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Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

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

A For the 2021 calendar year, or tax year beginning 07-01-2021 , and ending 06-30-2022

B Check if applicable:

☒ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

WASHINGTON UNIVERSITY

% WASHINGTON UNIVERSITY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

7425 FORSYTH BLVD MSC 1299-414-355

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

SAINT LOUIS, MO 63105

F Name and address of principal officer:

ANDREW D MARTIN

ONE BROOKINGS DR

SAINT LOUIS, MO 63130

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status:

☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶

WWW.WUSTL.EDU

K Form of organization:

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1853

M State of legal domicile:

MO

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:

THE WASHINGTON UNIVERSITY IS A CO-EDUCATIONAL, NONDENOMINATIONAL UNIVERSITY WITH A LONG AND DISTINGUISHED HISTORY OF TEACHING, RESEARCH AND (CONT'D ON SCHEDULE O)

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

3 Number of voting members of the governing body (Part VI, line 1a)

3

41

4 Number of independent voting members of the governing body (Part VI, line 1b)

4

39

5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)

5

28,513

6 Total number of volunteers (estimate if necessary)

6

10,000

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a

22,037,221

b Net unrelated business taxable income from Form 990-T, Part I, line 11

7b

0

Revenue

8 Contributions and grants (Part VIII, line 1h)

784,101,109

917,884,430

9 Program service revenue (Part VIII, line 2g)

3,004,240,625

3,380,202,003

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

1,054,182,543

1,214,389,114

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

48,885,984

55,049,047

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

4,891,410,261

5,567,524,594

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

458,436,912

506,928,173

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)

2,144,653,707

2,395,942,258

16a Professional fundraising fees (Part IX, column (A), line 11e)

0

0

b Total fundraising expenses (Part IX, column (D), line 25) ▶40,230,041

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

1,476,955,026

1,589,376,993

18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)

4,080,045,645

4,492,247,424

19 Revenue less expenses. Subtract line 18 from line 12

811,364,616

1,075,277,170

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21,212,747,000

20,436,866,000

21 Total liabilities (Part X, line 26)

3,462,641,652

4,392,412,672

22 Net assets or fund balances. Subtract line 21 from line 20

17,750,105,348

16,044,453,328

Part II

Signature Block

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

Sign Here

Signature of officer

ANGIE LEAHY CONTROLLER

Type or print name and title

2023-05-10

Date

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date 2023-05-09

Check ☐ if self-employed

PTIN P00369623

Firm's name ▶ PRICEWATERHOUSECOOPERS LLP

Firm's EIN ▶

Firm's address ▶ 655 NEW YORK AVE NW STE 1100

WASHINGTON, DC 20001

Phone no. (202) 414-1000

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

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2021)

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

SEE SCHEDULE O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,819,118,067 including grants of \$ 405,272,286) (Revenue \$ 2,889,245,214)

See Additional Data

4b (Code:) (Expenses \$ 707,540,529 including grants of \$ 93,305,350) (Revenue \$ 341,698,315)

See Additional Data

4c (Code:) (Expenses \$ 245,323,000 including grants of \$) (Revenue \$ 149,258,474)

See Additional Data

(Code:) (Expenses \$ 399,383,901 including grants of \$ 8,350,537) (Revenue \$)

ACADEMIC SUPPORT

4d Other program services (Describe in Schedule O.)
(Expenses \$ 399,383,901 including grants of \$ 8,350,537) (Revenue \$)

4e Total program service expenses ▶ 4,171,365,497

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☒

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	24,259
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

Part V		Statements Regarding Other IRS Filings and Tax Compliance (continued)		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	28,513	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: ► CI , CH , FR , GM , IT , SP , UG , UK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c	Enter the amount of reserves on hand	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	Yes	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . If "Yes," complete Form 4720, Schedule O.	16	Yes	
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 41		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1b 39		
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		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	No
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
WASHINGTON UNIVERSITY 7425 FORSYTH BLVD MSC 1299-414-355 SAINT LOUIS, MO 63105 (314) 935-8283

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

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

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

● List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

See the instructions for the order in which to list the persons above.

