encourage faculty and students to be bold, independent, and creative thinkers to provide an exemplary, respectful, and responsive environment for living, teaching, learning and working for present and future generations and to focus on meaningful measurable results for all of our endeavors

Return Reference	Explanation
Form 990, Part III, Line 4d	ACADEMIC SUPPORT Represents primarily administrative activities that directly support program services but do not qualify as management and general costs Significant components include the central and school libraries, animal care, environmental compliance, the Deans offices, school information systems,

Return Reference	Explanation
Form 990, Part V, Line 4b	Chile, China, France, Germany, Italy and Spain

Return Reference	Explanation
Form 990, Part VI, Section A, Line 1a	The Executive Committee is composed of The Chair, Vice Chairs, Chancellor and not less than six voting members of The Board of Trustees appointed by The Board at its annual meeting The Executive Committee is subordinate and responsible to The Board of Trustees In the interval between meetings of The Board of Trustees, the Executive Committee has and may exercise all powers of The Board of Trustees except i to approve or authorize amendments to the Charter or Bylaws or other major changes In the organization of the University or, except as authorized or delegated by resolution of The Board of Trustees, the creation of any debt encumbering any property of the University, ii to select recipients of Honorary Degrees, iii to grant diplomas, iv to approve budgets, v to grant tenure, and vi to act on matters as regards which other specific directions have been given by The Board of Trustees

Return Reference	Explanation
Form 990, Part VI, Section A, Line 2	Officer Kim Walker and trustee David Kemper have a business relationship Trustees John Beuerlein and Law rence Thomas have a business relationship Trustees Gregory Boyce and Hugh Grant have a business relationship Trustees David Kemper and Priscilla Hill-Ardoin have a business relationship Trustees Jerald Kent and Joyce Wood Buchheit have a business relationship Trustees David Kemper and Andrew Taylor have a business relationship Trustees Andrew Taylor and Priscilla Hill-Ardoin have a business relationship Trustees Maxine Clark and Thomas Hillman have a business relationship Trustees Priscilla Hill-Ardoin and Diane Sullivan have a business relationship Trustees John McDonnell and Thomas Hillman have a business relationship Trustees John McDonnell and Andrew Bursky have a business relationship Trustees Maxine Clark and Jack Thomas have a business relationship Trustees Eric Upin and David Kemper have a business relationship Trustees Diane Sullivan and Andrew Taylor have a business relationship Trustees Diane Sullivan and David Kemper have a business relationship

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	The Form 990 is initially prepared by the Universitys Tax Department and then reviewed by the Universitys auditor The auditors review is thorough and provides sufficient assurance for them to sign as paid preparers The return is then reviewed by the Universitys Controller who signs the return and its CFO It is then reviewed with the Universitys Board of Trustees Audit Committee Following their review, the final return is made available to the full Board All reviews take place prior to filing the return

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	The University regularly monitors and enforces compliance with its conflict of interest policies COI Policies, which include the Policy on Institutional Conflict of Interest, Research Conflicts of Interest Policy and the Policy on Conflicts of Interest in Clinical Care Each of the foregoing COI Policies established a dedicated committee, comprised of faculty and staff, to assess the financial relationships of faculty and determine whether a COI exists and a management plan warranted Faculty involved in research are required to disclose annually their financial interests or within 30 days of a new financial relationship The financial disclosures are circulated to the three COI committees for COI evaluation The Research COI and the Institutional COI committees regularly monitor faculty compliance with their management plans If the committees determine that a faculty member is not in compliance with a management plan, the matter is investigated by the committees and appropriate action taken The University Compliance Office annually audits clinical faculty members compliance with management plans imposed by the Clinical COI committee Any noncompliance is addressed and remediated by the faculty members department

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	contd Disclosures by staff employees are made to their immediate supervisors Disclosures by officers and Deans are made to the Chancellor for resolution, and the Chancellor reports on those and his own disclosures to the Chair of the Board The Board of Trustees has approved a separate conflict of interest policy applicable to its members Under that policy, members of the Board are required to make annual disclosure of existing or prospective matters that reasonably create an actual or potential conflict of interest involving the University including 50 or more affiliated entities and the member including certain affiliated business entities and family members With certain limited exceptions, that policy further requires a member to be excused from participation in or vote on a matter with respect to which she/he has a conflict of interest

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	The recommended compensation of the Chancellor and all officers and key employees collectively, the executive group is reviewed and approved annually by the Compensation Committee, a committee of independent voting members of the Board of Trustees The Committees discussion and review includes examination of multiple third-party sources of comparator market data specific to those institutions with which the University compares itself Additionally, the Committee has available market data provided by industry specific professional organizations and the Executive Compensation Report published annually by The Chronicle of Higher Education The Chairman of the Board of Trustees makes a recommendation to the Committee for the Chancellors compensation The Chancellor recommends to the Committee the compensation of all officers The Committees deliberations and decisions are contemporaneously substantiated in its minutes

