DLN: 93493132017064

OMB No 1545-0047

2012

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 black lung

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

benefit trust or private foundation)

Open to Public Inspection

A Fo	rthe 2	012 cal <mark>endar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30</mark>	-2013						
		plicable C Name of organization The George Washington University		D Emplo	yer ic	lentification number			
	ress cha ne chan	Doing Business As	53-0	1965	84				
┌ Inıt	al returi	Number and street (or P O box if mail is not delivered to street address) Room/suit		E Telepho	ono nu	umbor			
┌ Ter	mınated	TAY DEDT 45155 DECEADON DIACE							
┌ Am	ended re	eturn Cıty or town, state or country, and ZIP + 4		(/03)) /26	-8324			
┌ App	lication	ASHBURN, VA 201474198 pending		G Gross r	receipt	s \$ 1,652,712,215			
		F Name and address of principal officer STEVEN KNAPP		s this a group iffiliates?	retu	rn for			
		2121 EYE ST NW 801 WASHINGTON,DC 20052				luded? TYes TNo			
I Ta	k-exem _l	pt status				t (see instructions)			
j W	ebsite	:► WWW GWU EDU	H(c)	Group exempt	tion n	umber ►			
K Forn	n of org	anization	L Year	of formation 18	321	M State of legal domicile DC			
Pa	rt I	Summary				_			
)Ce		Briefly describe the organization's mission or most significant activities EDUCATION AND RESEARCH - SEE MISSION STATEMENT IN ATT 1 ON SC	НО						
屋									
Activities & Governance	2 C	heck this box 🔭 if the organization discontinued its operations or disposed of	more th	an 25% of its	net a	assets			
ా *ర	3 N	lumber of voting members of the governing body (Part VI, line 1a)		з	37				
<u>ه</u>	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	36				
톧	5 T	otal number of individuals employed in calendar year 2012 (Part V, line 2a) $$.			5	15,386			
্ব	6 T	otal number of volunteers (estimate if necessary)			6	5,000			
		otal unrelated business revenue from Part VIII, column (C), line 12			7a	11,916,603			
	bΝ	let unrelated business taxable income from Form 990-T, line 34	1		7b				
		Contributions and grants (Dort VIII line 1h)		80,014,	E E 2	70,589,630			
ā	8	Contributions and grants (Part VIII, line 1h)		1,110,409,		1,170,406,465			
Rayenu	9 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		22,618,		34,335,224			
å	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		32,720,		31,182,081			
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,245,762,	247	1,306,513,400			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		277,485,	174	294,921,019			
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	0			
\$	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		574,102,	279	612,758,288			
<u>⊕</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)	673,	685	797,839				
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ▶28,309,790	(Part IX, column (D), line 25) ▶ 28,309,790						
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		399,885,	141	424,043,708			
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,252,146,		1,332,520,854			
	19	Revenue less expenses Subtract line 18 from line 12	+	-6,384,	$\overline{}$	-26,007,454			
Not Assets or Fund Balances			Begii	nning of Curre Year	ent	End of Year			
3.55 H. 3.55	20	Total assets (Part X, line 16)		3,484,155,	828	3,545,345,140			
4 E	21	Total liabilities (Part X, line 26)		1,653,006,		1,655,182,744			
	22	Net assets or fund balances Subtract line 21 from line 20		1,831,149,	285	1,890,162,396			
Par	t II	Signature Block							

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

Sign Here

Signature of officer DAVID LAWLOR SR ASSOC VP FINANCE Type or print name and title

Preparer's signature Print/Type preparer's name Paid Preparer Firm's address ► 1301 K STREET NW SUITE 800W **Use Only** WASHINGTON, DC 20005

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

Forn	1990 (2012)				Page
Par	t IIII Statement of Prog Check if Schedule O co	ram Service Accomp ntains a response to any q			
1	Briefly describe the organizati	on's mission			
UNI STU OF I CEN THE FRO ENV	GEORGE WASHINGTON UNIV TED STATES IN 1821, DEDICA DENT-FOCUSED COMMUNITY NTEGRITY, CREATIVITY, AND TERED IN THE NATIONAL AN CREATION, DISSEMINATION M BOTH GLOBAL AND INTEGR IRONMENT FOR ITS DIVERSE ERS OUTSTANDING LEARNING PROFESSIONAL PROGRAMS	ATES ITSELF TO FURTHE STIMULATED BY CULTU OPENNESS TO THE EXF DINTERNATIONAL CRO , AND APPLICATION OF ATIVE PERSPECTIVES, STUDENTS AND FACULT G EXPERIENCES FOR FUI	RING HUMAN WELL-E PRAL AND INTELLECT PLORATION OF NEW I SSROADS OF WASHI KNOWLEDGE TO PROTHE UNIVERSITY PROTHE UNIVERSITY PROTHE BY FOSTERING EN LL-TIME AND PART-T	BEING THE UNIVERSITY VA UAL DIVERSITY AND BUILT DEAS THE GEORGE WASHI NGTON, D C , COMMITS ITS DMOTE THE PROCESS OF LI DVIDES A STIMULATING IN (CELLENCE IN TEACHING, T IME STUDENTS IN UNDERG	LUES A DYNAMIC, UPON A FOUNDATION NGTON UNIVERSITY, ELF TO EXCELLENCE IN FELONG LEARNING TELLECTUAL HE UNIVERSITY
_	D.d.b.				
2	Did the organization undertake the prior Form 990 or 990-EZ	?	ervices during the year	which were not listed on	
	If "Yes," describe these new se				
3	Did the organization cease cor services?	ducting, or make significa	nt changes in how it co	nducts, any program	
	If "Yes," describe these chang	es on Schedule O			
4	Describe the organization's pro expenses Section 501(c)(3) a the total expenses, and revenu	and 501(c)(4) organization	is are required to repor		
4a	(Code) (Ex	penses \$ 928,338,820	ıncludıng grants of \$	237,978,844) (Revenue \$	918,441,568)
	OVER THE WORLD TODAY, WE ARE FULL ADVANTAGE OF OUR SETTING	THAT UNIVERSITY WITH STUDE IN A GLOBAL NERVE CENTER, A UNITIES IN EVERY SECTOR OF S	NTS AND FACULTY MEMBER GW EDUCATION INTEGRATE SOCIETY IN A CITY SHAPING	LD PREPARE CITIZEN LEADERS BROU S FROM EVERY STATE AND MORE TH S INTELLECTUAL DISCOVERY, INTER/ G THE FUTURE, GEORGE WASHINGTO	AN 130 COUNTRIES TAKING ACTIVE LEARNING, AND
	(Code) (Ex	penses \$ 156,720,505	ıncludıng grants of \$	56,942,175) (Revenue \$	150,297,467)
טד	RESEARCH AND RESEARCH SUPPOR LIVES THIS UNIQUE APPROACH TO EXPERIENCES THAT FEW CAN MATO HEALTH, NATIONAL SCIENCE FOUND	T GW'S RESEARCH IS DISTING RESEARCH GIVES SPECIAL CHAF IH WITH OUR LOCATION, CONN DATION, THE SMITHSONIAN INST DENTS LEARNING OPPORTUNITII	UISHED BY OUR COMMITME RACTER TO OUR TEACHING ECTIONS, AND CLOSE PROX TTUTION, AND LIBRARY OF	NT TO TRANSFORM POLICY THAT AFF AND ENABLES US TO OFFER OUR STU IMITY TO INSTITUTIONS SUCH AS TH CONGRESS, GW'S RESEARCH HELPS: E CLASSROOM IN THE 21ST CENTUR	ECTS PEOPLE IN THEIR DAILY IDENTS LEARNING E NATIONAL INSTITUTES OF SOLVE NATIONAL AND GLOBAL
	(Code) (Ex	penses \$ 94,088,707	ıncludıng grants of \$	0) (Revenue \$	101,667,430)
	AUXILIARY ENTERPRISES - STUDENT THE OVERALL QUALITY OF STUDENT PARKING, STUDENT HEALTH, MAIL,	TS AND COMMUNITY GW PROVI LIFE AUXILIARY ENTERPRISES AND LAUNDRY SERVICES GW'S NTS, FACULTY, STAFF, AND VISI	IDES A NUMBER OF SERVICE INCLUDE FACILITIES AND R MARVIN CENTER HOUSES D TORS FOR MORE INFO ABO	ES THAT SUPPORT LEARNING, BUILD (ESIDENTIAL PROPERTY MANAGEMENT INING FACILITIES, STUDENT ORGANI UT GW'S PROGRAMS & ACCOMPLISH	, DINING, BOOKSTORE, ZATION OFFICES AND MEETIN
	Other program services (Des	 cribe in Schedule O)			
	(Expenses \$	including grants o	of \$) (Revenue \$)
	Total program service expens	es - 1 179 148 032)		

art TV	Check	list of	Required	Schedules

	<u> </u>		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		N o
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 1	6		No
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		No
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? <i>If</i> " <i>Yes,"</i> complete Schedule D, Part $\sqrt{2}$	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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		No
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 assistance to any organization or entity located outside the United States? 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 assistance to individuals located outside the United States? 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	Yes	
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?	20h		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? 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 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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		No
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)			
а	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	
С	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		No
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		No
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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Charles Caladala O acutama a manual to anno acutama de tra					
		Check if Schedule O contains a response to any question in this Part V .		<u> </u>	•	Yes	No
La I	Enter	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	36,841		. 00	"
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	_		
		e organization comply with backup withholding rules for reportable payments		dars and reportable	1		
		g (gambling) winnings to prize winners?		dors and reportable	1c	Yes	
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered					
b 1	If at le	s return			2b	Yes	
		If the sum of lines 1a and 2a is greater than 250, you may be required to e-fi					
		e organization have unrelated business gross income of \$1,000 or more during	_		3a	Yes	
		s," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i>			3b	Yes	
(over, a	vime during the calendar year, did the organization have an interest in, or a sa financial account in a foreign country (such as a bank account, securities ac nt)?			4a	Yes	
b j	If "Ye	s," enter the name of the foreign country ▶BR , CJ , CH					
		structions for filing requirements for Form TD F 90-22 1, Report of Foreign Ba	ank an	d Fınancıal Accounts			
		ne organization a party to a prohibited tax shelter transaction at any time duri	=	•	5a		Νo
b [Did an	y taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νo
c]	If "Yes	s," to line 5a or 5b, did the organization file Form 8886-T?					
					5c		
(organı	the organization have annual gross receipts that are normally greater than \$1 zation solicit any contributions that were not tax deductible as charitable cor	ntributi	ons?	6a		No
١	were n	s," did the organization include with every solicitation an express statement to tax deductible?	hat su	ch contributions or gifts	6b		
	_	izations that may receive deductible contributions under section 170(c).	tion on	d narrly for goods and	70	l vaa	
9	servic	e organization receive a payment in excess of \$75 made partly as a contributes provided to the payor?			7a	Yes	
		s," did the organization notify the donor of the value of the goods or services p			7b	Yes	
		e organization sell, exchange, or otherwise dispose of tangible personal prope rm 8282?	erty for 	which it was required to	7c	Yes	
		s," indicate the number of Forms 8282 filed during the year	7d] 2			
		·, ···································		_			
		e organization receive any funds, directly or indirectly, to pay premiums on a	persor	nal benefit			
		ct?			7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a pers			7f		No
-	requir	organization received a contribution of qualified intellectual property, did the ed?			7g		
		organization received a contribution of cars, boats, airplanes, or other vehicle 1098-C?	es, dıd • •	the organization file a	7h		
t	the su	oring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organs at any time during the year?	ganızat		8		
9 9	Spore	oring organizations maintaining donor advised funds.					
	-	e organization make any taxable distributions under section 4966?			9a		
		-			9a 9b		
		e organization make a distribution to a donor, donor advisor, or related persor			90		
		on 501(c)(7) organizations. Enter	40-	I			
Ь		receipts, included on Form 990, Part VIII, line 12 receipts, included on Form 990, Part VIII, line 12, for public use of club	10a 10b				
		on 501(c)(12) organizations. Enter					
		Income from members or shareholders	11a	I			
		income from other sources (Do not net amounts due or paid to other sources			1		
		st amounts due or received from them)	11b			n	
!a !	Sectio	n 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99	90 ın lı	eu of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the	12b				
3 9	Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.					
		organization licensed to issue qualified health plans in more than one state? See the instructions for additional information the organization must report or	n Sche	dule O	13a		
Ь	Enter	the amount of reserves the organization is required to maintain by the states					
		th the organization is licensed to issue qualified health plans	13b 13c		-		
la I	Did th	e organization receive any payments for indoor tanning services during the ta		?	14a		l I No
		e organization receive any payments for muoor talling services during the ta	•		14a		110

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.

Se	ection 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			
	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			
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	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
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			
а	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		
	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	
С	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?			
а	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	
	alian o biantana			
	ection C. Disclosure List the States with which a conviolation Form 990 is required to be filed AK CA IN KS MD MA MI NH N			0.5

- 17 List the States with which a copy of this Form 990 is required to be filed AK, CA, IN, KS, MD, MA, MI, NH, NY, OH, OK, OR, SC
- 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, physical address, and telephone number of the person who possesses the books and records of the organization ►SHARON HEINLE AVP COMPTLR 45155 RESEARCH PLACE SUITE 260 ASHBURN, VA (703) 726-1087

Form 990 (2012	<u>'</u>
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Р	а	a	e	7

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

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) A verage hours per week (list any hours for related organizations below dotted line)	more t	ition (than (on is a dire	one l both	box, an d r/tru	officer stee)	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	
		al trustee or	Former Highest compensated employee Key employee Officer Institutional Trustee		compensated compensated loyee		ee(o				
See Additional Data Table											
										Form 990 (2012)	

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	one l both	box, an	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-		(F) Estima mount o compens from t	ited fother ation the
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		rganizati relate organiza	ed
											-		
											+		
											+		
											+		
1b	Sub-Total							<u> </u>					
C	Total from continuation sheet	s to Part VII, S	ection /	Α.	•		•	Þ					
d	Total (add lines 1b and 1c) .							 -	15,074,261		0		967,952
2	Total number of individuals (in \$100,000 of reportable compa							e) w	ho received more th	nan			
												Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	, or highest compen	sated employee	3	Yes	·
4	For any individual listed on lin organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	Yes	
S	ection B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization from the organization from the organization.	ve highest comp										ax year	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CLARK CONSTRUCTION GROUP , 7500 OLD GEORGETOWN ROAD BETHESDA MD 20814	CONSTRUCTION	34,061,254
GWU MEDICAL FACULTY ASSOCIATES , 2150 PENNSYLVANIE AVE NW WASHINGTON DC 20037	TEACHING & RESEARCH	27,923,691
WHITING TURNER CONTRACTING CO , 300 E JOPPA RD BALTIMORE MD 21286	CONSTRUCTION	27,871,069
ARAMARK CORPORATION , 1101 MARKET STREET PHILADELPHIA PA 19107	FACILITY SERVICES	11,518,449
SODEXO INC , 9801 WASHINGTONIAN BLVD GAITHERSBURG MD 20878	DINING SERVICES	6,084,697
- T-t-1		