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

[illegible]

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	30,087,586	0	2,318,371

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 4,408

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
MCCARTHY BUILDING COMPANIES INC, 1341 NORTH ROCK HILL RD ST LOUIS, MO 63124	CONSTRUCTION SERVICE	102,284,778
TARLTON CORPORATION, 5500 WEST PARK AVE ST LOUIS, MO 63110	CONSTRUCTION SERVICE	15,924,635
UNITED CONSTRUCTION ENTERPRISE CO O, 12747 OLIVE BLVD STE 101 ST LOUIS, MO 63141	CONSTRUCTION SERVICE	15,367,058
IQVIA RDS Inc, 4820 EMPEROR BLVD DURHAM, NC 27703	CLINICAL TRIAL SVCS	10,925,601
WITT FIALA FLANNERY AND ASSOCIATES, 211 S JEFFERSON ST LOUIS, MO 63103	MAINTENANCE SVCS	10,587,369

<p>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 ▶ 577</p>	
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Form 990 (2021)		Page 9					
Part VIII		Statement of Revenue					
Check if Schedule O contains a response or note to any line in this Part VIII <input type="checkbox"/>							
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	610,342,502				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	307,541,928				
	g Noncash contributions included in lines 1a - 1f:\$	1g	49,538,774				
	h Total. Add lines 1a-1f ▶		917,884,430				
Program Service Revenue	2a RESEARCH - CONTRACTS AND OTHER	Business Code 541700	341,698,316		341,698,316		
	b TUITION AND FEES	611600	847,974,374	847,974,374			
	c PATIENT, LAB AND HOSPITAL SUPPORT	621110	2,023,287,206	2,023,287,206			
	d AUXILIARY SALES AND SERVICE	611710	149,258,474		360,681 148,897,793		
	e EDUCATIONAL SALES AND SERVICE	611710	17,983,633	2,244,345 12,801,977	2,937,311		
	f All other program service revenue.						
	g Total. Add lines 2a-2f. ▶		3,380,202,003				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		46,193,339		8,067,762 38,125,577		
	4 Income from investment of tax-exempt bond proceeds ▶		0				
	5 Royalties ▶		21,205,017		21,205,017		
	6a Gross rents	(i) Real	(ii) Personal				
		6a					
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c				00
	d Net rental income or (loss) ▶		0				
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a	9,205,244,7709,485,503				
		b Less: cost or other basis and sales expenses	7b				8,046,534,498
		c Gain or (loss)	7c				1,158,710,2729,485,503
	d Net gain or (loss) ▶		1,168,195,7751,168,195,775				
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		8a	0			
	b Less: direct expenses		8b	0			
	c Net income or (loss) from fundraising events ▶		0				
	9a Gross income from gaming activities. See Part IV, line 19		9a	0			
b Less: direct expenses		9b	0				
c Net income or (loss) from gaming activities ▶		0					
10aGross sales of inventory, less returns and allowances		10a	0				
b Less: cost of goods sold		10b	0				
c Net income or (loss) from sales of inventory ▶		0					
Miscellaneous Revenue		Business Code					
11aOTHER EDUCATIONAL REVENUE		611710	33,844,030	20,544,545	806,801 12,492,684		
b							
c							
d All other revenue							
e Total. Add lines 11a-11d ▶		33,844,030					
12 Total revenue. See instructions ▶		5,567,524,5942,894,050,47022,037,2211,733,552,473					

Form 990 (2021)