Return Reference	Explanation
Form 990, Part VI, Section C, Line 19	The University makes its charter, conflict of interest policy, and annual reports available to the public through the University website see 990 Page 1 Box J

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a	Column D - Reportable compensation for officers Blasingame, Cannon, Thorp, and Webber includes a distribution or vesting of amounts under nonqualified deferred compensation plans reviewed and approved by the Compensation Committee of the Board of Trustees, individually or as part of their overall compensation The amounts distributed or vested for officers Blasingame and Cannon, among other amounts, are reported on Schedule J, Part II, column BIII The amounts distributed or vested for officers Thorp and Webber, among other amounts, are reported on Schedule J, Part II, column C

Return Reference	Explanation
Form 990, Part XI, Line 9	1,119,484 of changes, reclassifications in split-interest agreements and 424,236 change in uncollectible pledges are included in the amount entered on line 9

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

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WASHINGTON UNIVERSITY

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) Barnard Free Skin & Cancer Hospital (Barnard Cancer Institute) 660 South Euclid CB 8092 St Louis, MO 63110 43-6033760	Cancer patient care	MO	501c3	11a	Washington University	Yes	
(2) Quadrangle Housing Company 700 Rosedale Ave CB 1034 St Louis, MO 63112 43-1767210	Member support services	MO	501c3	11a	Washington University	Yes	
(3) Quadrangle Management Company 700 Rosedale Ave CB 1034 St Louis, MO 63112 43-1558136	Property title holding company	MO	501c25		Washington University	Yes	
(4) Washington University Medical Center 4400 Chouteau Ave St Louis, MO 631101661 23-7060605	Member support services	MO	501c3	11a	NA		No

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1)BOBB LLC One Brookings Drive CB 1058 St Louis, MO 63130 32-0423075	Real Estate	MO	Parallel Properties LLC	C Corp	1,962,500	6,967,870	100 000 %	Yes	
(2) Parallel Properties LLC One Brookings Drive CB 1058 St Louis, MO 63130 45-3714626	Real Estate	MO	Washington University	C Corp	301,157	5,298,853	100 000 %	Yes	
(3)SCHF I-3 WU LP 700 Rosedale Ave CB 1034 St Louis, MO 631121408 98-0464397	Investments	UK	Washington University	C Corp	151,882	1,781,220	100 000 %	Yes	
Washington University **(4)**Physicians Network 4240 Duncan Ave Suite 301 St Louis, MO 63110 43-1660462	Service fee negotiation	MO	Washington University	C Corp	902,867	22,026	100 000 %	Yes	

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

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a	Yes	
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o	Yes	
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r	Yes	
s Other transfer of cash or property from related organization(s)	1s	Yes	

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
See Additional Data Table			

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) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

Software ID: 15000290
Software Version: 15.3.0.0
EIN: 43-0653611
Name: WASHINGTON UNIVERSITY