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 ►325

Form 99								Page 9
Part V	4111	Statement o Check if Schedu	f Revenue ule O contains a respor	nse to any question	ın thıs Part VIII .		<u></u>	<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
इ इ	1a	Federated camp	-					
Grants mounts	b	Membership du	es 1b					
Am Am	С	Fundraising eve	ents 1c	59,083				
Giffs, nilar A	d	Related organiz	rations 1d					
ii. š	е	Government grants	s (contributions) 1e	14,003,330				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	56,527,217				
┋등	g	Noncash contribution 1a-1f \$	ons included in lines	10,983,291				
Con	h	Total. Add lines	s 1a-1f	▶	70,589,630			
- u				Business Code				
nu e	2a	STUDENT TUITION	& FEES	900099	827,985,368	827,985,368		
æ	Ь	GRANTS & CONTRA		900099	159,446,181	159,446,181		
MCe	C .	AUXILIARY ENTERP		611710	101,667,430	101,667,430		
Š	d	MEDICAL EDUCATION		900099	58,265,608	58,265,608		
ran	e f	-	SERVICE REVENUE	611710	23,041,878	23,041,878		
Program Service Revenue								
	g 3	Total. Add lines	s 2a-2f ome (including dividen	de interest	1,170,406,465			
		and other simila	ar amounts)	• [11,686,438			11,686,438
	4		tment of tax-exempt bond	-	2,263,050			2,263,050
	5	Royalties	(ı) Real	▶ (II) Personal	2,263,030			2,203,030
	6a	Gross rents	42,531,471	(ii) i cisolidi				
	ь	Less rental expenses	25,570,151					
	С	Rental income or (loss)	16,961,320	0				
	d	` '	me or (loss)		16,961,320			16,961,320
	_	Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	342,351,738	881,752				
	b	Less cost or other basis and	319,739,536	845,168				
	c	sales expenses Gaın or (loss)	22,612,202	36,584				
	d	Net gain or (los	s)		22,648,786			22,648,786
Other Revenue	8a	of contributions	luding ,083 s reported on line 1c)					
Вè		See Part IV, lin	e 18 a	85,068				
her	ь	Less direct ex	penses b	43,960				
ᅙ	С	Net income or ((loss) from fundraising	events 🛌	41,108			41,108
	9a	Gross income fi See Part IV, lin	rom gaming activities le 19 a					
	ь	Less direct ex	penses b					
	С		loss) from gamıng actı) آ	vities	0			
	10a	Gross sales of returns and allo						
	ь		oods sold b					
	С	Net income or ((loss) from sales of inve	entory F Business Code	0			
	11a	UNRELATED P		525990	-2,367,883		-2,367,883	
	ь	INCOME INDEPENDENT		721110	14,284,486		14,284,486	
	С							
	d		ue					
	е	Total. Add lines	s 11a-11d		11,916,603			
	12	Total revenue.	See Instructions .		1,306,513,400	1,170,406,465	11,916,603	53,600,702

	t IX Statement of Functional Expenses				Page 10
	on 501(c)(3) and 501(c)(4) organizations must complete all columns. A	ll other organizat	ıons must compl	ete column (A)	
	Check if Schedule O contains a response to any question in this P	art IX			<u>.</u>
	ot include amounts reported on lines 6b, b, 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 governments and organizations in the United States See Part IV, line 21	43,934,244	43,934,244		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	227 500 400	227 500 400		
_	· · · · · · · · · · · · · · · · · · ·	237,598,498	237,598,498		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	13,388,277	13,388,277		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	7,858,820	1,356,635	5,104,576	1,397,609
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	495,068,047	436,416,817	44,199,162	14,452,068
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	32,957,191	28,372,829	3,480,590	1,103,772
9	Other employee benefits	43,754,220	37,667,985	4,620,858	1,465,377
10	Payroll taxes	33,120,010	28,513,000	3,497,785	1,109,225
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	5,988,819	2,220,039	3,768,780	
С	Accounting	3,257,707	414,722	2,842,985	
d	Lobbying	2,000	2,000		
e	Professional fundraising services See Part IV, line 17	797,839			797,839
f	Investment management fees	9,670,229		9,670,229	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on		0.4 = 1.5 0 = 1		007.005
4.0	Schedule O)	100,798,262	91,576,075	8,224,882	997,305
12	Advertising and promotion	5,075,469	2,489,685	2,405,846	179,938
13	Office expenses	31,679,669	24,252,984	6,036,348	1,390,337
14	Information technology	25,757,733	19,309,151	6,250,149	198,433
15	Royalties	66,721	66,721	4.502.020	
16	Occupancy	60,419,523	55,812,020	4,603,029	4,474
17	Travel	23,290,076	20,629,550	1,113,732	1,546,794
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	11,452	11,452		
19	Conferences, conventions, and meetings	23,631,401	15,550,575	5,033,066	3,047,760
20	Interest	42,671,559	40,723,411	1,948,144	4
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	63,156,168	59,482,250	3,673,918	
23	Insurance	3,178,749	3,136,738	42,011	
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)				
а	SUBSCRIPTIONS/PERIODICALS	5,005,249	4,837,775	107,038	60,436
b	MEMBERSHIPS	2,814,770	2,156,602	600,312	57,856
c	UBI TAX	4,837		4,837	
d	INTERDEPARTMENTAL ASSESSMENTS		6,725,226	-7,175,157	449,931
e	All other expenses	17,563,315	2,502,771	15,009,912	50,632
25	Total functional expenses. Add lines 1 through 24e	1,332,520,854	1,179,148,032	125,063,032	28,309,790
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)				

Pai	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,348,453	1	1,317,838
	2	Savings and temporary cash investments	541,324,170	2	339,723,544
	3	Pledges and grants receivable, net	82,539,899	3	82,780,459
	4	Accounts receivable, net	42,072,853	4	26,346,448
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			
			97,053	5	78,853
90	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			
लू			0		0
Assets	7	Notes and loans receivable, net	477,888		602,895
_	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	12,717,862	9	18,320,281
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 2,734,396,030			
	b	Less accumulated depreciation 10b 652,333,259	1,890,636,095	10 c	2,082,062,771
	11	Investments—publicly traded securities	347,435,495	11	434, 138, 107
	12	Investments—other securities See Part IV, line 11	516,713,464	12	513,071,358
	13	Investments—program-related See Part IV, line 11	29,299,572	13	28,621,824
	14	Intangible assets	7,945,484	14	7,945,484
	15	Other assets See Part IV, line 11	11,547,540	15	10,335,278
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,484,155,828	16	3,545,345,140
	17	Accounts payable and accrued expenses	181,123,366	17	197,965,155
	18	Grants payable	0	18	0
	19	Deferred revenue	44,399,576	19	42,143,981
	20	Tax-exempt bond liabilities	167,730,000	20	0
Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>ge</u>		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	224,949,326	23	224,270,913
	24	Unsecured notes and loans payable to unrelated third parties	997,501,588	24	1,154,562,664
	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	37,302,687	25	36,240,031
	26	D	1,653,006,543	26	1,655,182,744
	26	Organizations that follow SFAS 117 (ASC 958), check here ► and complete	1,000,000,040	26	1,000,102,744
ě		lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	1,351,776,842	27	1,381,211,316
- 80 - 80	28	Temporarily restricted net assets	255,393,043	28	281,283,663
됟	29	Permanently restricted net assets	223,979,400	29	227,667,417
r Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net 4	33	Total net assets or fund balances	1,831,149,285		1,890,162,396
ž	34	Total liabilities and net assets/fund balances	3,484,155,828	34	3,545,345,140
	1		0,707,100,020	J-7	5,545,545,146

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,306,5	513,400
2	Total expenses (must equal Part IX, column (A), line 25)	2		1.332.5	520,854
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				007,454
5	Net unrealized gains (losses) on investments	5			710,285
6	Donated services and use of facilities	6			122,860
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		2,1	187,420
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,890,1	162,396
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
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 review a separate basis, consolidated basis, or both	wed on			
	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 sepa basis, consolidated basis, or both	rate			
	☐ Separate 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 audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
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?	2	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Software ID: **Software Version:**

EIN: 53-0196584

Name: The George 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		(Con (do than persoffice ctor/	onot one on i er an trust	box s bo d a tee)	, th		(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		
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations		
W RUSSELL RAMSEY CHAIRMAN OF THE BD/COMM CHR	5 0	х						0	0	0		
NELSON A CARBONELL JR VICE CHAIR OF THE BD/COMM CHR	5 0	х										
I ALLAN FROM SECRETARY OF THE BD/COMM CHR	5 0	х										
W SCOTT AMEY TRUSTEE	2 0	х										
RICHARD W BLACKBURN TRUSTEE	2 0	х										
CHRISTOPHER J BRIGHT TRUSTEE	2 0	х										
ROSLYN M BROCK TRUSTEE	2 0	х										
GEORGE COELHO TRUSTEE/COMM CHR	3 0	х										
LEE FENSTERSTOCK TRUSTEE	2 0	х										
HEATHER S FOLEY TRUSTEE	2 0	х										
DIANA HENRIQUES TRUSTEE	2 0	х										
A MICHAEL HOFFMAN TRUSTEE	2 0	х										
MARK V HUGHES TRUSTEE/COMM CHR	3 0	х										
JAMES F HUMPHREYS TRUSTEE	2 0	х										
MADELEINE S JACOBS TRUSTEE	2 0	х										
DAVID KARLGAARD TRUSTEE/COMM CHR	3 0	х										
STUART S KASSAN TRUSTEE	2 0	х										
JAY E KATZEN TRUSTEE	2 0	х										
J RICHARD KNOP TRUSTEE	2 0	х										
PETER B KOVLER TRUSTEE	2 0	х										
GERALD LAZARUS TRUSTEE	2 0	х										
RANDY LEVINE TRUSTEE/COMM CHR	3 0	х										
ANN WALKER MARCHANT TRUSTEE	2 0	х										
DAVID NADLER TRUSTEE	2 0	х										
BJ PENN TRUSTEE/COMM CHR	3 0	х										

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) (B) (C) Name and Title Position (do not check Reportable Estimated amount Average Reportable hours more than one box, compensation compensation of other unless person is both from the from related compensation per organization (Wan officer and a organizations (Wweek from the director/trustee) 2/1099-MISC) 2/1099-MISC) organization and (list related any Highest compensated employee Former Office Q hours organizations Institutional Trustee Indual for employ related organizations trustie below 0 dotted line) 3 0 ROBERT G PERRY Х TRUSTEE/COMM CHR 3 0 LINDA RABBITT Х TRUSTEE/COMM CHR 2 0 DEBORAH RATNER SALZBERG Х **TRUSTEE** 3 0 STEVEN S ROSS Χ TRUSTEE/COMM CHR 2 0 MARK R SHENKMAN Х TRUSTEE 3 0 ROBERT K TANENBAUM Х TRUSTEE/COMM CHR 3 0 CYNTHIA STEELE VANCE Х TRUSTEE/COMM CHR 2 0 SUNIL WADHWANI Х TRUSTEE 2 0 KERRY WASHINGTON-THRU 10912 Х **TRUSTEE** 2 0 GEORGE W WELLDE JR X TRUSTEE 2 0 TITILOLA WILLIAMS-DAVIES Х TRUSTEE 3 0 ELLEN ZANE Х TRUSTEE/COMM CHR 50 0 STEVEN KNAPP х Х 1,180,534 105,913 PRESIDENT - EX OFFICIO 50 0 LOUIS H KATZ Χ 1,381,110 30,000 EXECUTIVE VP & TREASURER 50 0 STEVEN LERMAN Х 644,009 146,548 PROVOST & EVP ACADEMIC AFFRS 50 0 BETH NOLAN Х 623,234 34,678 SR VP & GENERAL COUNSEL 50 0 JEFFREY S AKMAN Χ 784,875 VP FOR HLTH AFFRS/DEAN SMHS 50 0 LEO M CHALUPA Χ 466,743 49,414 VP FOR RESEARCH 50 0 MICHAEL MORSBERGER Χ 464,453 56,879 VP FOR DEVELOPMENT 50 0 DONALD W LINDSEY Χ 585,720 44,488 CHIEF INVESTMENT OFFICER 50 0 DAVID P STEINOUR Х 339,388 31,431 CHIEF INFORMATION OFFICER 50 0 MARGUERITE E BARRATT Х 329,738 34,014 DEAN, CCAS 50 0 PAUL SCHIFF BERMAN 54,876 Х 519,280 DEAN, LAW SCHOOL 50 0 SHAHRAM SARKANI 825,452 Х 44,289 DIRECTOR & PROF OF EMSE 50 0 NOZER SINGPURWALLA 797,315 37,142 DIRECTOR & PROF OF STATISTICS

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

(A) (B) (C) (D)

(A)	(B)		(C							
Name and Title	Average hours per week (list	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
	ille)	Individual trustae or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former			related organizations
IRA LUPU PROFESSOR EMERITUS OF LAW	50 0					х		766,047		19,885
THOMAS A MAZZUCHI CHAIR, DEPT OF ENGINEERING	50 0		'			х	<u> </u>	525,935		43,220
MICHAEL LONERGAN MEN'S BASKETBALL COACH	50 0					х		520,226		70,488
ROBERT A CHERNAK FORMER SR VP SAAS	40 0						х	2,040,577		39,069
JOHN F WILLIAMS FORMER SR V PROV/VP HLTH AFFRS	0 0						х	1,028,997		
STEPHEN J TRACHTENBERG FORMER PRESIDENT	40 0						х	394,624		38,069
JAMES L SCOTT FORMER DEAN,SCHOOL OF MED/HLTH	40 0						х	444,134		33,418
GREGORY E MAGGS FORMER INTRM DEAN, LAW SCHOOL	40 0						х	245,760	0	36,185
JOHN KUDLESS FORMER INTERIM VP FOR DEV	20 0						х	166,110		17,946

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As Filed Data -

DLN: 93493132017064

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

The George Washington University

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

									53-01965		
	rt I			blic Charity Sta						struction	s.
The	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ugh 11, check	only one b	ox)		
1	Γ	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	lescribed in s e	ection 170(l	o)(1)(A)(i).		
2	굣	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)				
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	ation descr	ibed in sectio	n 170(b)(1)	(A)(iii).		
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1)(A)(iii).	Enter the
	_	hospita	ıl's name, cı	ty, and state							
5	Г	Anorga	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by a	a government	al unit des	cribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	Г	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1	l)(A)(v).		
7	Г	_		at normally receives			support from	a governme	ntal unit or fr	om the ge	neral public
8	г			on 170(b)(1)(A)(vi). described in sectior		•	mplete Part II	:)			
9	Ė			at normally receives					outions, meml	bership fee	es, and gross
	·	•		ities related to its ex	` '	,	• •		•	•	, ,
		•		oss investment inco		-			• •		•
		-	=	anızatıon after June				-		,	
10	Г	•	,	ganized and operated	•		. , . , .	•	•		
11	, _	_		ganized and operated	•		•			o carry out	the nurnoses of
	,			ly supported organiz							
				bes the type of supp							
		a	Type I	b	Type II	I - Function	ially integrate	d d	Type III - No	n-function	nally integrated
e	Γ		_	ox, I certify that the	_		,		, ,		•
				on managers and ot	her than one	or more pub	olicly support	ed organizat	ions describe	ed in secti	on 509(a)(1) or
f			1509(a)(2)	received a written de	etermination	from the IR	S that it is a	Type I Typ	e II or Tyne	III sunnar	ting organization
•			this box	received a written a		monn ene in	io that it is a	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	c 11, 0, 1, pc	III Suppo.	
g		Since A	ugust 17, 2	2006, has the organi	zation accep	ted any gift	or contributi	on from any	of the		
			ig persons?								
		., .		rectly or indirectly o	•		5	persons de	scribed in (ii)		Yes No
				governing body of th		_	n?				.g(i)
		` '	•	er of a person descr	` ,						g(ii)
(iii) A 35% controlled entity of a person described in (i) or (ii) above?							11	g(iii)			
h		Provide	the followi	ng information about	the supporte	ed organizat	ion(s)				
(i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	:he	(v) Did you	notify	(vi) Is t	the	(vii) A mount of
	suppor	rted		organization	organizati	on in	the organiz	zation	organizati	on in	monetary
0	rganiza	ation		(described on	col (i) list your gove		ın col (i) o suppor	•	col (i) orga		support
				lines 1-9 above or IRC section	S?						
				(see	docume	III. r					
				instructions))			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		+ w		\dashv
					Yes	No	Yes	No	Yes	No	
							ļ				
							ļ		ļ		
T-4			ı	i	i	1	1	ı	1	1	1

	(Complete only if you on Part III. If the organization	checked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ition failed to q	ualify under
S	ection A. Public Support	rtion rails to qu	anny ander the	tests listed bel	ow, picase con	piete i di c III.)	
	endar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
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						
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						
S	ection B. Total Support						
Cal	endar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
9	dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated						
	business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support (Add lines 7 through						
12	10) Gross receipts from related activiti	ı es, etc (see ınst	ructions)	ı	ı	12	I
13	First five years. If the Form 990 is this box and stop here	for the organizat	ion's first, second		•	501(c)(3) organ	ızatıon, check
S	ection C. Computation of Pub						
14	Public support percentage for 2012			11, column (f))		14	
15	Public support percentage for 2011	Schedule A, Pa	rt II, line 14			15	
	33 1/3% support test—2012. If the and stop here. The organization qua 33 1/3% support test—2011. If the	ilifies as a public	ly supported orga	inization		•	▶□
U	box and stop here. The organization				, and time 15 is 53	1/370 01 111010, 011	F □
17a	10%-facts-and-circumstances test- is 10% or more, and if the organiza in Part IV how the organization mee	–2012. If the org tion meets the "f	anızatıon dıd not acts-and-cırcum	check a box on lı stances" test, ch	eck this box and	stop here. Explair	n orted
b	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization	nization meets th	e "facts-and-cırc	umstances" test	, check this box a	nd stop here.	•F :ly •F
18	Private foundation. If the organizationstructions	ion did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and see	▶ □