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	77,508,490	77,508,490		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	415,492,914	415,492,914		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	13,926,769	13,926,769		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	22,717,194	953,414	20,000,099	1,763,681
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	14,751,728	6,383,861	7,334,870	1,032,997
7 Other salaries and wages	1,864,952,184	1,773,772,524	69,671,629	21,508,031
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	118,728,514	112,846,362	4,374,186	1,507,966
9 Other employee benefits	263,129,382	241,658,439	18,265,056	3,205,887
10 Payroll taxes	111,663,256	105,095,923	5,073,420	1,493,913
11 Fees for services (non-employees):				
a Management	0	0	0	0
b Legal	9,448,580	7,699,360	1,749,220	0
c Accounting	1,141,356	83,461	1,057,895	0
d Lobbying	299,488	141,017	158,471	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	79,109,232	0	79,109,232	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	190,268,343	178,624,246	9,999,451	1,644,646
12 Advertising and promotion	9,740,451	9,466,015	257,136	17,300
13 Office expenses	159,034,661	142,479,245	15,065,199	1,490,217
14 Information technology	69,426,622	37,944,424	29,854,671	1,627,527
15 Royalties	0	0	0	0
16 Occupancy	121,580,007	105,865,170	14,097,088	1,617,749
17 Travel	24,474,204	23,232,054	649,061	593,089
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	290	290	0	0
19 Conferences, conventions, and meetings	5,404,479	3,870,529	1,064,496	469,454
20 Interest	74,887,176	71,921,644	2,920,600	44,932
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	218,070,260	210,306,959	7,283,546	479,755
23 Insurance	51,119,236	46,470,732	4,645,680	2,824
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MEDICAL SUPPLIES	543,157,704	543,157,704	0	0
b CONTRACT. ALLOW. & BAD DEBT	-47,836	-283,385	235,549	0
c ENTERTAINMENT & SOCIAL EXP	14,322,491	10,559,300	2,285,034	1,478,157
d LIBRARY VOLUMES	17,428,956	17,428,956	0	0
e All other expenses	511,293	14,759,080	-14,499,703	251,916
25 Total functional expenses. Add lines 1 through 24e	4,492,247,424	4,171,365,497	280,651,886	40,230,041
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		263,943,883	2	239,191,639
	3	Pledges and grants receivable, net		407,232,407	3	423,296,096
	4	Accounts receivable, net		565,283,566	4	633,706,802
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	5	60,484
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . .		277,778	6	222,222
	7	Notes and loans receivable, net		8,700,778	7	7,452,711
	8	Inventories for sale or use		26,085,521	8	36,417,826
	9	Prepaid expenses and deferred charges		19,895,814	9	18,514,588
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	6,367,490,744		
	b	Less: accumulated depreciation	10b	3,125,349,815		
				3,017,354,777	10c	3,242,140,929
	11	Investments—publicly traded securities		6,362,287,526	11	4,595,636,321
	12	Investments—other securities. See Part IV, line 11		10,098,864,640	12	10,821,047,603
	13	Investments—program-related. See Part IV, line 11		72,733,946	13	68,125,563
	14	Intangible assets		0	14	0
15	Other assets. See Part IV, line 11		370,086,364	15	351,053,216	
16	Total assets. Add lines 1 through 15 (must equal line 33)		21,212,747,000	16	20,436,866,000	
Liabilities	17	Accounts payable and accrued expenses		623,046,639	17	643,233,178
	18	Grants payable		0	18	0
	19	Deferred revenue		161,045,152	19	130,479,665
	20	Tax-exempt bond liabilities		112,945,257	20	112,957,003
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		122,552,670	23	64,211,288
	24	Unsecured notes and loans payable to unrelated third parties		2,154,879,710	24	3,147,433,406
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		288,172,224	25	294,098,132
	26	Total liabilities. Add lines 17 through 25		3,462,641,652	26	4,392,412,672
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions		8,371,599,255	27	7,847,087,747
	28	Net assets with donor restrictions		9,378,506,093	28	8,197,365,581
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		17,750,105,348	32	16,044,453,328
33	Total liabilities and net assets/fund balances		21,212,747,000	33	20,436,866,000	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,567,524,594
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,492,247,424
3	Revenue less expenses. Subtract line 2 from line 1	3	1,075,277,170
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	17,750,105,348
5	Net unrealized gains (losses) on investments	5	-2,784,898,132
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,968,942
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	16,044,453,328

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
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?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Yes	

Additional Data

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

Form 990 (2021)

Form 990, Part III, Line 4a:

INSTRUCTION - THIS CATEGORY INCLUDES EXPENDITURES FOR ALL ACTIVITIES THAT ARE PART OF AN INSTITUTION'S INSTRUCTION PROGRAM, WITH THE EXCEPTION OF EXPENDITURES FOR REMEDIAL AND TUTORIAL INSTRUCTION, WHICH ARE CATEGORIZED AS STUDENT SERVICES. EXPENDITURES FOR CREDIT AND NON-CREDIT COURSES FOR ACADEMIC, OCCUPATIONAL, VOCATIONAL AND MEDICAL CARE INSTRUCTION, AND FOR REGULAR, SPECIAL AND EXTENSION SESSIONS ARE INCLUDED. ATTENDANCE: FALL SEMESTER 17,047 AND SPRING SEMESTER 16,244 APPROXIMATELY 402,689 PATIENTS WERE TREATED BY MEDICAL SCHOOL FACULTY AND STUDENTS.