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(1) Cardiothoracic Surgery North LLC 11155 Dunn Rd Suite 209E St Louis, MO 63136 36-4301434	Patient Care	MO	1,630,494	788,412	Washington University
(1) Quadrangle Pharmacy LLC One Brookings Dr CB 1058 St Louis, MO 63130 43-0653611	Student pharmacy services	MO	871,378	98,098	Washington University
(2) SCHF I-3 Investor WU GP LLC 700 Rosedale Ave CB 1034 St Louis, MO 63112 43-0653611	Financial investment manager	DE			Washington University
(3) University Pediatric Associates LLC 660 South Euclid St Louis, MO 63108 30-0871000	Patient Care	MO	581,861	95,626	WUCA LLC
(4) Washington University Clinical Associates - Blue Fish LLC 660 South Euclid St Louis, MO 63108 61-1740030	Patient Care	MO	4,988,481	354,327	WUCA LLC
(5) Washington University Clinical Associates - Child Neurology LLC 660 South Euclid St Louis, MO 63108 36-4730841	Patient Care	MO	1,183,111	80,688	WUCA LLC
(6) Washington University Clinical Associates - Cloverleaf Pediatrics LLC 660 South Euclid St Louis, MO 63108 37-1770035	Patient Care	MO	2,692,900	236,379	WUCA LLC
(7) Washington University Clinical Associates - Forest Park Pediatrics LLC 660 South Euclid St Louis, MO 63108 61-1696383	Patient Care	MO	4,126,121	346,681	WUCA LLC
(8) Washington University Clinical Associates - Kids Docs LLC 660 South Euclid St Louis, MO 63108 35-2548685	Patient Care	MO	183,324	119,020	WUCA LLC
(9) Washington University Clinical Associates - Maryland Medical LLC 660 South Euclid St Louis, MO 63108 27-2046978	Patient Care	MO	2,773,405	303,819	WUCA LLC
(10) Washington University Clinical Associates - Nash Pediatrics LLC 660 South Euclid St Louis, MO 63108 37-1802234	Patient Care	MO	339,226	145,296	WUCA LLC
(11) Washington University Clinical Associates - Northwest Pediatrics LLC 660 South Euclid St Louis, MO 63108 35-2458831	Patient Care	MO	6,553,472	283,758	WUCA LLC
(12) Washington University Clinical Associates - O'Fallon Pediatrics LLC 660 South Euclid St Louis, MO 63108 32-0453423	Patient Care	MO	5,785,360	1,025,924	WUCA LLC
(13) Washington University Clinical Associates - Univ Pers Phys 660 South Euclid St Louis, MO 63108 26-3917142	Patient Care	MO	1,413,195	735,966	WUCA LLC
(14) Washington University Clinical Associates - Woods Mill Pediatrics LLC 660 South Euclid St Louis, MO 63108 37-1829105	Patient Care	MO			WUCA LLC
(15) Washington University Clinical Associates LLC 660 South Euclid St Louis, MO 63108 20-0708217	Patient Care	MO	8,330,113	9,976,561	Washington University
(16) Washington University Pain Control LLC 969 Mason Rd St Louis, MO 63141 43-1852291	Patient Care	MO	1,841,169	126,712	Washington University
(17) William Greenleaf Eliot Seed Fund LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-3029864	Financial investment manager	MO			Washington University
(18) William Greenleaf Eliot Seed Fund Investor LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-3046439	Financial investment manager	MO			Washington University
(19) William Greenleaf Eliot Seed Fund Manager LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-3003790	Financial investment manager	MO			Washington University

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(21) WUSM ACO Providers LLC 660 South Euclid St Louis, MO 63108 38-3915732	Patient Care	MO	5,392,876		Washington University
(1) WUSTL Advisors (Shanghai) Co Ltd One Brookings Dr CB 1058 St Louis, MO 63130 61-1711507	Manage international activity	CH	307	310,756	WUSTL International LLC
(2) WUSTL International LLC One Brookings Dr CB 1058 St Louis, MO 63130 61-1711507	Manage international activity	MO		4,229	Washington University