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

Colordon (or fiscal ways beginning)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ") Gross receipts from admissions,		+				+
2	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organızatıon'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						+
	Amounts included on lines 1, 2,						
, u	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)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9	ndar year (or fiscal year beginning in) ► A mounts from line 6	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9	ndar year (or fiscal year beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale	ndar year (or fiscal year beginning in) ► A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Cale 9 10a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,						
Cale 9 10a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	for the organizati	on's first, second				anization,
Cale 9 10a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	for the organizati	on's first, second	, third, fourth, or			anization,
Cale 9 10a b c 11 12 13 14 See 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	for the organizati lic Support Po (line 8, column (on's first, second ercentage (f) divided by line	, third, fourth, or		501(c)(3) orga	anization,
Cale 9 10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage from 2012	for the organizati lic Support Po (line 8, column (on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		501(c)(3) orga	anization,
Cale 9 10a b c 11 12 13 14 See 15 16 See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage for 2012	for the organizati lic Support Po (line 8, column (.1 Schedule A, P estment Inco	on's first, second ercentage (f) divided by line art III, line 15 me Percenta	, third, fourth, or	fifth tax year as a	15 16	anization,
Cale 9 10a b c 11 12 13 14 See 15 16 See 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage from 2012 ction D. Computation of Inve	for the organizati lic Support Po (line 8, column (.1 Schedule A, P estment Inco 2012 (line 10c, co	on's first, second ercentage (f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 113, column (f)) ge by line 13, colum	fifth tax year as a	15 16	anization,
Cale 9 10a b c 11 12 13 14 Se 16 Se 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage from 201 ction D. Computation of Inve	for the organizati lic Support Po (line 8, column (.1 Schedule A, P estment Inco 2012 (line 10 c, co	on's first, second ercentage (f) divided by line art III, line 15 me Percentage olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column 7	fifth tax year as a	15 16 17 18	anization,

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493132017064

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Political Campaign and Lobbying Activities

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** The George Washington University 53-0196584 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 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 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 (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

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

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

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	4,488	
c	Total lobbying expenditures (add lines 1a and 1i	4,488		
d	Other exempt purpose expenditures	1,319,301,268		
e	Total exempt purpose expenditures (add lines 1	c and 1d)	1,319,305,756	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	0 reporting	□ Ves □ No

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

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying nontaxable amount Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 1,906 Total lobbying expenditures 3,824 1,469 4,488 11,687 Grassroots nontaxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

Identifier

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	тог				.gc <u>-</u>
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
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	O ther 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?					
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c))(5), oı	r se	ctio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	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		
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "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).					
а	Current year	2a				
b	Carryover from last year	2b				
С	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				

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),

Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

Schedule C (Form 990 or 990EZ) 2012

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493132017064

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

IIIai IV	F Attach to Form	1990. F See Sepan	ate mstructions.			Inspec	uon
	e of the organization eorge Washington University				loyer identific 0196584	cation numb	er
Part	Organizations Maintaining Donor Adviorganization answered "Yes" to Form 990,		Other Similar F	_		:s. Comple	te if the
			advised funds		(b) Funds and	dotheracco	unts
Т	otal number at end of year						
Æ	ggregate contributions to (during year)						
A	ggregate grants from (durıng year)						
4	ggregate value at end of year						
	Old the organization inform all donors and donor advisor unds are the organization's property, subject to the org	-		nor advi	sed	☐ Yes	┌ No
ı	Old the organization inform all grantees, donors, and dor used only for charitable purposes and not for the benefit conferring impermissible private benefit?		-			┌ Yes	┌ No
	II Conservation Easements. Complete if t	the organization	answered "Yes" t	to Forn	n 990, Part i	IV, line 7.	
	Purpose(s) of conservation easements held by the organ	-			,	,	
ſ	Preservation of land for public use (e g , recreation o	or education)	Preservation of ar	n histor	ically importa	nt land area	
ſ	Protection of natural habitat	Г	Preservation of a	certifie	d historic stru	icture	
ſ	Preservation of open space						
	Complete lines 2a through 2d if the organization held a deasement on the last day of the tax year	qualified conserva	ition contribution in	the forn	n of a conserv	atıon	
					Held at th	e End of the	Year
-	Total number of conservation easements			2a			
-	Total acreage restricted by conservation easements			2b			
I	Number of conservation easements on a certified histor	nc structure includ	ded in (a)	2c			
	Number of conservation easements included in (c) acqu nistoric structure listed in the National Register	ured after 8/17/06	5, and not on a	2d			
I	Number of conservation easements modified, transferre	d, released, extin	guished, or terminate	ed by th	ie organizatio	n durıng	
t	he tax year ►						
1	Number of states where property subject to conservatio	on easement is loc	ated ►				
I	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?			dling of	violations, ar	nd / Yes	┌ No
9	Staff and volunteer hours devoted to monitoring, inspect	ting, and enforcing	g conservation ease	ments o	luring the yea	r	
	 Amount of expenses incurred in monitoring, inspecting,	and onforcing con	convotion accoment	c durin	a the weer		
	►\$	and emorcing con	servation easement	s dullin	g the year		
		\ _ h + & . + h		-b 1 -	70 (h)(4)(D)(.)		
	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?) above satisfy the	requirements of sec	ction 17	/ U(N)(4)(B)(I)	☐ Yes	┌ No
]	In Part XIII, describe how the organization reports constalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the or					
	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Histor		or Otl	her Similaı	Assets.	
١	f the organization elected, as permitted under SFAS 11 works of art, historical treasures, or other similar assets service, provide, in Part XIII, the text of the footnote to	s held for public e	xhibition, education,	or rese	arch in furthe		
١	f the organization elected, as permitted under SFAS 11 works of art, historical treasures, or other similar assets service, provide the following amounts relating to these	s held for public e					lıc
((i) Revenues included in Form 990, Part VIII, line 1				► \$		
((ii) Assets included in Form 990, Part X				▶ \$	5,7	10,000
1	f the organization received or held works of art, historic following amounts required to be reported under SFAS 1						
ı	Revenues included in Form 990, Part VIII, line 1				► \$		
	Assets included in Form 990, Part X				. <u></u>		
,	133613 IIICIUUEU III FUIIII 330, PAIL A				- →		

a p b f c f 4 f 5	Using the organization's acquisition, access collection items (check all that apply) Public exhibition Scholarly research	ion, and other record	•	eck a	any of the fo	ollowing that a	re a	sıgnıfıcant u	se of	ıts	
b 6 6 6 6 6 6 6 6 6	<u></u>										
c F	▼ Scholarly research		d	굣	Loan or ex	xchange progra	ams				
4 F 5 [e	Γ	Other						
5 [✓ Preservation for future generations										
	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	v they	/ further the	e organızatıon'	's ex	empt purpos	e ın		
	During the year, did the organization solicit (ılar	_		_
	assets to be sold to raise funds rather than t							!! to E		Yes	✓ No
Part	IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar					ion answered	1 1	es to Form	1 990	,	
	Is the organization an agent, trustee, custoc included on Form 990, Part X?					s or other asse	ets r	not	Г	Yes	┌ No
b I	If "Yes," explain the arrangement in Part XI $^\circ$	II and complete the	follow	ving t	able	_					
						<u> </u>			Amou	nt	
	Beginning balance					<u> </u>	1c				
d ,	Additions during the year					-	1d				
_	Distributions during the year					—	1e				
f	Ending balance						1f				
2a [Did the organization include an amount on Fo	orm 990, Part X, line	e 21?						Γ	Yes	☐ No
b I	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natio	n has been	provided in Pa	art X	(III			Г
Part	EV Endowment Funds. Complete										
1- [Regunning of year balance	(a)Current year 1,305,891,938		710r ye	00,652 b (c)	Two years back 1,143,581,701	(d)⊺	1,011,192,21	-		ears back 56,432,040
	Beginning of year balance	21,777,666			22,014	20,048,815		14,550,66	_		21,256,721
	Net investment earnings, gains, and losses	21,777,000		12,7	22,011	20,010,013		11,550,00	-		1,230,721
		125,522,204			71,754	239,647,928		187,659,51	_	-20	0,350,848
	Grants or scholarships	8,429,072		8,1	96,187	7,817,598		7,874,78	31		8,010,461
a	Other expenditures for facilities and programs	59,890,790			511,818	56,012,499		54,920,35			50,425,422
	Administrative expenses	9,670,229			94,477	8,347,695		7,025,56	-		7,709,813
g E	End of year balance	1,375,201,717	1,	,305,8	91,938	1,331,100,652		1,143,581,70	01	1,01	.1,192,217
2 F	Provide the estimated percentage of the cur	·	ce (lın	e 1g,	column (a)) held as					
a [Board designated or quasi-endowment 🕨	71 379 %									
b F	Permanent endowment 🕨 13 844 %										
	remporarily restricted endowment	777 %									
	The percentages in lines 2a, 2b, and 2c sho										
	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	that a	re held and	d administered	for	the		Yes	No
	(i) unrelated organizations							[3	Ba(i)	162	No
	(ii) related organizations							—	a(ii)		No
b I	If "Yes" to 3a(11), are the related organizatio	ns listed as required	d on S	ched	ule R? .				3b		
4 [Describe in Part XIII the intended uses of th										
Part		ent. See Form 99	0, Pa			Lascatana		/-> /		(1) D	11
	Description of property				Cost or other (investment)	(b) Cost or other)		(c) Accumulate depreciation		(a) Boo	ok value
1a La	and				561,105	151,675,6	593			15	2,236,798
b Bı	uildings		.		790,613,481	1,563,623,7	778	508,472,9	57	1,84	5,764,302
c Le	easehold improvements		.			15,962,2	254	8,835,4	-58		7,126,796
d Ec	quipment		.			211,959,7	719	135,024,8	44	7	6,934,875
	ther										
	Add lines 1a through 1e (Column (d) must e	equal Form 990, Part >	X, colu	mn (E	3), line 10(c	:).)		🛌		2,08	2,062,771

Part VII Investments—Other Securities. See F	orm 990, Part X, line 12	2.
(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) DEF COMP LIFE INS - CSV	2,928,551	F
(B) INV FUND FOR 457 LIABILITIES	24,845,468	F
(C) BENEFICIAL INT PERPETUAL TSTS	24,588,788	F
(D) REC FROM CRUTS HELD BY 3RD PTY	2,295,308	F
(E) LIFE INCOME FUNDS	12,558,130	F
(F) LIMITED PARTNERSHIPS	56,152,951	F
(G) OTHER SECURITIES	388,923,637	F
(H) BONDS AND NOTES	31,000	F
(I) OTHER STOCKS	747,525	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	513,071,358	
Part VIII Investments—Program Related. See (a) Description of investment type	Form 990, Part X, line : (b) Book value	(c) Method of valuation
(a) Bescription of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin		(I) Particular
(a) Descript	cion	(b) Book value
-		+
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.		
Part X Other Liabilities. See Form 990, Part X (a) Description of liability	, line 25. (b) Book value	
Federal income taxes	0	
REFUNDABLE ADVANCES	28,886,946	
INSURANCE RESERVES	7,353,085	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	36,240,031	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,177,984,172
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	84,558,035
3	Subtract line 2e from line 1	3	1,093,426,137
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 9,670,229		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4 c	213,087,263
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,306,513,400
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	1,119,771,792
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
u	Other (Describe in Fait All1)	1	
e	Add lines 2a through 2d	2e	25,952,312
		1	25,952,312 1,093,819,480
e	Add lines 2a through 2d	2e	
e 3	Add lines 2a through 2d	2e 3	
e 3 4	Add lines 2a through 2d	2e 3	· · · · ·
e 3 4 a	Add lines 2a through 2d	2e 3	

Part XIII Supplemental Information

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

Information		
Identifier	Return Reference	Explanation
SCHEDULE D, PART III, LINE 4		THE UNIVERSITY HOLDS A COLLECTION OF HISTORICAL DOCUMENTS IN THE AMOUNT OF \$5,710,000 IN ADDITION, THE UNIVERSITY HOLDS A PERMANENT COLLECTION OF ARCHIVES, HISTORICAL DOCUMENTS, AND ARTWORK WHICH INCLUDES PAINTINGS, SCULPTURES, GRAPHICS, TEXTILES, CERAMICS, HISTORIC FURNISHINGS, AND PHOTOGRAPHS WITHIN THE COLLECTION ARE ARTIFACTS THAT ARE OF SIGNIFICANCE TO BOTH THE SCHOOL AND THE DISTRICT OF COLUMBIA THE COLLECTION FURTHERS THE CURRICULAR OFFERINGS OF THE UNIVERSITY THROUGH BOTH RESEARCH AND STUDY, AND ALSO PROMOTES LIFELONG LEARNING AND RECREATION IN THE VISUAL ARTS THROUGH EXHIBITIONS AND EDUCATIONAL PROGRAMS FOR THE UNIVERSITY AND THE GREATER COMMUNITY THE COLLECTION IS MANAGED BY THE UNIVERSITY'S LUTHER W BRADY ART GALLERY, AN EDUCATIONAL GALLERY LOCATED ON CAMPUS THE UNIVERSITY ALSO MAINTAINS A SECOND GALLERY THROUGH THE SUPPORT OF ITS FINE ARTS AND ART HISTORY STUDENTS THE DIMOCK GALLERY PROVIDES A "HANDS-ON" EXPERIENCE FOR CURATING AND PRESENTING STUDENTS' CREATIVE ENDEAVORS WHERE STUDENTS CAN ORGANIZE EXHIBITIONS AND LEARN ABOUT EXHIBITION DESIGN WITH THE ADVICE OF FACULTY AND CURATORS
SCHEDULE D, PART V, LINE 4		THE UNIVERSITY'S ENDOWMENT PROVIDES STABLE FINANCIAL SUPPORT TO A WIDE VARIETY OF PROGRAMS AND ACTIVITIES IN PERPETUITY, PLAYING A CRITICAL ROLE IN ENABLING THE UNIVERSITY TO ACHIEVE ITS MISSION PROGRAMS SUPPORTED BY THE ENDOWMENT INCLUDE SCHOLARSHIPS, CHAIRS AND PROFESSORSHIPS, FELLOWSHIPS, RESEARCH ACTIVITIES, AND LIBRARIES
SCHEDULE D, PART XI, LINE 2D - OTHER ADJUSTMENTS		CHANGE IN VALUE OF CHARITABLE TRUSTS - \$2,415,309 NOTE ADJUSTMENT - \$250,000 SUBSIDIARY REVENUE - \$162,177 RECOVERIES (LOSSES) ON PLEDGE CONTRIBUTIONS - (\$1,102,596) TOTAL TO SCHEDULE D, PART XI, LINE 2D - \$1,724,890
SCHEDULE D, PART XI, LINE 4B - OTHER ADJUSTMENTS		UNIVERSITY FUNDED SCHOLARSHIPS NETTED AGAINST FS REVENUE - \$229,031,145 RENTAL PROPERTY EXPENSES NETTED AGAINST TAX REVENUE - (\$25,570,151) FUNDRAISING EVENTS EXPENSES NETTED AGAINST TAX REVENUE - (\$43,960) TOTAL TO SCHEDULE D, PART XI, LINE 4B - \$203,417,034
SCHEDULE D, PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL PROPERTY EXPENSES NETTED AGAINST TAX REVENUE - \$25,570,151 FUNDRAISING EVENTS EXPENSES NETTED AGAINST TAX REVENUE - \$43,960 SUBSIDIARY EXPENSE - \$338,201 TOTAL TO SCHEDULE D, PART XII, LINE 2D - \$25,952,312
SCHEDULE D, PART XII, LINE 4B - OTHER ADJUSTMENTS		UNIVERSITY FUNDED SCHOLARSHIPS NETTED AGAINST FS REVENUE - \$229,031,145

Additional Data

Software ID: Software Version:

EIN: 53-0196584

Name: The George Washington University

Form 990, Schedule D, Part VII - Investin	ents – Other Securities
(a) Description of security or cateory	(b)Book value
())	

(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(3)Other		
(A) DEF COMP LIFE INS - CSV	2,928,551	F
(B) INV FUND FOR 457 LIABILITIES	24,845,468	F
(C) BENEFICIAL INT PERPETUAL TSTS	24,588,788	F
(D) REC FROM CRUTS HELD BY 3RD PTY	2,295,308	F
(E) LIFE INCOME FUNDS	12,558,130	F
(F) LIMITED PARTNERSHIPS	56,152,951	F
(G) OTHER SECURITIES	388,923,637	F
(H) BONDS AND NOTES	31,000	F
(I) OTHER STOCKS	747,525	F