Form 990, Part III, Line 4b:

RESEARCH - THIS CATEGORY INCLUDES ALL EXPENDITURES FOR ACTIVITIES SPECIFICALLY ORGANIZED TO PRODUCE RESEARCH OUTCOMES, WHETHER COMMISSIONED BY AN AGENCY EXTERNAL TO THE INSTITUTION OR SEPARATELY BUDGETED BY AN ORGANIZATIONAL UNIT WITHIN THE INSTITUTION. SUBJECT TO THESE CONDITIONS, IT INCLUDES EXPENDITURES FOR INDIVIDUAL AND/OR PRODUCT RESEARCH AS WELL AS THOSE OF THE INSTITUTES AND RESEARCH CENTERS. REVENUES EXCLUDE GOVERNMENT GRANTS WHICH ARE REPORTED AS CONTRIBUTIONS. DURING FISCAL YEAR 2022, THE UNIVERSITY RECEIVED 4,078 DIRECT AND INDIRECT AWARDS.

Form 990, Part III, Line 4c:

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SCOTT WILSON CHIEF INVESTMENT OFFICER	40.0 0.0			X				6,401,945	0	115,553
ANDREW CHOQUETTE DEP CHIEF INVESTMENT OFFICER	40.0 0.0					X		3,547,808	0	66,936
DAVID PERLMUTTER EXEC VC MEDICAL AFFAIRS	40.0 0.7			X				1,862,682	0	291,483
MICHAEL STOHLER MANAGING DIR. OF INVESTMENTS	40.0 0.0					X		1,938,389	0	46,735
SEAN ARP COO - INVESTMENT MGMT	40.0 0.0					X		1,817,561	0	50,287
JOHN CLOHISY DIST PROF OF ORTHO SURGERY	40.0 0.0					X		1,684,248	0	58,019
ADAM KURKIEWICZ MANAGING DIR. OF INVESTMENTS	40.0 0.0					X		1,664,603	0	45,769
ANDREW MARTIN CHANCELLOR	40.0 0.0			X				1,164,999	0	380,686
HENRY WEBBER EXEC VC ADMIN. (UNTIL 10/21)	40.0 4.0			X				839,929	0	257,998
PAUL SCHEEL JR VC CLINICAL AFF. (AS OF 7/21)	40.0 7.0			X				1,021,531	0	38,570

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK WRIGHTON FORMER CHANCELLOR	40.0 0.0						X	877,999	0	68,847
BEVERLY WENDLAND PROVOST & EXEC VC ACAD AFFAIRS	40.0 0.0			X				805,838	0	27,509
RICHARD STANTON VC MEDI FIN & ADM (AS OF 7/21)	40.0 1.0			X				709,126	0	49,944
PAMELLA HENSON EXEC VC UNIVERSITY ADVANCEMENT	40.0 0.0			X				475,693	0	176,834
KURT DIRKS VC INTERNATIONAL AFFAIRS	40.0 0.0			X				551,465	0	58,819
LEGAIL CHANDLER VC HUMAN RESOURCES	40.0 0.0			X				401,019	0	169,852
JENNIFER LODGE VC RESEARCH (UNTIL 1/22)	40.0 0.0			X				519,524	0	49,944
MONICA ALLEN VC & GENERAL COUNSEL	40.0 0.0			X				510,280	0	47,352
MARION CRAIN FORMER PROVOST & EXEC VC ACAD.	40.0 0.0						X	506,563	0	45,183
STEPHANIE REEL INTERIM VC & CIO (UNTIL 4/22)	40.0 0.0			X				542,305	0	9,308