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) Disproportionate allocations? No	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner? Yes	(j) General or Managing Partner? No	(k) Percentage ownership
6188 McPherson LLC One Brookings Dr CB 1058 St Louis, MO 63130 46-0641754	Real Estate	MO	Parallel Properties LLC	Excluded	8,323	9,040,927		No			No	1 100 %
Castlereagh ML LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-2578815	Real Estate	MO	BOBB LLC	Excluded		100		No			No	100 000 %
Clayton Euclid ML LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-2764555	Real Estate	MO	BOBB LLC	Excluded		100		No			No	100 000 %
Eastgate ML LLC One Brookings Dr CB 1058 St Louis, MO 63130 47-2994311	Real Estate	MO	BOBB LLC	Excluded		4,618,747		No			No	100 000 %
Eastgate MT LLC One Brookings Dr CB 1058 St Louis, MO 63130 47-5294794	Real Estate	MO	BOBB LLC	Related	30	6,360		No			No	1 000 %
Elm Park Credit Opportunities Fund LP 2101 Cedar Springs Rd Suite 700 Dallas, TX 75201 45-2685002	Investment	DE	Washington University	Excluded	3,962,284	22,101,550		No			No	66 890 %
Foundation Energy Fund V-B LP 1600 Dallas Pkwy Suite 875 Dallas, TX 75248 46-5755749	Investment	DE	Washington University	Excluded	802,166	42,165,851		No			No	64 100 %
Kimmeridge Energy Net Profits Interest Fund LP 400 Madison Ave Suite 14C New York, NY 10017 35-2441391	Investment	DE	Washington University	Excluded		7,038,574		No			No	100 000 %
Lewis Center ML LLC One Brookings Dr CB 1058 St Louis, MO 63130 47-3015612	Real Estate	MO	BOBB LLC	Excluded	-273	500		No			No	100 000 %
Lewis Center MT LLC One Brookings Dr CB 1058 St Louis, MO 63130 47-4490012	Real Estate	MO	BOBB LLC	Excluded		-1,169		No			No	100 000 %
LSLO Partners Fund LP 380 Lafayette St 6th Floor New York, NY 10003 80-0787226	Investment	DE	Washington University	Excluded	-6,516,720	136,576,881		No			No	95 590 %
McPherson Master Tenant LLC One Brookings Dr CB 1058 St Louis, MO 63130 38-3915678	Real Estate	MO	Parallel Properties LLC	Related	1,478	39,151		No			No	1 000 %
NDFY14 Master Tenant LLC One Brookings Dr CB 1058 St Louis, MO 63130 46-4787961	Real Estate	MO	BOBB LLC	Related	-148	1,780,195		No			No	1 000 %
North Delmar FY14 LLC One Brookings Dr CB 1058 St Louis, MO 63130 90-1030904	Real Estate	MO	BOBB LLC	Excluded	-261,214	7,750,094		No			No	89 100 %
Pelion Ventures V-A LP 2750 E Cottonwood Pkwy Suite 600 Salt Lake City, UT 84121 45-3150283	Investment	DE	Washington University	Excluded	1,047,379	10,430,883		No			No	63 230 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
SKDB FY14 LLC One Brookings Dr CB 1058 St Louis, MO 63130 38-3919595	Real Estate	MO	BOBB LLC	Excluded	-273,046	21,298,414		No			No	89 100 %
SKDB MT LLC One Brookings Dr CB 1058 St Louis, MO 63130 47-3421569	Real Estate	MO	BOBB LLC	Related	-102	39,797		No			No	1 000 %
St Louis Internet2 Access Consortium LLC 700 Rosedale Ave CB 1034 St Louis, MO 63112 47-0849522	Internet Access	MO	N/A	Unrelated	-29,932	53,192		No		Yes		33 920 %
St Louis Land Company LLC 4320 Forest Park Ave St Louis, MO 63108 13-4229138	Real Estate	MO	Washington University	Excluded	52,851	14,443,291		No			No	51 720 %
The Retina Institute LLC 1600 Brentwood Blvd Suite 800 St Louis, MO 63144 43-1712437	Medical practice	MO	Washington University	Unrelated	-6	5,270		No		Yes		50 000 %
UV Partners IV-A LP 2750 E Cottonwood Pkwy Suite 600 Salt Lake City, UT 84121 26-3732855	Investment	DE	Washington University	Excluded	-1,297,559	13,365,967		No			No	96 620 %

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	BOBB LLC	a	55,206	Arms length transaction
(1)	Parallel Properties LLC	a	17,463	Arms length transaction
(2)	Quadrangle Management Company	a	2,521	Arms length transaction
(3)	BOBB LLC	b	480,191	Cash contribution
(4)	Elm Park Credit Opportunities Fund	b	6,487,653	Cash contribution
(5)	Foundation Energy Fund V-B	b	32,258,452	Cash contribution
(6)	Kimmeridge Energy Net Profits	b	192,478	Cash contribution
(7)	Pelion Ventures V-A	b	2,400,000	Cash contribution
(8)	St Louis Land Company LLC	b	127,009	Cash contribution
(9)	Barnard Free Skin & Cancer Hospital	c	1,000,000	Cash value
(10)	BOBB LLC	d	3,120,942	Arms length transaction
(11)	Parallel Properties LLC	d	2,424,812	Arms length transaction
(12)	Quadrangle Management Company	d	324,233	Arms length transaction
(13)	Quadrangle Management Company	j	299,414	Arms length transaction
(14)	Barnard Free Skin & Cancer Hospital	k	512,234	Arms length transaction
(15)	Barnard Free Skin & Cancer Hospital	l	202,974	Actual cost
(16)	Quadrangle Management Company	l	126,686	Arms length transaction
(17)	SKDB MT LLC	l	65,809	By contract
(18)	Washington University Physicians Network	m	623,004	Actual cost
(19)	BOBB LLC	q	70,526	Actual cost
(20)	Washington University Physicians Network	q	948,640	Actual cost
(21)	Quadrangle Management Company	r	457,163	Arms length transaction
(22)	BOBB LLC	s	2,000,000	Cash value
(23)	Charitable Remainder Trusts (3)	s	889,786	Cash distribution
(24)	Elm Park Credit Opportunities Fund	s	10,157,912	Cash distribution

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(26)	Foundation Energy Fund V-B	s	192,115	Cash distribution
(1)	Parallel Properties LLC	s	491,836	Cash value
(2)	Pelion Ventures V-A	s	1,032,478	Cash distribution
(3)	Pooled Interest Funds (2)	s	107,608	Cash distribution
(4)	Quadrangle Management Company	s	1,348,170	Cash value
(5)	SCHF I-3 WU LP	s	497,725	Cash distribution