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Employer identification number The George Washington University 53-0196584 Part I YES NO 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 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 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 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 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 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo 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? Yes 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

Yes

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

Identifier	Return Reference	Explanation
SCHEDULE E, LINE 3		THE POLICY IS PUBLISHED ON THE UNIVERSITY'S WEBSITE AND IS PRINTED IN ALL MAJOR UNDERGRADUATE AND GRADUATE APPLICATION MATERIALS, INCLUDING UNDERGRADUATE AND GRADUATE BULLETINS AND COURSE CATALOGS, STUDENT HANDBOOKS, FINANCIAL AID SOURCEBOOKS, GUIDE TO STUDENT RIGHTS AND RESPONSIBILITIES, AND EMPLOYMENT APPLICATION MATERIALS THE UNIVERSITY CONTINUES IN ITS EFFORTS TO ENSURE ALL SUPPLEMENTARY WRITTEN COMMUNICATIONS ALSO INCLUDE A REFERENCE TO THE POLICY
SCHEDULE E, LINE 6A		THE UNIVERSITY RECEIVES FINANCIAL ASSISTANCE FROM VARIOUS GOVERNMENTAL AGENCIES, WITHIN THE FEDERAL GOVERNMENT AND WITHIN LOCAL JURISDICTIONS THE GOVERNMENTAL GRANTS AND CONTRACTS SUPPORT CERTAIN RESEARCH PROJECTS AND STUDENT FINANCIAL AID
SCHEDULE E, LINE 6B		THE UNIVERSITY DETECTED AND SELF REPORTED A THEFT THAT HAD BEEN PERPETRATED BY AN INDIVIDUAL WITH CRIMINAL INTENT IN COLLUSION WITH OTHERS ON A FEDERAL COOPERATIVE AGREEMENT ACTIVITY ON THAT AGREEMENT WAS PARTIALLY SUSPENDED ON JUNE 29, 2004 DURING THE INVESTIGATION AND THE INDIVIDUAL WAS TERMINATED AND SUBSEQUENTLY IMPRISONED ALL ACTIVITY ON THE AGREEMENT WAS FULLY REINSTATED ON OCTOBER 31, 2005

Schedule E (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493132017064

OMB No 1545-0047

2012

Open to Public Inspection

No

Employer identification number

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Department of the Treasury Internal Revenue Service

Name of the organization

The George Washington University

► Attach to Form 990. ► See separate instructions.

		53-0196584
Part I	General Information on Activities Outside the United States. Comple	te if the organization answered
	"Vac" to Form 000 Part IV line 14h	

- **2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds 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
	See Add'l Data		-	-		
3a	Sub-total	4	137			213,995,000
b	Total from continuation sheets to Part I					50,000
c	Totals (add lines 3a and 3b)	4	137			214,045,000

art II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form	າ 990
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.	
	Ture 19, the 19, for any received more than \$5,000. Furth earlier admicated it additional space is needed.	

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								

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

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 b	<u>pe duplicated if additio</u>	nal space is ne	eded.		1		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount 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)
STUDY ABROAD SCHOLARSHIPS	Central America and the Caribbean	10	113,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	East Asia and the Pacific	80	1,246,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Europe (Including Iceland and Greenland)	470	6,931,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Middle East and North Africa	50	678,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	North America	1	21,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Russia and the Newly Independent States	10	153,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	South America	50	820,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	South Asia	20	·	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Sub-Saharan Africa	50	781,000	STUDENT ACCT			

Part IV Foreign Forms

1	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)	굣	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	<u> </u>	Yes	Г	Νo
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)	굣	Yes	Γ	Νo
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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	Νo
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)	굣	Yes	Γ	Νo
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).	اح	Yes	Г	No

Schedule F (Form 990) 2012

Part V Supplemental Information

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

Identifier ReturnReference Explanation SCHEDULE F, PART I, LINE 2 GRANTS AND OTHER ASSISTANCE TO GOVERNMENT AND ORGANIZATIONS GW MAINTAINS A FORMAL SUBRECIPIENT MONITORING POLICY FOR USE OF SPONSORED FUNDS THE POLICY APPLIES TO SUBRECIPIENTS WHO ARE PERFORMING A PORTION OF THE SPONSORED PROJECT WORK EXTERNALLY AND CONFORMS TO THE APPLICABLE FEDERAL RULES AND REGULATIONS REQUIRED BY VARIOUS OMB CIRCULARS GW HAS INTERNAL PROCEDURES ASSESSING RISK RELATED TO LOW, MEDIUM, AND HIGH RISK SUBRECIPIENTS BEFORE A SUBAWARD IS DRAFTED AND SUBSEQUENTLY EXECUTED PROCEDURES FOR EARLY RISK ASSESSMENT AND DURING THE AWARD MONITORING ARE DEFINED BY ROLES AND RESPONSIBILITIES AT GW AND INCLUDE, BUT ARE NOT LIMITED TO, THE PRINCIPAL INVESTIGATOR, HIS/HER DEPARTMENT ADMINISTRATORS, CENTRAL RESEARCH, AND FINANCIAL OFFICES WITHIN GW GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS THE FINANCIAL AID OFFICE KEEPS RECORDS ON ITS INTEGRATED SOFTWARE SYSTEM THAT SUBSTANTIATES THE AMOUNT GRANTED TO EACH STUDENT, THE ELIGIBILITY CRITERIA FOR EACH STUDENT, AND THE SELECTION PROCESS USED IN AWARDING ASSISTANCE THE UNIVERSITY'S GRANTS AND OTHER ASSISTANCE ARE INITIALLY CREDITED DIRECTLY TO THE STUDENT'S ACCOUNT IN ITS INTEGRATED SOFTWARE SYSTEM IN ORDER TO PAY FOR TUITION, FEES, ROOM AND BOARD, AND/OR TEXTBOOK CHARGES A CHANGE IN ENROLLMENT STATUS RESULTS IN WEEKLY REPORTS THAT FINANCIAL AID STAFF REVIEW FOR POSSIBLE ADJUSTMENTS THE BALANCE OF AID IN EXCESS OF THE ABOVE CHARGES CAN BE REFUNDED TO THE STUDENT FOR LIVING EXPENSES THE SYSTEM CHECKS THAT THE STUDENT IS STILL ENROLLED BEFORE ISSUING THE REFUND

Additional Data

Software ID: Software Version:

EIN: 53-0196584

Name: The George 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			Investments		129,468,000
East Asia and the Pacific			Investments		51,208,000
South Asia			Investments		1,719,000

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		9	1 3	EDUCATION AND RESEARCH	355,000			
East Asia and the Pacific		16		EDUCATION AND RESEARCH	4,435,000			
Europe (Including Iceland and Greenland)	3	46		EDUCATION AND RESEARCH	16,294,000			

<u>Form 990 Schedule F F</u>	orm 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	
Middle East and North Africa		11	· · · · 3 · · · · · · · · · · · · · · · · · · ·	EDUCATION AND RESEARCH	1,912,000	
North America		8		EDUCATION AND RESEARCH	898,000	
Russia and the Newly Independent States		24	· · · · 3 · · · · · · · · · · · · · · · · · · ·	EDUCATION AND RESEARCH	471,000	

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ties Outside T</u>	he 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 America	1	12	1 -	EDUCATION AND RESEARCH	1,856,000
South Asia		5	· · · 3 · · · · · · · · · · · · · · · · · · ·	EDUCATION AND RESEARCH	757,000
Sub-Saharan Africa		6	1 -	EDUCATION AND RESEARCH	3,609,000

Form 990 Schedule F I	orm 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			Fundraising		867,000		
Europe (Including Iceland and Greenland)			Fundraising		95,000		
Middle East and North Africa			Fundraising		42,000		

Form 990 Schedule F F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he 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			Fundraising		4,000
South America			Fundraising		5,000
South Asia			Fundraising		50,000

(b) IRS code (a) Name of section (c) Region (d) Purpose of grant cash grant c	(f) Manner of cash disbursement	(g) A mount of non- cash	(h) Description of	(ı) Method of valuation
applicable)		assistance	non-cash assistance	(book, FMV, appraisal, other)
Sub-Saharan Africa SUBAWARD 728,000 EF	≛FT			
East Asia and the SUBAWARD 282,000 EF	≛FT .			
East Asia and the SUBAWARD 447,000 EF	≛FT .			
Sub-Saharan Africa SUBAWARD 183,000 EF	≛FT '			1

, Form 990 Schedu	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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	SUBAWARD	118,000	EFT			
		East Asia and the Pacific	SUBAWARD	106,000	EFT			
		Europe (Including Iceland and Greenland)	SUBAWARD	21,000	EFT			
		North America	SUBAWARD	319,000	EFT			
1								

, Form 990 Scheau	Form 990 Schedule F Part II - Grants or Entitles Outside The United States							
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
		South America	SUBAWARD	43,000	EFT			
		East Asia and the Pacific	SUBAWARD	109,000	EFT			
		Sub-Saharan Africa	SUBAWARD	7,000	EFT '			
		Europe (Including Iceland and Greenland)	SUBAWARD	85,000	EFT			

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Supplemental Information Regarding **Fundraising or Gaming Activities**

OMB No 1545-0047

DLN: 93493132017064

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Name of the organization The George Washington University **Employer identification number**

53-0196584

Part I	Fundraising A	activities. C	Complete if	the organization a	answered "`	Yes" to F	Form 990, I	Part IV,	, line 17	7.
--------	---------------	---------------	-------------	--------------------	-------------	-----------	-------------	----------	-----------	----

- 1 Indicate whether the organization raised funds through any of the following activities Check all that apply
- Solicitation of non-government grants
 - $\overline{}$ Solicitation of government grants Internet and email solicitations
 - Phone solicitations Special fundraising events
- In-person solicitations
- 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?

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	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
GRENZEBACH GLIER AND ASSOC 401 NORTH MICHIGAN AVE SUITE 2800 CHICAGO, IL 60611	OVERALL STRATEGY		No		290,577	-290,577
ADVANCEMENT RESOURCES LLC 3349 SOUTHGATE COURT SW CEDAR RAPIDS, IA 52404	FUNDRAISER TRAINING		No		184,250	-184,250
HARRIS CONNECT LLC 1511 ROUTE 22 SUITE C-25 BREWSTER, NY 10509	STRATEGY DIRECT SOLI		No	17,084	94,636	-77,552
THE STELTER COMPANY 10435 NEW YORK AVE DES MOINES, IA 50322	PLANNED GIVING CAMP		No		79,899	-79,899
RUFFALOCODY LLC 65 KIRDWOOD NORTH RD SW CEDAR RAPIDS, IA 52404	TELE FUNDRAISING		No	103,256	77,093	26,163
PENTERA INC 8650 COMMERCE PARK PLACE STE G INDIANAPOLIS, IN 46268	PLANNED GIVING CAMP		No		44,938	-44,938
LEGACY LEADERS INC 425 UNIVERSITY AVE SUITE 700 TORONTO, ONTARIO CA M5G 1T6	PLANNED GVG DIRECT SOLI		No	12,563	26,446	-13,883
al			▶	132,903	797,839	-664,936

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

Sche	dule	G (Form 990 or 990-EZ) 2012				Page 2
Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi			
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events
			Event #1	Event #2	4	(add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	37,868	36,275	70,008	144,151
Şeve	2	Less Contributions	36,183	3	22,900	59,083
	3	Gross income (line 1 minus line 2)	1,685	36,275	47,108	85,068
	4	Cash prizes				
မွာ	5	Noncash prizes		3,413	2,874	6,287
Expenses	6	Rent/facility costs	12,719	27	1,770	14,516
ă	7	Food and beverages .		15,746	1,877	17,623
Direct	8	Entertainment			240	240
ā	9	Other direct expenses .			5,294	5,294
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(43,960)
	11	Net income summary Combine lii	ne 3, column (d), and line	10	🛌	41,108
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	art IV, line 19, or repo	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>공</u>	1	Gross revenue				
Ses	2	Cash prizes				
sesued	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>D</u>	5	Other direct expenses				
			┌ Yes	☐ Yes	Г Yes	
	6	Volunteer labor	□ No	□ No	│ No	Ţ
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	🕨	
9	Ent	er the state(s) in which the organiza	ition operates gaming ac	tivities		
а		the organization licensed to operate				. Fyes FNo
b	If"I	No," explain				
10a		re any of the organization's gaming l				· · 「Yes 「No
b	11	Yes," explain				

oes	es the organization operate gaming activities with nonmembers?	No							
2	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?	s L No							
3	Indicate the percentage of gaming activity operated in	.S 1 140							
а									
b	An outside facility								
4									
	Name 🟲								
	Address ►								
	Address F								
5a	Does the organization have a contract with a third party from whom the organization receives gaming								
	revenue?	s Γ_{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 ►								
	, tudi ess r								
6	Gaming manager information								
_									
	Name 🟲								
	Gaming manager compensation 🟲 \$								
	Description of services provided •								
	Description of services provided 🕨								
7	Director/officer								
	Director/officer								
	Director/officer Employee Independent contractor Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to								
	Director/officer Employee Independent contractor Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to	es Γ No							

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).

Identifier	Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (I)		1 GRENZEBACH GLIER AND ASSOC - 401 NORTH MICHIGAN AVE, SUITE 2800, CHICAGO, ILLINOIS 60611 2 ADVANCEMENT RESOURCES LLC - 3349 SOUTHGATE COURT SW, CEDAR RAPIDS, IOWA 52404 3 HARRIS CONNECT LLC - 1511 ROUTE 22, SUITE C-25, BREWSTER, NEW YORK 10509 4 THE STELTER COMPANY - 10435 NEW YORK AVE, DES MOISES, IOWA, 50322 5 RUFFALOCODY LLC - 65 KIRDWOOD NORTH RD SW, CEDAR RAPIDS, IOWA, 52404 6 PENTERA INC - 8650 COMMERCE PARK PLACE, STE G, INDIANAPOLIS, INDIANA 46268 7 LEGACY LEADERS INC - 425 UNIVERSITY AVE, SUITE 700, TORONTO, ONTARIO, CANADA M5G 1T6
SCHEDULE G, PART I, LINE 2B, COLUMN (V)		FUNDRAISER AGREEMENTS THAT PROVIDE BOTH PAYMENTS FOR SERVICES AND PAYMENTS FOR EXPENSES REQUIRE EXPENSES TO BE DOCUMENTED WITH RECEIPTS THERE WERE NO AGREEMENTS WITH FUNDRAISERS EXCLUSIVELY FOR EXPENSES

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DLN: 93493132017064

OMB No 1545-0047

Department of the Treasury

Schedule I

(Form 990)

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Internal Revenue Service				Attach to Form 990				Inspection
Name of the organization The George Washingtor	n University						Employer identification	on number
							53-0196584	
Part I General								
the selection crit	erıa used to awar	d the grants or ass	ıstance?		e grantees' eligibility for ed States			✓ Yes
Part II Grants a	nd Other Ass	sistance to Gov	ernments and O	rganizations in the	United States. Con rt II can be duplicate			es" to
(a) Name and addre organization or government		(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
See Addıtıonal Data	Table							
				ed in the line 1 table .			· · · • –	123 54

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNIV-AWARDED GRANTS, SCHOLARSHIPS, AND ALLOCATIONS	9000	218,090,000			
(2) STIPENDS, PRIZES, AND AWARDS	3000	19,378,000			
(3) SUBAWARD	1	131,000			
Part IV Supplemental Informa	tion.			•	