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC UPIN TRUSTEE	13.0 0.0	X						390,000	0	0
PAMELA LOKKEN VC GOV'T & COMMUNITY RELATIONS	40.0 0.0			X				326,313	0	47,278
JULIE FLORY VC MARKETING & COMMUNICATIONS	40.0 0.0			X				293,966	0	45,663
MARK AMIRI ASO VC FIN & TREA (UNTIL 2/22)	40.0 4.0			X				286,571	0	42,089
ROBERT WILD INTERIM VC STUDENTS	40.0 0.0			X				265,801	0	61,435
DAVID BLASINGAME FORMER EXEC VC ALUMNI & DEV	40.0 0.0						X	305,607	0	0
IDA EARLY SEC TO BD OF TRUSTEES	40.0 0.0						X	172,000	0	0
STEVEN CASH NICKERSON TRUSTEE	1.0 0.0	X						2,000	0	0
VINCENT BELUSKO TRUSTEE	1.0 0.0	X						0	0	0
TODD M BLUEDORN TRUSTEE	0.5 0.0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANDREW M BURSKY TRUSTEE - VICE CHAIR	1.4 0.0	X						0	0	0
HOWARD N CAYNE TRUSTEE	1.0 0.0	X						0	0	0
CORINNA COTSEN TRUSTEE	1.0 0.0	X						0	0	0
ARNOLD W DONALD TRUSTEE	1.0 0.0	X						0	0	0
JON H FELTHEIMER TRUSTEE	1.0 0.0	X						0	0	0
LEE FIXEL TRUSTEE	0.5 0.0	X						0	0	0
GAURAV GARG TRUSTEE	1.0 0.0	X						0	0	0
PRISCILLA L HILL-ARDOIN TRUSTEE	0.5 0.0	X						0	0	0
THOMAS J HILLMAN TRUSTEE	1.1 0.0	X						0	0	0
LOUIS G HUTT JR TRUSTEE	1.0 0.0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GREGORY L HYSLOP TRUSTEE	0.5 0.0	X						0	0	0
ALBERT YEUK KEUNG IP TRUSTEE	0.5 0.0	X						0	0	0
JAY JACOBS TRUSTEE	1.0 0.0	X						0	0	0
DONALD A JUBEL TRUSTEE	1.0 0.0	X						0	0	0
EUGENE S KAHN TRUSTEE	1.2 0.0	X						0	0	0
DAVID W KEMPER TRUSTEE - VICE CHAIR	1.0 0.0	X						0	0	0
RICHARD J LIEKWEG TRUSTEE	1.0 0.0	X						0	0	0
ANNA MANNING TRUSTEE	0.5 0.0	X						0	0	0
VICKI MATCH SUNA TRUSTEE	1.0 0.0	X						0	0	0
SUSAN B MCCOLLUM TRUSTEE	1.0 0.0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ALICIA MCDONNELL TRUSTEE	1.0 0.0	X						0	0	0
JAMES M MCKELVEY JR TRUSTEE	0.5 0.0	X						0	0	0
ANDREW D NEWMAN TRUSTEE - CHAIR	2.1 0.0	X						0	0	0
JAMES V O'DONNELL TRUSTEE	0.5 0.0	X						0	0	0
PENELOPE PENNINGTON TRUSTEE	1.0 0.0	X						0	0	0
WILLIAM B POLLARD III TRUSTEE	1.0 0.0	X						0	0	0
MICHAEL POWELL TRUSTEE	1.0 0.0	X						0	0	0
RICHARD S RITHOLZ TRUSTEE	0.5 0.0	X						0	0	0
CRAIG D SCHNUCK TRUSTEE - VICE CHAIR	1.4 0.0	X						0	0	0
ROBERT J SKANDALARIS TRUSTEE	0.5 0.0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NICHOLAS E SOMERS TRUSTEE	1.0 0.0	X						0	0	0
DAVID L STEWARD TRUSTEE	0.5 0.0	X						0	0	0
MARY DANFORTH STILLMAN TRUSTEE	1.0 0.0	X						0	0	0
BARBARA SCHAPS THOMAS TRUSTEE	1.3 0.0	X						0	0	0
JACK E THOMAS TRUSTEE	0.5 0.0	X						0	0	0
HENRY D WARSHAW TRUSTEE	1.0 0.0	X						0	0	0
SUSAN O WARSHAW TRUSTEE	1.0 0.0	X						0	0	0
JOSEPH F WAYLAND TRUSTEE	1.0 0.0	X						0	0	0

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10

☐

An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11

☐

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a

☐

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

☐

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

☐

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

☐

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

☐

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

Enter the number of supported organizations
- g

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	995,937,669	855,494,240	889,619,077	784,101,109	917,884,430	4,443,036,525
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						0
4	Total. Add lines 1 through 3	995,937,669	855,494,240	889,619,077	784,101,109	917,884,430	4,443,036,525
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) . .						0
6	Public support. Subtract line 5 from line 4.						4,443,036,525