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

Identifier	Return Reference	Explanation
SCHEDULE I, PART I, LINE 2		GRANTS AND OTHER ASSISTANCE TO GOVERNMENT AND ORGANIZATIONS (INCLUDING SUBAWARD TO INDIVIDUAL) GW MAINTAINS A FORMAL SUBRECIPIENT MONITORING POLICY FOR USE OF SPONSORED FUNDS BY SUBRECIPIENTS WHO ARE PERFORMING A PORTION OF THE SPONSORED PROJECT WORK EXTERNALLY BY THE SUBRECIPIENT AND CONFORMS TO APPLICABLE FEDERAL RULES AND REGULATIONS REQUIRED BY VARIOUS OMB CIRCULARS GW HAS INTERNAL PROCEDURES ASSESSING RISK RELATED TO LOW, MEDIUM, AND HIGH RISK SUBRECIPIENTS BEFORE A SUBAWARD IS DRAFTED AND SUBSEQUENTLY EXECUTED PROCEDURES FOR EARLY RISK ASSESSMENT AND DURING THE AWARD MONITORING ARE DEFINED BY ROLES AND RESPONSIBILITIES AT GOW AND INCLUDE BUT ARE NOT LIMITED TO, THE PRINCIPAL INVESTIGATOR, HIS/HER DEPARTMENT ADMINISTRATORS, CENTRAL RESEARCH, AND FINANCIAL OFFICES WITHIN GW GW HILLEL ONLY - THE ORGANIZATION PRESENTED PLANS FOR THE RENOVATION, MAINTENANCE, FURNISHING, AND ENDOWMENT OF GW HILLEL'S FACILITIES LOCATED ON THE GW CAMPUS DETAILS, SUCH AS BUDGETS, ARE PROVIDED TO GW ON REQUEST IN CONNECTION WITH ITS REVIEW A REPORT WILL BE PROVIDED TO GW UPON COMPLETION OF THE RENOVATION METRO TEEN AIDS ONLY - THIS AWARD WAS GIVEN BY THE LEARNING BY GIVING FOUNDATION GW COMPLETES A SITE VISIT TO ENSURE THE ORGANIZATION COMPLETED THE PROJECT AND TO ALLOW STUDENTS TO SEE THE RESULTS A REPORT IS ALSO PROVIDED GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS THE FINANCIAL AID OFFICE KEEPS RECORDS ON ITS INTEGRATED SOFTWARE SYSTEM THAT SUBSTANTIATES THE AMOUNT GRANTED TO EACH STUDENT, THE ELIGIBILITY CRITERIA FOR EACH STUDENT, AND THE SELECTION PROCESS USED IN AWARDING ASSISTANCE THE UNIVERSITY'S GRANTS AND OTHER ASSISTANCE TO RECORD TO PROVIDED DIRECTLY TO THE STUDENT SACCOUNT IN ITS INTEGRATED SOFTWARE SYSTEM THAT SISTEM FOR EACH STUDENT, AND THE STUDENT SACCOUNT IN ITS INTEGRATED SOFTWARE SYSTEM IN ORDER TO PAY FOR TUITION, FEES, ROOM AND BOARD, AND/OR TEXTBOOK CHARGES A CHANGE IN ENROLLMENT STATUS RESULTS IN WEEKLY REPORTS THAT FINANCIAL AID STAFF REVIEW FOR POSSIBLE ADJUSTMENTS THE BALANCE OF AID IN EXCESS OF THE ABOVE C
SCHEDULE I, PART II		IN RECOGNITION OF THE SERVICES THAT GW HILLEL PROVIDES TO STUDENTS AT GW, GW AND GW HILLEL CONDUCTED A JOINT FUNDRAISING CAMPAIGN FOR THE RENOVATION, MAINTENANCE, FURNISHINGS, AND ENDOWMENT OF GW HILLEL'S FACILITIES LOCATED ON THE GW CAMPUS ALL RESTRICTED CONTRIBUTIONS RECEIVED BY GW UNDER THE CAMPAIGN ARE AWARDED AS GRANTS TO GW HILLEL UNDER THE TERMS OF THE

JOINT FUNDRAISING AGREEMENT

Software ID:

Software Version:

EIN: 53-0196584

Name: The George Washington University

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACKCO INC1326 N CENTRAL AVENUE PHOENIX,AZ 85004	46-0316645		267,000				SUBA WARD
AFRICAN WOMENS CANCER AWARENESS ASSOCIATION8701 GEORGIA AVE SILVER SPRING, MD 20910	73-1704355	501(C)(3)	10,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 COLL OF MEDICINE OF YESHIVA UNIV1300 MORRIS PARK AVE BRONX,NY 10461	13-1624225	501(C)(3)	43,000				SUBA WARD
ALLIANCE FOR HEALTH 1345 MONROE AVE NW GRAND RAPIDS,MI 49505	38-2004919	501(C)(3)	37,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 BOARD OF MEDICAL SPECIALTIES222 NORTH LASALLE ST CHICAGO,IL 60601	23-7304902	501(C)(3)	574,000				SUBA WA RD
AMERICAN INSTITUTE FOR RESEARCH1000 THOMAS JEFF ST NW WASHINGTON, DC 20007	25-0965219	501(C)(3)	708,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICA'S PROMISE THE ALLIANCE OF YOUTH1110 VERMONT AVE NW WASHINGTON,DC 20005	54-1848713	501(C)(3)	77,000				SUBA WARD
ASSOCIATION OF IMMUNIZATION MANAGERS620 HUNGERFORD DRIVE ROCKVILLE, MD 20850	52-2346043	501(C)(3)	41,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAILIT HEALTH PURCHASING LLC56 PICKERING STREET NEEDHAM,MA 02492	04-3340991		78,000				SUBA WARD
BARRERA ASSOCIATES INC1025 CONN AVE NW WASHINGTON, DC 20036	75-2285168		24,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 COLLEGE OF MEDICINEP O BOX 201361 HOUSTON,TX 77216	74-1613878	501(C)(3)	552,000				SUBA WARD
BAYLOR RESEARCH INSTITUTE3310 LIVE OAK STREET DALLAS,TX 75204	75-1921898	501(C)(3)	6,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 DEACONESS MED CTR330 BROOKLINE AVE BOSTON, MA 02215	04-2103881	501(C)(3)	10,000				SUBA WARD
BOSTON MEDICAL CENTER CORPORATION660 HARRISON AVE ROOM 262 BOSTON,MA 02118	04-3314093	501(C)(3)	62,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BREAD FOR THE CITY1525 SEVENTH ST NW 2ND FLOOR WASHINGTON, DC 20001	52-1138207	501(C)(3)	8,000				SUBA WARD
BRIDGES TO EXCELLENCE 13 SUGAR STREET NEWTOWN,CT 06470	51-0461495	501(C)(3)	280,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHAM AND WOMENS HOSPITALPO BOX 3887 BOSTON,MA 02241	04-2312909	501(C)(3)	221,000				SUBA WARD
BRONX LEBANON HOSPITAL CENTER1276 FULTON AVE AT 169TH ST BRONX,NY 10456	11-3125823	501(C)(3)	356,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MASS AVE NW WASHINGTON,DC 20036	53-0196577	501(C)(3)	24,000				SUBA WA RD
CAMUY HEALTH SERVICES INCPO BOX 660 CAMUY,PR 00627	66-0428652	501(C)(3)	10,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITAL CITY AREA HEALTH EDU CTR1224 M ST NW WASHINGTON, DC 20005	26-3301051	501(C)(3)	115,000				SUBA WA RD
CARNEGIE MELLON UNIVERSITYPO BOX 371032 STE 201 PITTSBURGH,PA 15250	25-0969449	501(C)(3)	31,000				S U B A WA R D

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 UNIVERSITY10900 EUCLID AVE CLEVELAND,OH 44106	34-1018992	501(C)(3)	647,000				SUBA WARD
CENTER FOR APPLIED LINGUISTICS4640 40TH STREET NW WASHINGTON, DC 20016	52-0807619	501(C)(3)	20,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 FOR FAMILY HEALTH505 N JACKSON ST JACKSON,MI 49201	38-3251354	501(C)(3)	20,000				SUBA WARD
CENTER FOR HEALTH CARE STRATEGIES200 AMERICAN METRO BLVD HAMILTON,NJ 08619	22-3375015	501(C)(3)	292,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CERNER CORPORATION 2800 ROCKCREEK PKWY KANSAS CITY,MO 64117	43-1196944		443,000				SUBA WARD
CHILDRENS HOSP OF PHILADELPHIA34 CIVIC CTR BLVD PHILADELPHIA,PA 19104	23-1352166	501(C)(3)	579,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 LOS ANGELES4650 SUNSET BLVD LOS ANGELES,CA 90027	95-1690977	501(C)(3)	562,000				SUBA WARD
CHILDRENS HOSPITAL MEDICAL CENTER OF AKRON3333 BURNET AVENUE CINCINNATI,OH 45229	34-0714357	501(C)(3)	34,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MERCY HOSPITAL2401 GILHAM ROAD KANSAS CITY,MO 64108	44-0605373	501(C)(3)	7,000				SUBA WARD
CHILDRENS NATL MEDICAL CENTER111 MICHIGAN AVE WASHINGTON, DC 20010	52-1640403	501(C)(3)	37,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 RESEARCH INSTITUTE111 MICHIGAN AVE NW WASHINGTON,DC 20010	52-1654453	501(C)(3)	328,000				SUBA WARD
CINCINNATI CHILDRENS HOSPITAL3333 BURNET AVE CINCINNATI,OH 45229	31-0833936	501(C)(3)	36,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 615 WEST 131ST ST RM 458 NEW YORK, NY 10027	13-5598093	501(C)(3)	2,713,000				SUBA WARD
COOPER HEALTH SYSTEM3 EXECUTIVE CAMPUS CHERRY HILL,NJ 08002	21-0634462	501(C)(3)	408,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
D H LLOYD AND ASSOC INC1625 K ST NW WASHINGTON,DC 20006	52-1370661		13,000				SUBA WARD
DC PRIMARY CARE ASSOCIATION1411 K ST NW STE 300 STE 330 WASHINGTON, DC 20005	52-1999196	501(C)(3)	35,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DENVER HEALTH AND HOSPITAL AUTHORITY AUTHORITY PO BOX 17093 DENVER,CO 80217	84-1343242		442,000				SUBA WARD
DUKE UNIVERSITY2200 W MAIN STREET DURHAM,NC 27705	56-0532129	501(C)(3)	306,000				SUBAWARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDVANTIA INCPO BOX 1348 SUITE 820 CHARLESTON, WV 25325	55-0484812	501(C)(3)	72,000				SUBA WA RD
EHR INTEGRATION SERVICES2689 PINE GROVE RD SKANEATELES,NY 13152	20-5368952		86,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL RIO HEALTH CENTER 839 W CONGRESS ST TUCSON,AZ 85745	86-0285857	501(C)(3)	135,000				SUBA WARD
EMORY UNIVERSITY1599 CLIFTON RD NE 4TH FL ATLANTA,GA 30322	58-0566256	501(C)(3)	693,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY AND MED COUNSELLING SERV INC 2041 MLK JR AVE WASHINGTON, DC 20020	52-1073362	501(C)(3)	149,000				SUBA WA RD
FRED HUTCHINSON CANCER RSCH CTR1100 FAIRFVIEW AVE NORTH SEATTLE, WA 98109	23-7156071	501(C)(3)	336,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GALLAUDET UNIVERSITY 800 FLORIDA AVE NE WASHINGTON,DC 20002	53-0199507	501(C)(3)	11,000				SUBA WARD
GEORGE MASON UNIVERSITY4400 UNIVERSITY DR FAIRFAX,VA 22030	54-0836354	VIRGINIA	65,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGETOWN UNIVERSITY37TH O ST NW WASHINGTON,DC 20057	53-0196603	501(C)(3)	502,000				SUBA WARD
GREATER DETROIT AREA HEALTH COUNCIL407 E FORT ST DETROIT,MI 48226	38-1360904	501(C)(3)	39,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER KC LINC INC 6000 N OAK 6TH FLOOR KANSAS CITY,MO 64118	43-1676730	501(C)(3)	35,000				SUBA WA RD
GROUP HEALTH COOPERATIVEPO BOX 34587 SUITE 300 SEATTLE, WA 98124	91-0511770	501(C)(3)	77,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD UNIVERSITYPO BOX 415649 BOSTON,MA 02241	04-2103580	501(C)(3)	34,000				SUBA WARD
HEALTH IMPROVEMENT COLLAB OF GREATER CINCINNATI2649 ERIE AVE CINCINNATI,OH 45208	31-1449807	501(C)(3)	29,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTHCARE QUALITY INSTITUTE9483 RANCH PARK WAY ELK GROVE,CA 95624	27-0655513		380,000				SUBA WARD
HEALTHY MEMPHIS COMMON TABLE6027 WALNUT GROVE RD MEMPHIS,TN 38120	62-1820264	501(C)(3)	25,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HENRY FORD HEALTH SYSTEMONE FORD PLACE 5EF DETROIT,MI 20422	38-1357020	501(C)(3)	411,000				SUBA WARD
HENRY L STIMSON CENTER 1111 19TH ST 12TH FL WASHINGTON, DC 20036	52-1640938	501(C)(3)	267,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HILLEL AT THE GEORGE WASHINGTON UNIVERSITY INC2300 H STREET NW WASHINGTON, DC 20037	52-6081729	501(C)(3)	175,000				JNT FUND CAMP
HOWARD UNIVERSITY525 BRYANT ST NW WASHINGTON,DC 20059	53-0204707	501(C)(3)	404,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMBOLDT STATE UNIV SPONSORED PROGRAMS FOUNDATIONPO BOX 1185 ARCATA,CA 95518	94-6050071	501(C)(3)	39,000				SUBA WA RD
IDENTITY414 EAST DIAMOND AVE GAITHERSBURG,MD 20877	52-2120012	501(C)(3)	319,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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
IMMUNIZATION ACTION COALITION1573 SELBY AVE STE 234 SAINT PAUL, MN 55104	41-1768237	501(C)(3)	55,000				SUBA WARD
INDIANA UNIVERSITY620 UNION DR RM 518 INDIANAPOLIS,IN 46202	35-6001673	INDIANA	6,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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
INSTITUTE FOR CLINICAL RESEARCHPO BOX 29545 WASHINGTON,DC 20017	52-1336656	501(C)(3)	770,000				SUBA WARD
INSTITUTE FOR FAMILY CENTERED CARE7900 WISCONSIN AVE BETHESDA,MD 22301	52-1777133	501(C)(3)	7,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA STATE UNIVERSITY 3609 ADMIN SERVS BLDG AMES,IA 50011	42-6004224	I O WA	36,000				SUBA WARD
JOHNS HOPKINS UNIVERSITY12529 COLLECTIONS CTR DR CHICAGO,IL 60693	52-0595110	501(C)(3)	149,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIMBALL DESIGN5505 CONN AVE NW WASHINGTON,DC 22015	52-2257825		27,000				SUBA WARD
LA CLINICA DEL PUEBLO INC2831 15TH ST NW WASHINGTON,DC 20009	52-1942551	501(C)(3)	61,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LATIN AMERICAN YOUTH CENTER1419 COLUMBIA RD NW WASHINGTON, DC 20009	52-1023074	501(C)(3)	255,000				SUBA WARD
LOS ANGELES BIOMEDICAL RESEARCHPO BOX 60637 LOS ANGELES, CA 90060	95-2138184	501(C)(3)	249,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LYNN ETHEREDGE GROUP 4805 DERUSSEY PKWY CHEVY CHASE,MD 20815	52-1580137		257,000				SUBA WARD
M&R STRATEGIC SERVICES 1901 L STREET NW WASHINGTON,DC 20036	13-3588025		35,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAGEE WOMENS RESEARCH INST3339 WARD ST PITTSBURGH,PA 15213	25-1462312	501(C)(3)	36,000				SUBA WA RD
MARYS CTR MATERNAL AND CHILD CARE2333 ONTARIO RD NW WASHINGTON, DC 20009	52-1594116	501(C)(3)	195,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS GENERAL HOSPITALPO BOX 3829 BOSTON,MA 02241	04-2697983	501(C)(3)	948,000				SUBA WA RD
MASSACHUSETTS HEALTH QUALITY42 PLEASANT ST STE 3 WATERTOWN,MA 02472	04-3542817	501(C)(3)	31,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MATHEMATICA POLICY RESEARCH INCPO BOX 2393 PRINCETON,NJ 08543	22-2112296		28,000				SUBA WARD
MAUTNER PROJECT1875 CONN AVE NW WASHINGTON, DC 20009	52-1703915	501(C)(3)	95,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDPHARMA PARTNERS LLC101 FEDERAL ST SUITE 1900 BOSTON,MA 02110	20-0271583		34,000				SUBA WARD
MEDSTAR HEALTH RESEARCH INSTITUTEPO BOX 418223 BOSTON,MA 02241	52-6056274	501(C)(3)	109,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
METRO HEALTH INC1012 14TH STREET NW WASHINGTON,DC 20005	52-1556535	501(C)(3)	34,000				SUBA WARD
METROHEALTH MEDICAL CENTERPO BOX 73308 CLEVELAND,OH 44193	34-6004382		31,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
METRO TEEN AIDS651 PENN AVE SE 1 WASHINGTON,DC 20003	52-1610088	501(C)(3)	10,000				LBGF AWARD
MIRIAM HOSPITAL164 SUMMIT ST PROVIDENCE,RI 02906	05-0258905	501(C)(3)	30,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MN COMMUNITY MEASUREMENT3433 BROADWAY ST NE MINNEAPOLIS, MN 55413	35-2246162	501(C)(3)	40,000				SUBA WARD
NATIONAL ACADEMY OF EDUCATION500 FIFTH STREET WASHINGTON, DC 20001	77-0415802	501(C)(3)	78,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL DISABILITY INSTITUTE INC1667 K ST NW STE 640 WASHINGTON, DC 20006	20-4205838	501(C)(3)	161,000				SUBA WARD
NATL ASSN COMMUNITY HEALTH CTRS1330 NEW HAMP AVE NW BETHESDA,MD 20814	77-0415802	501(C)(3)	95,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATL BUREAU OF ECONOMIC RESEARCH INC 1050 MASS AVE CAMBRIDGE, MA 02138	13-1641075	501(C)(3)	57,000				SUBA WARD
NATL BUSINESS COALITION HEALTH1015 18TH ST NW WASHINGTON,DC 20036	65-0328471	501(C)(6)	57,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATL CENTER FOR CREATIVE AGING4125 ABLEMARLE ST NW 730 WASHINGTON, DC 20016	13-3135292		50,000				SUBA WA RD
NATL CTR FOR MANUFACTURING SCIENCES3025 BOARDWALK ST ANN ARBOR, MI 48108	38-2761126	501(C)(3)	75,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATL OPINION RESEARCH CENTER55 E MONROE AVE CHICAGO,IL 60603	36-2167808	501(C)(3)	88,000				SUBA WARD
NATL PARTNERSHIP FOR WOMEN AND FAMILIES 1875 CONN AVE NW WASHINGTON, DC 20009	23-7124915	501(C)(3)	544,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW MEXICO MEDICAL REVIEW ASSOCIATION 5801 OSUNA RD NE ALBUQUERQUE,NM 87109	23-7394943	501(C)(3)	22,000				SUBA WARD
NEW YORK UNIVERSITY18 WASHINGTON PLACE NEW YORK, NY 10003	13-5562308	501(C)(3)	32,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWESTERN UNIVERSITY750 N LAKE SHORE DR CHICAGO,IL 60611	36-2167817	501(C)(3)	754,000				S U B A W A R D
NUEVA VIDA INC2000 P ST NW WASHINGTON, DC 20036	54-1943145	501(C)(3)	14,000				SUBAWARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NWRPCA6512 23RD AVE NW STE 300 SEATTLE,WA 98117	91-1252785	501(C)(3)	44,000				SUBA WA RD
OHIO STATE UNIV RSCH FOUNDATION1960 KENNY RD SUITE 305 COLUMBUS,OH 43210	31-6401599	501(C)(3)	650,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGON HEALTH SCIENCES UNIVERSITY 2525 SW 1ST AVE STE 220 PORTLAND,OR 97201	93-1176109	OREGON	13,000				SUBA WARD
OREGON HEALTHCARE QUALITY CORPORATION 520 SW 6TH AVE PORTLAND, OR 97204	93-1293103	501(C)(3)	40,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGON SOCIAL LEARNING CENTER INC10 SHELTON MCMURPHEY BLVD STE 830 EUGENE, OR 97401	93-0679478	501(C)(3)	112,000				SUBA WA RD
P2 COLLABORATIVE OF WNY INC6225 SHERIDAN DR WILLIAMSVILLE,NY 14221	42-1604185	501(C)(3)	40,000				SU BA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC BUSINESS GROUP ON HEALTH221 MAIN STREET SAN FRANCISCO,CA 94105	94-3093623	501(C)(3)	29,000				SUBA WARD
PACIFIC HEALTH RESEARCH & EDUCATION INSTITUTE3375 KOAPAKA STREET HONOLULU,HI 96819	99-0312283	501(C)(3)	92,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA STATE UNIVERSITY227 BEAVER AVE STATE COLLEGE,PA 16802	24-6000376	PENNSYLVANIA	390,000				SUBA WARD
PHFE12801 CROSSROADS PKWY INDUSTRY,CA 91746	95-2557063	501(C)(3)	17,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE5100 WISCONSIN AVE NW WASHINGTON, DC 20016	52-1394893	501(C)(3)	6,000				SUBA WA RD
PINELAND MHDDAD CSBPO BOX 745 STATESBORO,GA 30459	58-2107992		64,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRASAD ENGG LLC10406 MILLWOOD DRIVE PLYMOUTH,MI 48170	80-0237167		61,000				SUBA WARD
PROVIDENCE HEALTH FOUNDATION1150 VARNUM STREET NE WASHINGTON, DC 20017	52-1275583	501(C)(3)	55,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUGET SOUND HEALTH ALLIANCE2003 WESTERN AVE STE 600 SEATTLE, WA 98121	47-0948895	501(C)(3)	22,000				SUBA WARD
QUALITY COUNTS30 ASSOCIATION DRIVE MANCHESTER,ME 04351	20-4935972	501(C)(3)	20,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
QUILL RESEARCH ASSOCIATES LLC4777 N 33RD STREET ARLINGTON,VA 22207	27-0607639		30,000				S U B A W A R D
RAND CORPORATIONFILE 53174 LOS ANGELES, CA 90074	95-1958142	501(C)(3)	17,000				SUBAWARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESEARCH FOUNDATION OF SUNY750 EAST ADAMS ST CWB SYRACUSE,NY 13210	14-1368361	501(C)(3)	372,000				SUBA WA RD
RESEARCH FOUNDATION OF THE CITY UNIV OF NEW YORK230 WEST 41 STREET NEW YORK, NY 10036	13-1988190	501(C)(3)	12,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUSH UNIVERSITY MEDICAL CTR1700 WEST VAN BUREN CHICAGO,IL 60612	36-2174823	501(C)(3)	72,000				SUBA WARD
SECOND LANGUAGE TESTING INC6135 EXECUTIVE BLVD ROCKVILLE, MD 20852	52-1875192		7,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SECOND STORY INC714 N FREMONT STREET PORTLAND,OR 97227	93-1259389		25,000				SUBA WARD
SMITH FARM CENTER FOR HEALING1632 U STREET NW WASHINGTON, DC 20009	52-1977976	501(C)(3)	22,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SMITHSONIAN INSTITUTION24411 NETWORK PLACE CHICAGO,IL 60673	53-0206027	501(C)(3)	38,000				SUBA WA RD
SOUTHERN REGIONAL EDU BOARD592 10TH ST NW ATLANTA,GA 30318	58-0566141	501(C)(3)	58,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SRI INTERNATIONAL333 RAVENSWOOD AVE MENLO PARK,CA 94025	94-1160950	501(C)(3)	60,000				SUBA WARD
ST LOUIS UNIVERSITY 1100 SOUTH GRAND BLVD ST LOUIS,MO 63134	43-0654872	501(C)(3)	8,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STANFORD UNIVERSITYPO BOX 44253 SAN FRANCISCO,CA 94144	94-1156365	501(C)(3)	326,000				SUBA WARD
TRANSCEN INC451 HUNGERFORD DRIVE ROCKVILLE, MD 20850	52-1487462	501(C)(3)	40,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF UNIV OF PENNSYLVANIA 3451 WALNUT ST PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	232,000				SUBA WARD
TUFTS NEW ENGLAND MED CENTER750 WASHINGTON ST BOSTON, MA 02111	04-3400617	501(C)(3)	69,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UB FAMILY MEDICINE INC 77 GOODELL STREET BOX 453 BUFFALO,NY 14203	16-1280696	501(C)(3)	8,000				SUBA WARD
UNITED MEDICAL CTR FOUNDATION1310 SOUTHERN AVE SE WASHINGTON, DC 20032	26-3390159	501(C)(3)	33,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITY HEALTH CARE INC 1220 12TH ST SE WASHINGTON,DC 20003	52-1572431	501(C)(3)	98,000				SUBA WARD
UNIV OF CA DAVISP O BOX 989062 WEST SACRAMENTO, CA 95798	94-6036494	CALIFORNIA	8,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIV OF CA IRVINE3200 EDUCATION BLDG IRVINE,CA 92697	95-2226406	CALIFORNIA	8,000				SUBA WA RD
UNIV OF CA LOS ANGELES 1125 MURPHY HALL LOS ANGELES,CA 90095	95-6006143	CALIFORNIA	45,000				S U B A W A R D

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIV OF CA SAN FRANCISCOACC OFF-EMF BX 0897 SAN FRANCISCO,CA 94143	94-6036493	CALIFORNIA	269,000				SUBA WA RD
UNIV OF MEDICINE AND DENTISTRY OF NJPO BOX 2685 NEW BRUNSWICK, NJ 08903	22-1775306	NEW JERSEY	621,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIV OF TEXAS SOUTHWESTERN5323 HARRY HINES BLVD DALLAS,TX 75390	75-6002868	TEXAS	1,048,000				SUBA WARD
UNIV TEXAS HEALTH SCIENCE CTR7703 FLOYD CURL DR SAN ANTONIO,TX 78229	74-1586031	TEXAS	9,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIV TEXAS MEDICAL BRANCH IMHPO BOX 4786 LOCKBOX 750 HOUSTON,TX 77210	74-6000949	TEXAS	1,099,000				SUBA WARD
UNIVERSITY OF ALABAMA BIRMINGHAM1530 3RD AVE SOUTH BIRMINGHAM,AL 35294	63-6005396	ALABAMA	808,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 ARKANSAS PO BOX 1404 FAYETTEVILLE,AR 72701	71-6003252	ARKANSAS	192,000				SUBA WARD
UNIVERSITY OF COLORADODEPARTMENT 238 DENVER, CO 80291	84-6000555	COLORADO	409,000				SUBA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 DC4200 CONN AVE NW F428 WASHINGTON, DC 20008	53-6001131	D C	29,000				SUBA WARD
UNIVERSITY OF DELAWARE 116 STUDENT SERVICES BLDG NEWARK, DE 19716	51-6000297	501(C)(3)	52,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 HOUSTON CBFPO BOX 988 HOUSTON,TX 77001	74-6001399	TEXAS	41,000				SUBA WARD
UNIVERSITY OF MARYLANDRM 4101 CHESAPK BLDG COLLEGE PARK,MD 20742	52-6002033	MARYLAND	120,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MIAMI 1800 NW 10TH AVE MIAMI,FL 33136	59-0624458	501(C)(3)	51,000				SUBA WARD
UNIVERSITY OF MICHIGAN BOX 223131 PITTSBURGH,PA 15251	38-6006309	MICHIGAN	61,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 MINNESOTANW 5957/PO BOX 1450 MINNEAPOLIS,MN 55485	41-6007513	MINNESOTA	445,000				SUBA WARD
UNIVERSITY OF NEBRASKA 312 N 14TH ST ALEXANDER W LINCOLN,NE 68588	47-0491233	NEBRASKA	43,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 NORTH CAROLINA104 AIRPORT DR CHAPEL HILL,NC 27599	56-6001393	NORTH CAROLINA	914,000				SUBA WARD
UNIVERSITY OF OKLAHOMAPO BOX 26901 OKLAHOMA CITY, OK 73190	73-6017987	OKLAHOMA	701,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 PITTSBURGHPO BOX 371220 PITTSBURGH,PA 15251	25-0965591	501(C)(3)	433,000				SUBA WARD
UNIVERSITY OF SOUTH CAROLINA516 1/2 MAIN ST COLUMBIA,SC 29208	57-6001153	SOUTH CAROLINA	66,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 TEXASPO BOX 203382 HOUSTON,TX 77216	74-1761309	TEXAS	2,135,000				SUBA WARD
UNIVERSITY OF UTAH201 PRESIDENTS CR SALT LAKE CITY, UT 84112	87-6000525	UTAH	2,695,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 WASHINGTON12455 COLLECTIONS DR CHICAGO,IL 60693	91-6001537	WASHINGTON	1,991,000				SUBA WA RD
UNIVERSITY OF WISCONSINPROGRAMS DRAWER 538 MILWAUKEE,WI 53278	39-1805963	WISCONSIN	428,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN INSTITUTE INC DEPT 950 2100 M ST NW WASHINGTON, DC 20042	52-0880375	501(C)(3)	105,000				SUBA WARD
VA POLYTECHNIC INST AND STATE UNIV1880 PRATT DR STE 2006 BLACKSBURG, VA 24060	54-6001805	VIRGINIA	7,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANDERBILT UNIVERSITY 2200 CHILDRENS WAY NASHVILLE,TN 37232	62-0476822	501(C)(3)	190,000				SUBA WA RD
VIRGINIA COMMONWEALTH UNIVERSITYPO BOX 843039 RICHMOND,VA 23284	54-6001758	VIRGINIA	660,000				SU BA WA RD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VISONARY CONSULTING PARTNERS LLC4031 UNIVERSITY DRIVE FAIRFAX,VA 22030	26-2736634		50,000				SUBA WARD
WAKE FOREST UNIVERSITY MEDICAL CENTER BLVD WINSTON SALEM, NC 27157	56-0532138	501(C)(3)	30,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAKE FOREST UNIVERSITY HEALTHMEDICAL CTR BLVD WINSTONSALEM,NC 27157	22-3849199	501(C)(3)	215,000				SUBA WARD
WASHINGTON HOSPITAL CENTER110 IRVING ST NW WASHINGTON, DC 20010	52-1272129	501(C)(3)	103,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 700 ROSEDALE AVE CAMPUS ST LOUIS,MO 63130	43-0653611	501(C)(3)	320,000				SUBA WARD
WAYNE STATE UNIVERSITY 3750 WOODWARD AVE DETROIT,MI 48201	38-6028429	MICHIGAN	378,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WELLSPAN HEALTHPO BOX 2767 YORK,PA 17401	22-2517863	501(C)(3)	16,000				SUBA WA RD
WHITMAN WALKER HEALTH 1701 14TH ST NW WASHINGTON, DC 20009	52-1122122	501(C)(3)	120,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISCONSIN COLLABORATIVE FOR HEALTHCARE QUALITY INC PO Box 628051 MIDDLETON, WI 53562	55-0848113	501(C)(3)	40,000				SUBA WARD
WOMEN & INFANTS HOSPITAL OF RI101 DUDLEY ST PROVIDENCE, RI 02905	05-0258937	501(C)(3)	690,000				SUBA WARD

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY155 WHITNEY AVENUE NEW HAVEN,CT 06520	06-0646973	501(C)(3)	410,000				SUBAWARD

DLN: 93493132017064

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

The	George Washington University					
			53-0196584			
Pa	rt I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III t					
	First-class or charter travel	जिल्ल	Housing allowance or residence for personal use			
	✓ Travel for companions	, ·	Payments for business use of personal residence			
	✓ Tax idemnification and gross-up payments	, 	·			
	Discretionary spending account	Ė	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des			1b	Yes	
2	Did the organization require substantiation prior to re directors, trustees, and the CEO/Executive Director,			2	Yes	
3	Indicate which, if any, of the following the filing organiorganization's CEO/Executive Director Check all that used by a related organization to establish compensa	t appl	y Do not check any boxes for methods			
	∇ Compensation committee	굣	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VI	I, Section A, line 1a with respect to the filing organizatio	n		
a	Receive a severance payment or change-of-control p	aymer	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t com	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the revenues of	ıne 1 a	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, I compensation contingent on the net earnings of	ıne 1 a	a, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7	Yes	
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in I in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the	rebutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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