Section B. Total Support								
Calendar year (or fiscal year beginning in) ►		(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
7	Amounts from line 4. . .	995,937,669	855,494,240	889,619,077	784,101,109	917,884,430	4,443,036,525	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	83,828,048	64,710,335	67,341,624	101,798,775	59,330,595	377,009,377	
9	Net income from unrelated business activities, whether or not the business is regularly carried on . . .					6,790,749	6,790,749	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	18,296,248	19,849,228	14,878,268	6,417,878	34,282,165	93,723,787	
11	Total support. Add lines 7 through 10						4,920,560,438	
12	Gross receipts from related activities, etc. (see instructions)						12	14,393,113,728
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>							

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14 90.295 %
15	Public support percentage for 2020 Schedule A, Part II, line 14	15 91.027 %
16a	33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>	
b	33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b. .						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . .						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Part V

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by Line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required-- explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021:		
a	From 2016.		
b	From 2017.		
c	From 2018.		
d	From 2019.		
e	From 2020.		
f	Total of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017.		
b	Excess from 2018.		
c	Excess from 2019.		
d	Excess from 2020.		
e	Excess from 2021.		

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

Facts And Circumstances Test

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

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

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

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

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

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

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

Part I-A

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

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions	\$
3	Volunteer hours for political campaign activities. See instructions	

Part I-B

Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV.	

Part I-C

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	\$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.....	\$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

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

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	30,550													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	268,938													
c Total lobbying expenditures (add lines 1a and 1b)	299,488													
d Other exempt purpose expenditures	4,399,517,924													
e Total exempt purpose expenditures (add lines 1c and 1d)	4,399,817,412													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	226,259	377,309	221,910	299,488	1,124,966
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	0	0	0	30,550	30,550

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures. See Instructions	5	

Part IV Supplemental Information

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

Return Reference	Explanation
------------------	-------------

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I

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

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

(a) Donor advised funds

3

18,000

18,000

20,872

(b) Funds and other accounts

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

Yes

No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Yes

No

Part II

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

1

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

☐ Preservation of land for public use (e.g., recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☒ Preservation of a certified historic structure

☐ Preservation of open space

2

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

a

Total number of conservation easements

b

Total acreage restricted by conservation easements

c

Number of conservation easements on a certified historic structure included in (a)

d

Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

Held at the End of the Year

2a

2b

2c

2d

1

0.00

1

3

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

4

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

5

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

Yes

No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► 1.00

7

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

8

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

Yes

No

9

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

Part III

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

1a

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

b

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

(i) Revenue included on Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2

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

a

Revenue included on Form 990, Part VIII, line 1 ► \$

b

Assets included in Form 990, Part X ► \$

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

Cat. No. 52283D

Schedule D (Form 990) 2021

Part III

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

3

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

a

☒ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☒ Loan or exchange programs

e

☒ Other EDUCATION

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . .

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☒ No

b

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

☐

Part V

Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	13,665,385,858	8,515,200,208	8,130,482,491	7,687,391,565	7,214,957,840
b Contributions	279,352,761	159,994,568	166,481,992	306,042,989	183,434,886
c Net investment earnings, gains, and losses	-1,110,682,646	5,510,916,212	730,762,852	686,549,696	811,864,921
d Grants or scholarships	67,766,887	55,939,919	54,980,310	48,675,577	41,318,339
e Other expenditures for facilities and programs	441,600,619	354,410,016	374,343,079	439,804,651	415,005,825
f Administrative expenses	42,629,582	110,375,195	83,203,738	61,021,531	66,541,918
g End of year balance	12,282,058,885	13,665,385,858	8,515,200,208	8,130,482,491	7,687,391,565

2

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

a

Board designated or quasi-endowment ▶ 41.000 %

b

Permanent endowment ▶ 59.000 %

c

Term endowment ▶

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

3a

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

(i) Unrelated organizations

(ii) Related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	206,432,562		206,432,562
b Buildings	0	5,398,023,385	2,536,761,014	2,861,262,372
c Leasehold improvements				
d Equipment	0	763,034,796	588,588,801	174,445,995
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				3,242,140,929