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

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

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Addıtıonal Data Table								

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any additional i	nformation	
Identifier	Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A		TRAVEL FOR COMPANIONS THE UNIVERSITY REIMBURSES REASONABLE AND NECESSARY BUSINESS TRAVEL EXPENSES FOR THE SPOUSE OF AN OFFICER THE UNIVERSITY ALSO REIMBURSES 1 KEY EMPLOYEE AND 1 HIGHEST COMPENSATED EMPLOYEE FOR REASONABLE TRAVEL COSTS FOR THEIR SPOUSES TO ATTEND CERTAIN MEETINGS AND NATIONAL CONFERENCES RELATED TO UNIVERSITY BUSINESS TAX INDEMNIFICATION AND GROSS-UP PAYMENTS THE UNIVERSITY PROVIDED GROSS-UPS FOR LIMITED TYPES OF PAYMENTS TO 2 OFFICERS AND 1 FORMER OFFICER HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE THE PRESIDENT AND THE PROVOST AND EXECUTIVE VICE PRESIDENT FOR ACADEMIC AFFAIRS RESIDE IN ON-CAMPUS HOUSING AS A CONDITION OF THEIR EMPLOYMENT FOR THE CONVENIENCE OF THE UNIVERSITY THE RESIDENCES ARE USED FOR UNIVERSITY-RELATED BUSINESS AND ENTERTAINMENT PURPOSES ON A REASONABLE AND CONTINUAL BASIS THE VP FOR DEVELOPMENT, PER AGREEMENT, IS PROVIDED CAMPUS HOUSING THE DEAN OF THE LAW SCHOOL, PER AGREEMENT, WAS PROVIDED A HOUSING ALLOWANCE FOR A PORTION OF THE YEAR CLUB DUES CLUB DUES ARE PAID ON BEHALF OF 1 OFFICER, 2 KEY EMPLOYEES, AND 2 FORMER OFFICERS THE MEMBERSHIPS ARE USED PREDOMINANTLY FOR UNIVERSITY BUSINESS PURPOSES THE ABOVE BENEFITS WERE TREATED AS TAXABLE COMPENSATION WHEN APPROPRIATE
SCHEDULE J, PART I, LINE 4A		NOZER SINGPURWALLA, IRA LUPU, ROBERT CHERNAK, AND JOHN WILLIAMS RECEIVED SEVERANCE PAYMENTS IN THE AMOUNTS OF \$461,260, \$523,202, \$998,400, AND \$1,010,000, RESPECTIVELY
SCHEDULE J, PART I, LINE 4B		IN RECOGNITION OF THE FACT THAT THE UNIVERSITY'S CONTRIBUTIONS TO QUALIFIED RETIREMENT PLAN ('401(a) PLAN') ARE LIMITED BY AN IRS CAP ON COMPENSATION (\$250,000 FOR 2012) AND THE CONTRIBUTION LIMITS FOR DEFINED CONTRIBUTION PLANS (\$50,000 IN 2012), THE UNIVERSITY PROVIDES ALL EMPLOYEES WHO PARTICIPATE IN THE 401(a) PLAN AND WHO EARN COMPENSATION IN EXCESS OF THE CAP WITH CONTRIBUTIONS TO A NONQUALIFIED DEFERRED COMPENSATION PLAN ('457 (f) RESTORATION PLAN') EQUAL TO THE DIFFERENCE BETWEEN THE BENEFIT THE INDIVIDUAL WOULD HAVE RECEIVED UNDER THE 401(a) PLAN IF NO COMPENSATION OR CONTRIBUTION LIMITS APPLIED AND THE AMOUNT ACTUALLY ACCRUED UNDER THE 401(a) PLAN, LESS ANY EMPLOYER CONTRIBUTION TO THE GEORGE WASHINGTON UNIVERSITY ELIGIBLE DEFERRED COMPENSATION PLAN THE AMOUNTS REPORTED IN THIS SECTION ARE ALREADY INCLUDED IN THE COMPENSATION REPORTED IN SCHEDULE J, PART II STEVEN KNAPP - \$184,155 (\$38,640 current year) LOUIS H KATZ - \$27,300 STEVEN LERMAN - \$31,482 BETH NOLAN - \$102,443 (\$21,305 current year) LEO M CHALUPA - \$15,456 MICHAEL MORSBERGER - \$12,590 DONALD W LINDSEY - \$5,488 PAUL SCHIFF BERMAN - \$3,675 SHAHRAM SARKANI - \$52,706 NOZER SINGPURWALLA - \$7,237 THOMAS A MAZZUCHI - \$8,471 MICHAEL LONERGAN - \$26,000 ROBERT A CHERNAK - \$7,920 JOHN F WILLIAMS - \$18,997 JAMES L SCOTT - \$13,063
SCHEDULE J, PART I, LINE 7		GW OFFERED AN ANNUAL INCENTIVE COMPENSATION PLAN FOR CERTAIN SENIOR OFFICIALS THE ANNUAL AWARD OPPORTUNITY IS CAPPED AT A PERCENTAGE OF THEIR SALARY THE PLAN INCLUDES PROGRAMMATIC GOALS AND OBJECTIVES FOR THE YEAR THAT ARE SPECIFIC TO THEIR DEPARTMENT OR DIVISION, AS WELL AS THE INSTITUTIONAL GOALS THE PLAN IS APPROVED ANNUALLY BY THE BOARD OF TRUSTEES' COMMITTEE ON GOVERNANCE, COMPENSATION AND NOMINATIONS (THE "COMMITTEE") PRIOR TO THE PAYOUT, THE COMMITTEE REVIEWS THE PERFORMANCE OF SENIOR OFFICIALS ON THEIR GOALS AND OBJECTIVES AND AWARDS THE INCENTIVE PAYMENTS BASED ON COMPARABLE MARKET DATA THE UNIVERSITY ALSO ENGAGES ITS INTERNAL AUDITORS TO PERFORM SPECIFIC PROCEDURES TO DETERMINE WHETHER (1) MANAGEMENT'S REVIEW OF THE COMPENSATION PROCESS FOLLOWED INTERNAL POLICIES AND PROCEDURES, AND (2) CALCULATIONS AND SOURCE DATA USED TO DETERMINE THE INCENTIVE PAYMENTS COMPLY WITH THE PLAN BEFORE THE DATA IS PROVIDED TO THE COMMITTEE FOR CONSIDERATION
SCHEDULE J, PART II		ALL OF JEFFREY S AKMAN'S COMPENSATION REPORTED IN PART VII AND SCHEDULE J WERE RECEIVED FROM MEDICAL FACULTY ASSOCIATES FOR SERVICES PROVIDED TO GW
SCHEDULE J, PART II, COLUMN (B) (III)		NOTE THAT PART II, COLUMN (B)(III), OTHER REPORTABLE COMPENSATION, INCLUDES A PAYOUT OF DEFERRED COMPENSATION FOR LOUIS H KATZ AND ROBERT A CHERNAK THE DEFERRED COMPENSATION ARRANGEMENTS DATE BACK TO THE OFFICERS' HIRE DATES AT GW OVER TWO DECADES AGO, EVP&T KATZ IN 1990 AND FORMER SENIOR VICE PRESIDENT CHERNAK IN 1988 THE BOARD-APPROVED DEFERRED COMPENSATION ARRANGEMENTS ARE REPORTED AS TAXABLE INCOME IN CALENDAR YEAR 2012

Software ID: Software Version:

EIN: 53-0196584

Name: The George Washington University

Form 990, Schedule J, Part 1	II - Officers, Direc	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees	;	
(A) Name	1	f W-2 and/or 1099-MI		(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
STEVEN KNAPP (I	800,202	114,509	265,823	25,000	82,500	1,288,034	123,450
LOUIS H KATZ (I		103,950	589,160	25,000	7,997	1,414,107	
STEVEN LERMAN (I		84,735	20,564	56,482	91,652	792,143	
BETH NOLAN (I		59,459	122,722	25,000	11,203	659,437	66,600
JEFFREY S A KMAN (I		102,375				784,875	
LEO M CHALUPA (I		60,684	22,410	40,456	10,382	517,581	
MICHAEL (I		47,351	72,137	37,590	20,664	522,707	
DONALD W LINDSEY (I		94,976	23,661	25,000	21,032	631,752	
DAVID P STEINOUR (I		39,973	5,292	25,000	7,671	. 372,059	
MARGUERITE E (I BARRATT (II			9,824	25,000	10,305	365,043	
PAUL SCHIFF BERMAN (I			64,100	28,675	27,714	575,669	
SHAHRAM SARKANI (I			70,948	25,000	20,875	871,327	
NOZER (I			489,437	25,000	13,489	835,804	
IRA LUPU (I			524,997	14,533	6,008	786,588	
THOMAS A (I			27,754	25,000	19,794	570,729	
MICHAEL LONERGAN (I	482,323	10,000	27,903	51,000	21,074	592,300	
ROBERT A CHERNAK (I	492,893 I)		1,547,684	25,000	17,270	2,082,847	
JOHN F WILLIAMS (I)		1,028,997			1,028,997	
JAMES L SCOTT (I	357,374	55,000	31,760	25,000	9,798	478,932	
STEPHEN J TRACHTENBERG (II	330,085		64,539	25,000	14,194	433,818	

form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees												
(A) Name	_	(B) Breakdown o'	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	` '	(E) Total of columns					
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ				
GREGORY E MAGGS	(1)	245,436		324	22,917	14,394	283,071					
	(11)	(0)	<u> </u>	1 01	<u>, ol</u>	0'	0					
JOHN KUDLESS	(I) (II)	143,227	5,000	17,883	14,710	3,836	184,656					

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JEN. 93493132017004

OMB No 1545-0047

UMB NO 1545-0047

Schedule L

Department of the Treasury

(Form 990 or 990-EZ)

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. ► See separate instructions.

Open to Public Inspection

Internal Revenue Ser	/ice											nspecti	ion
Name of the The George Wa	organızatıon İshington Universi	ty		-							tificatio	n numbe	r
D- 1		··. <u>-</u>		/ - :	- 5047 372	N	E04(-)(4)			96584	`		
						B) and section O, Part IV, line						40h	
	mplete if the o					disqualified						(d) Corr	ected?
1 (a) N	anne or disquan	iiieu	person (b)		and organiz		(c) Description of transaction					Yes No	
				<u> </u>								163	110
											+		
											+		
2 Enter th	e amount of ta	x inc	curred by orga	ınızatıon m	anagers or o	disqualified per	sons during th	e year	under	sectio	n		
4958 .								٠.		F \$			
3 Enterth	e amount of ta	x, ıf	any, on line 2	, above, re	ımbursed by	the organization	on			▶ \$			
Part II	Loans to an	al / a	E T	tooctoo	l Dougons								
						• 990-EZ, Part V	line 38a or F	orm 90	an Pa	art IV I	ine 26	orifthe	
						line 5, 6, or 22	, inic 300, 01 1	01111 5.	, , , u	, .	c 20,	or ir the	
(a) Name of			(c) Purpose			(e)O riginal	(f) Balance	(g)	In	(H	1)	(i)Wrı	tten
ınterested	with organiza	tıon	of loan	or from t		principal	due	default?		Approved by board or committee?		agreement?	
person				organızat	ion?	amount							
				То	From			Yes	No	Yes	No	Yes	No
(1) PAUL	KEY		SEE PART V	1 "	X	100,000	78,853		No	Yes	 	Yes	
SCHIFF	EMPLOYEE												
BERMAN													
											-		
												_	
										-			
												_	
Total				▶	<u> </u>		78,853					\neg	
	Grants or As	-cic	tanca Pan		\$ [mtorosto	d Dorsons	70,053						
Palititi						Form 990, Pa	art IV line 2	7					
	finterested) Relationship			nt of assistance	1		stanc	e (e) Purpo	se of ass	ıstance
	son		erested perso		(5)		(=).,p=			_ `	.,p.		
			organızat	ion									
							_						
							<u>—</u>						
		I			1								

Complete if the organization			e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	: zatıon':
				Yes	No
(1) FAMILY MEMBER OF PAUL SCHIFF BERMAN	SEE PART V	299,017	EMPLOYMENT OF SPOUSE		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE L, PART II, LINE 1, COLUMN A		PURPOSE OF LOAN UPON RECRUITMENT AND RELOCATION, GW PROVIDED ASSISTANCE WITH PURCHASE OF RESIDENCE
SCHEDULE L, PART IV, LINE 2, COLUMN B		RELATIONSHIP THE INDIVIDUAL IS A FAMILY MEMBER OF KEY EMPLOYEE PAUL SCHIFF BERMAN

Schedule L (Form 990 or 990-EZ) 2012

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SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

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

Noncash Contributions

Name of the organization The George Washington University

Employer identification number

					53-0196584			
Pa	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	(d) Method of de noncash contrib	etermır	_	ts
1	Art—Works of art	Х	12					
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		977,229	FMV - APPR ORES	T T		
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	180	3,562,251	AVG HI/LOW GIFT	DATE		
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .	Х	1	629,183	SELLING PRICE			
16	Real estate—Commercial							
	Real estate—O ther							
18	Collectibles							
19	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► (ARCHIVES)	X	1		APPRAISAL			
	Other ► (<u>EQUIPMENT</u>)	X	10	· · · · · · · · · · · · · · · · · · ·	FMV - APPR ORES	<u>;T</u>		
27	Other►(<u>OTHER</u>)	X	48	57,466	RECEIPTS			
	ADJ TO LIFE INS							
28	Other ► (POLICIES)	Х	1	34,644	NET CASH VALUE			
29	Number of Forms 8283 received	by the orga	inization during the tax yea	r for contributions				
	for which the organization comple	ted Form 8	283, Part IV, Donee Ackno	owledgement	29		Yes	2 No
302	During the year, did the organiza	ition receiv	e by contribution any prope	arty reported in Part I lines	1-28 that it		res	NO
-	must hold for at least three year							
	for exempt purposes for the enti			on, and which is not require	d to be used	20-		No
h	If "Yes," describe the arrangement					30a		-110
31	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
		•		•				
3∠a	Does the organization hire or us contributions?	e chird part	ies or related organizations	to solicit, process, or sell l	ioricasn			
_						32a	Yes	
	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,			

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

number of items received, of a combination of both. Also complete this part for any additional information.				
Identifier	Return Reference	Explanation		
SCHEDULE M, PART I, COLUMN (B)		GW IS REPORTING THE NUMBER OF CONTRIBUTIONS		
SCHEDULE M, LINE 32B		MORGAN STANLEY SMITH BARNEY RECEIVES AND SELLS DONATED SECURITIES		
SCHEDULE M, LINE 33		THERE ARE NO REVENUES REPORTED ON PART I, LINE 1, COLUMN (C) BECAUSE THE ORGANIZATION DOES NOT RECORD THESE AS CONTRIBUTIONS EXCEPT FOR CERTAIN COLLECTIONS		

Schedule M (Form 990) (2012)

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493132017064

OMB No 1545-0047

2012

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Inspection

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization
The George Washington University

Employer identification number

53-0196584

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A		THE EXECUTIVE COMMITTEE, DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, HAS ALL OF THE POWERS AND DUTIES OF THE BOARD OF TRUSTEES EXCEPT THE POWER TO ELECT TRUSTEES, TO AMEND THE BY LAWS, OR TO APPROVE THE MERGER OF ANY CORPORATION WITH THE UNIVERSITY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		W SCOTT AMEY, MARK V HUGHES, AND DAVID KARLGAARD - BUSINESS RELATIONSHIP NELSON A CARBONELL, JR AND ROBERT K TANENBAUM - BUSINESS RELATIONSHIP

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4		THE FOLLOWING CHANGES WERE ALL APPROVED BY THE BOARD IN JUNE 2013 TO BE EFFECTIVE JULY 1, 2013 BY LAWS ARTICLES III, IV, VII, AND X WERE AMENDED AS FOLLOWS ARTICLE III, SECTIONS 2B AND 2C TERM LIMITS WERE MODIFIED BY REMOVING THE POSSIBILITY OF REELECTION AFTER REACHING A TOTAL LIMIT OF 12 YEARS OF SERVICE FOR ALL TRUSTEES ARTICLE III, SECTION 6 THE PERCENTAGE OF TRUSTEES REQUIRED FOR THE REMOVAL OF A TRUSTEE WAS MODIFIED FROM A VOTE OF TWO-THIRDS OF THE MEMBERS OF THE BOARD TO A MAJORITY VOTE ARTICLE IV, SECTION 1 THE EXECUTIVE COMMITTEES DUTIES WERE MODIFIED BY ADDING THE RESPONSIBILITY TO ESTABLISH COMPENSATION POLICIES AND PRACTICES AND TO APPROVE THE COMPENSATION AND EMPLOYMENT ARRANGEMENTS OF DESIGNATED OFFICIALS OF THE UNIVERSITY, INCLUDING THE PRESIDENT THESE DUTIES PREVIOUSLY BELONGED TO THE GOVERNANCE, COMPENSATION AND NOMINATIONS COMMITTEE ARTICLES VI AND VII SEPARATE ARTICLES WERE CREATED FOR THE OFFICERS OF THE BOARD (ARTICLE VI) AND OFFICERS OF THE UNIVERSITY (ARTICLE VII), THE LIST OF DESIGNATED OFFICERS WAS MODIFIED BY 1) DISTINGUISHING BETWEEN BOARD AND UNIVERSITY OFFICERS, 2) ADDING THE OFFICE OF THE PROVOST, AND 3) UPDATING THE SIGNATURE AUTHORITY OF ALL UNIVERSITY OFFICERS BY DISTINGUISHING ACADEMIC AND OPERATIONAL AGREEMENTS AND INCLUDING THE AUTHORITY TO SUB DELEGATE THE SIGNATURE AUTHORITY ARTICLE X THE STANDARD FOR APPROVAL OF ACTIONS TAKEN BY WRITTEN CONSENT WAS MODIFIED FROM A VOTE OF TWO-THIRDS OF THE MEMBERS OF THE BOARD TO A UNANIMOUS VOTE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B		FORM 990 WAS PREPARED IN-HOUSE BY THE UNIVERSITY'S TAX DEPARTMENT. THE PRIMARY SOURCE OF INFORMATION WAS THE AUDITED FINANCIAL STATEMENTS AND SUPPORTING DOCUMENTATION. THE FINANCIAL STATEMENTS NOT ONLY SERVED AS A SOURCE OF INFORMATION BUT ALSO RECONCILED WITH THE COMPLETED 990. THE PRIMARY DIFFERENCE BETWEEN THE AUDITED FINANCIAL STATEMENTS AND THE FORM 990 WAS THE PRESENTATION FORMAT AND SPECIAL GROUPINGS OF INCOME, EXPENSES, AND BALANCE SHEET ACCOUNTS REQUIRED ON THE FORM 990. SECONDARY INFORMATION USED TO PREPARE THE FORMS CAME FROM THE OFFICES THAT HAVE PRIMARY RESPONSIBILITY FOR AN ACTIVITY, INCLUDING THE COMPTROLLER'S OFFICE (FINANCIAL REPORTING, GRANTS AND CONTRACTS ACCOUNTING SERVICES), ACCOUNTS PAYABLE, PAYROLL SERVICES, OFFICE OF THE SENIOR VP AND GENERAL COUNSEL, OFFICE OF COMPLIANCE AND PRIVACY, CHIEF INVESTMENT OFFICE, UNIVERSITY BUDGET OFFICE, AND ATHLETICS, ALONG WITH OTHER OFFICES AND DEPARTMENTS THROUGHOUT THE UNIVERSITY ONCE PREPARED, THE FORM WAS REVIEWED INTERNALLY BY THE COMPTROLLER, THE SENIOR ASSOCIATE VICE PRESIDENT FOR FINANCE, THE OFFICE OF THE SENIOR VP AND GENERAL COUNSEL, THE EXECUTIVE VICE PRESIDENT AND TREASURER, THE PRESIDENT, AND EXTERNALLY BY PRICEWATERHOUSECOOPERS, LLP THE COMPLIANCE AND PRIVACY OFFICE, THE OFFICE OF THE VP FOR DEVELOPMENT, AND VP FOR EXTERNAL RELATIONS PROVIDED INPUT AND REVIEWED SPECIFIC SECTIONS FOR WHICH THEY ARE SUBJECT MATTER EXPERTS A SPECIAL MEETING OF THE COMMITTEE ON FINANCE AND AUDIT OF THE UNIVERSITY'S BOARD OF TRUSTEES PROVIDED A FULL INSTITUTIONAL REVIEW OF THE FORM TO ENSURE COMPLIANCE WITH THE FEDERAL TAX AUTHORITIES PRIOR TO FILING, A FINAL COPY OF THE FORM TO ENSURE COMPLIANCE WITH THE FEDERAL TAX AUTHORITIES PRIOR TO FILING, A FINAL COPY OF THE 990 WAS PROVIDED TO THE FULL BOARD FOR AN OPPORTUNITY TO REVIEW AND COMMENT

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C		CONFLICT OF INTEREST POLICIES ARE MONITORED BY THE UNIVERSITY'S OFFICE OF COMPLIANCE AND PRIVACY, WHICH DISTRIBUTES AN ANNUAL QUESTIONNAIRE THE QUESTIONNAIRES ARE COLLECTED, AND THE DISCLOSURES ARE SUMMARIZED AND SHARED WITH THE OFFICE OF THE SENIOR VP AND GENERAL COUNSEL AND THE BOARD OF TRUSTEES' COMMITTEE ON FINANCE AND AUDIT ANY DISCLOSURE WHICH REVEALS FACTS THAT INDICATE AN ACTUAL OR APPARENT CONFLICT IS REVIEWED AND, WHEN APPROPRIATE, A PLAN IS IMPLEMENTED TO REMEDY, MANAGE, OR MINIMIZE SUCH CONFLICT THESE PLANS ARE MONITORED AND ENFORCED THROUGH ONGOING OVERSIGHT, COORDINATED BY THE OFFICE OF COMPLIANCE AND PRIVACY, INCLUDING A THOROUGH REVIEW OF UNIVERSITY PAYMENT REQUESTS THAT MAY CREATE A CONFLICT

PART VI, SECTION B, LINE 15 UNIVERSITY'S BOARD C COMPENSATION THE CO DETERMINES THE COMPE RECOMMENDED BY THE THE COMMITTEE OBTAIN CONSULTING FIRM THAT POSITIONS BEGINNING I COMMITTEE IN DETERMI CONSULTANT'S REPORT COMMITTEE ALSO TAKE AS GOALS FOR THE UP OFFICIALS' COMPENSAT THE COMMITTEE ALSO F RECOMMENDATIONS AN GOALS AND ACCOMPLIC OFFICIAL'S COMPENSAT AND, IF IT APPROVES THE	FERNANCE, COMPENSATION AND NOMINATIONS (THE "COMMITTEE") OF THE F TRUSTEES WAS DELEGATED THE AUTHORITY BY THE BOARD TO SET EXECUTIVE DIMMITTEE, SERVING AS THE COMPENSATION COMMITTEE, ANNUALLY REVIEWS AND ENSATION FOR THE PRESIDENT, AND REVIEWS AND APPROVES THE COMPENSATION PRESIDENT FOR THE OFFICERS AND KEY EMPLOYEES IN MAKING ITS ASSESSMENTS, IS COMPENSATION INFORMATION PREPARED BY AN INDEPENDENT COMPENSATION INCLUDES MARKET DATA FROM COMPARABLE UNIVERSITIES FOR COMPARABLE IN FY2014, THE RESPONSIBILITY FOR THIS PROCESS IS DELEGATED TO THE EXECUTIVE NING THE PRESIDENT'S COMPENSATION, THE COMMITTEE CONSIDERS THE I AND MARKET DATA IN ADDITION TO THE TERMS OF HIS EMPLOYMENT CONTRACT THE IS INTO CONSIDERATION ACCOMPLISHMENTS FOR THE CURRENT FISCAL YEAR AS WELL COMING FISCAL YEAR WHEN REVIEWING THE REASONABLENESS OF THE SENIOR ION, IN ADDITION TO CONSIDERING THE CONSULTANT'S REPORT AND MARKET DATA, REVIEWS SENIOR OFFICIALS' PERFORMANCE, TAKING INTO ACCOUNT THE PRESIDENT'S ID OTHER INFORMATION AS IT DEEMS APPROPRIATE FROM TIME TO TIME, SUCH AS SHMENTS, LENGTH OF SERVICE, AND PRIOR SALARY HISTORY IF ANY SENIOR ION IS ABOVE MARKET DATA, THE COMMITTEE CONSIDERS ALL RELEVANT FACTORS HE COMPENSATION, EXPLAINS ITS RATIONALE AND INCLUDES ITS EXPLANATION IN THE HE KEEPS MINUTES OF ALL FINAL ACTIONS AT EACH MEETING

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19		THE GOVERNING DOCUMENTS (CHARTER AND BY LAWS) ARE AVAILABLE ON THE BOARD OF TRUSTEE'S WEBSITE AT HTTP //TRUSTEES GWU EDU/GOVERNING-DOCUMENTS THE MISSION STATEMENT CAN BE FOUND AT HTTP //TRUSTEES GWU EDU/GW-MISSION-STATEMENT THE FACULTY AND NON-FACULTY CONFLICT OF INTEREST POLICIES ARE AVAILABLE FROM THE UNIVERSITY'S POLICIES WEBSITE AT WWW POLICY GWU EDU THE FINANCIAL STATEMENTS ARE AVAILABLE IN THE ANNUAL REPORT, WHICH IS POSTED ON THE FINANCE DIVISION WEBSITE AT HTTP //FINANCE GWU EDU/REPORTS

ldentifier	Return Reference	Explanation
FORM 990, PART VII, ADDITIONAL TRUSTEE INFORMATION		ALL TRUSTEES SERVE WITHOUT COMPENSATION FOR THEIR ROLE AS TRUSTEE. NO TRUSTEE DEVOTES FULL TIME TO THIS POSITION THE AVERAGE NUMBER OF HOURS EACH TRUSTEE DEVOTES TO HIS/HER POSITION ON THE BOARD OF TRUSTEES DEPENDS UPON THE TRUSTEE'S LEADERSHIP ON THE BOARD AND COMMITTEES THREE BOARD MEETINGS AND ONE RETREAT WERE HELD DURING THE FISCAL YEAR EACH TRUSTEE SERVES ON AT LEAST ONE COMMITTEE

ldentifier	Return Reference	Explanation
FORM 990, PART IX, LINE 14		INFORMATION TECHNOLOGY EXPENSE INCLUDES HARDWARE, SOFTWARE, AND MAINTENANCE COSTS, AS WELL AS PAYMENTS TO CONTRACTORS FOR IT SERVICES

ldentifier	Return Reference	Explanation
FORM 990, PART IX, LINE 24D		IN FY08, THE UNIVERSITY ADOPTED THE OPTIONAL METHOD DESCRIBED IN THE IRS FORM INSTRUCTIONS FOR REPORTING INDIRECT EXPENSES RECORDED IN VARIOUS COST CENTERS AS A SEPARATE LINE ITEM (LINE 24D) INDIRECT EXPENSES INCLUDE, BUT ARE NOT LIMITED TO, FACILITIES OVERHEAD, POSTAGE, TELEPHONE, PRINT, AND ADVERTISING SERVICES PERFORMED BY INTERNAL DEPARTMENTS THE RECLASSIFICATION OF INDIRECT EXPENSES TO A SEPARATE LINE PRESERVES THE OBJECT CLASSIFICATION OF EACH INDIVIDUAL EXPENSE SO THAT ONLY COSTS PAID TO THIRD PARTIES FOR GOODS AND SERVICES ARE REPORTED

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 9, OTHER CHANGES IN NET ASSETS		CHANGE IN VALUE OF CHARITABLE TRUSTS - \$2,415,309 ADJUSTMENT FOR SUBSIDIARY ACTIVITY - (\$323,293) POST RETIREMENT RELATED CHARGES FAS 158 - \$1,198,000 RECOVERIES (LOSSES) ON PLEDGE CONTRIBUTIONS - (\$1,102,596) TOTAL TO FORM 990, PART XI, LINE 9 - \$2,187,420

DLN: 93493132017064

OMB No 1545-0047

Open to Public . Inspection

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization The George Washington University

Employer identification number

Part I Identification of Disregarded Entities (Complete if the organization	n answered "Yes" to	Form 990, Pa	art 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 cor enti	ntrolling		
(1) DYNAMO BRASIL VII LLC CORP TST CTR 1209 ORANGE ST WILMINGTON, DE 19801	INVESTMENTS	DE		61,138,762	GW			
(2) GEORGE WASHINGTON WORLDWIDE LLC 2121 EYE STREET NW WASHINGTON, DC 20052	INTL EDUC	DC		179,752	GW			
Part II Identification of Related Tax-Exempt Cormore related tax-exempt organizations d	Drganizations (Complete ruring the tax year.)	f the organization a	nswered "Yes"	to Form 990, Par	t IV, line 34 b	ecause it l	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	(e) Public charity sta (if section 501(c))	tus Dırect c	(f) controlling ntity	Section (13) co ent	ontrolle tity?
(1) THE GEORGE WASHINGTON ALUMNI ASSOCIATION	ALUM ACTIVITY	DC	501(C)(3)	TYPE III	NA		Yes	No No
1918 F STREET NW								
WASHINGTON, DC 20052 52-1437464								
(2) MOUNT VERNON COLLEGE	EDUC/SUPP GW	DC	501(C)(3)	TYPE I	GW		Yes	+
TAX DEPT 45155 RESEARCH PLACE STE								
ASHBURN, VA 20147 53-0196635								
(3) WASHINGTON RESEARCH LIBRARY CONSORTIUM	LIBRARY SVCS	DC	501(C)(3)	TYPE II	NA			No
901 COMMERCE DRIVE								
UPPER MARLBORO, MD 20774 52-1559828								
							-	_

														i ugc	_
Part III Identification of Related because it had one or more							zation a	nswered "Y	es" to	Form	990, Part	IV, li	ne 3	4	
(a) Name, address, and EI related organizatior	IN of า	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predom Income(ri Unrela excluded tax ur sections	inant elated, ted, d from ider s 512-	(f) Share of total incon	(g) Share of end-of-year assets		ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k Percer owne	ntage
					311	',			Yes	No		Yes	No		
					+										
					-							<u> </u>			
Part IV Identification of Related line 34 because it had one o									swere	ed "Ye	s" to Form	990,	Part	IV,	
(a)	(b)	(c)			(d)		(e)	(f)	Τ	(g)	(h			(i)	
Name, address, and EIN of related organization	Primary activity	Lega domici (state or fo countr	le oreign		controlling entity	(C corp	of entity o, S corp, trust)	Share of total income		of end- year assets	of-Percen owner			ection (b)(13 controll entity	3) led
(1) 37 CHARITABLE TRUSTS	CHARITABLE GIV			NA NA		TRUST								Yes Yes	No
(1) 37 CHARTIABLE IRUSTS	CHARITABLE GIV			INA		IROSI							'	res	
(2) QIAOHUA MGMT CONSULTING (SUZHOU) CO LTD	CONSULTING SVCS	СН		GWWV	V LLC	C CORF)	407,599		274,7	45 100 00	00 %	١	res	
KAI TAI BLDG NO 158 RENAI RD SUZHOU, JIANGSU															
СН															

Part V	Transactions With Related Organizations (Complete if the organization	on answered "Yes" to Fe	orm 990, Part IV, lır	ne 34, 35b, or 36.)			
Not	e. 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 organization	s listed in Parts II-IV	?			
a Red	ceipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b Giff	t, grant, or capital contribution to related organization(s)				1b	Yes	
c Gıft	;, grant, or capital contribution from related organization(s)				1 c		No
d Loa	ns or loan guarantees to or for related organization(s)				1d		No
e Loa	ns or loan guarantees by related organization(s)				1e		No
f Div	idends from related organization(s)				1f		No
g Sal	e of assets to related organization(s)				1g		No
h Pur	chase of assets from related organization(s)				1h		No
i Exc	hange of assets with related organization(s)				1i		No
j Lea	se of facilities, equipment, or other assets to related organization(s)				1j		No
k Lea	se of facilities, equipment, or other assets from related organization(s)				1k		No
I Perf	formance of services or membership or fundraising solicitations for related organization(s))			11		No
m Perf	formance of services or membership or fundraising solicitations by related organization(s)	1			1m	Yes	
n Sha	ring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sha	aring of paid employees with related organization(s)				10		No
p Rei	mbursement paid to related organization(s) for expenses				1 p		No
q Rei	mbursement paid by related organization(s) for expenses				1q		No
r Oth	er transfer of cash or property to related organization(s)				1r		No
s Oth	ner transfer of cash or property from related organization(s)				1s	Yes	<u> </u>
2 If th	ne answer to any of the above is "Yes," see the instructions for information on who must co	omplete this line, including	covered relationships	and transaction thresholds			
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved	i
(1) THE GE	ORGE WASHINGTON ALUMNI ASSOCIATION	S	80,000	INVOICES			
(2) QIAOHU	JA MGMT CONSULTING (SUZHOU) CO LTD	В	200,000	REG CAPITAL			
(3) QIAOHU	JA MGMT CONSULTING (SUZHOU) CO LTD	М	250,200	INVOICES			
(4) WASHIN	NGTON RESEARCH LIBRARY CONSORTIUM	М	1,065,335	5 INVOICES			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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

revenue) that was not a related organization. See instructions re			ertaın ınvestr	nent	partnerships								
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under section 512-	orn	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations [:]	ite	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	-	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
	1			•									·

Additional Data Return to Form

Software ID:

Software Version:

EIN: 53-0196584

Name: The George Washington University

Schedule R (Form 990) 2012

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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)								
Identifier	Return Reference	Explanation						