Part VII

Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) ABSOLUTE RETURN	667,557,564	F
(B) PRIVATE EQUITY	8,145,427,569	F
(C) REAL ASSETS AND OTHER	901,226,357	F
(D) INVESTMENT IN AFFILIATES	48,366,921	F
(E) OTHER INVESTMENTS	1,058,469,192	F
(F)		
(G)		
(H)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	10,821,047,603	

Part VIII

Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) ▶		

Part IX

Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ▶	

Part X

Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) DEPOSITS AND ADVANCES	48,139,686
(3) PROFESSIONAL LIABILITY	110,170,052
(4) LIAB UNDER SPLIT-INTEREST AGRMT	35,873,168
(5) GOV'T SUPPORTED STUDENT LOANS	12,901,719
(6) LEASE LIABILITIES	87,013,507
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	294,098,132

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	2,372,176,608
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-2,784,898,132
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-331,340,622
e	Add lines 2a through 2d	2e	-3,116,238,754
3	Subtract line 2e from line 1	3	5,488,415,362
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	79,109,232
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	79,109,232
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	5,567,524,594

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

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

1	Total expenses and losses per audited financial statements	1	4,077,828,627
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	4,077,828,627
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	79,109,232
b	Other (Describe in Part XIII.)	4b	335,309,565
c	Add lines 4a and 4b	4c	414,418,797
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	4,492,247,424

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

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

Supplemental Information

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

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART III, LINE 1A	<p>In addition to The Mildred Lane Kemper Art Museum, The university archives rare book collections, works of Art, literary works, historical treasures and artifacts. These collections are protected and preserved for public exhibition, education, research and the furtherance of public service. They are neither disposed of for financial gain nor encumbered in any manner. Accordingly, such collections are not recognized or capitalized for financial statement purposes.</p>

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART III, LINE 4	<p>The Mildred Lane Kemper Art Museum dates back to 1881 with the founding of the St. Louis School of Museum of Fine Arts at Washington University. Its collection was formed in large part by acquiring significant works by artists of the time, a legacy that continues today. Now one of the finest university collections in the United States, the Museum contains strong holdings of 19th-, 20th-, and 21st- century European and American paintings, sculptures, prints, installations, and photographs. The collection also includes some Egyptian and Greek antiquities and more than 100 Old Master prints. The Museum is committed to preserving and developing its art collection and continuing its legacy of collecting significant art of the time; providing excellence in art historical scholarship, education and exhibition; inspiring social and intellectual inquiry into the connection between art and contemporary life; and engaging in audiences on campus, in the local community, across the nation, and worldwide. In addition to the Museum, the Libraries' Department of Special Collections archives rare book collections, works of art, literary works, archival collections, historical treasures and artifacts. These collections are protected and preserved for public exhibition education, research, and the furtherance of public service.</p>

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART V, LINE 2C	<p>During the FY19 reporting year, the university adopted the Financial Accounting Standards Board (FASB) Accounting Standards Update (ASU) 2016-14, Presentation of Financial Statements of Not-for-Profit Entities, which revises the not-for-profit reporting model. This guidance requires the university to reclassify its net assets (i.e., previously unrestricted, temporarily restricted, and permanently restricted) into two categories; net assets with donor restrictions and net assets without donor restrictions. Per the instructions to the 990, the university has opted to leave the term endowment funds blank and has reported all endowed assets subject to donor-imposed restrictions on Line 2b. This is consistent with how the university reported endowed assets within the audited financial statements.</p>

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	Washington University's endowment is an important financial resource that provides a meaningful source of revenue for university programs and operations. This enduring support for purposes as designated by donors, including scholarships, professorships, research efforts , libraries and capital projects, enables the university to attract and retain outstanding faculty and students.

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	The university is exempt from federal income taxes under Section 501 (c)(3) of the Internal Revenue Code except to the extent the university has unrelated business income, or consolidated for-profit affiliates incur taxes. There was no significant provision for income taxes in the current year. Management believes the university has no uncertain tax positions that result in material unrecognized tax expense/benefits.

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART XI, LINE 2D	Scholarships netted against tuition fees (\$334,842,805), Changes reclassification of split-interest agreements \$3,502,183.

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART XII, LINE 4B	Scholarships netted against tuition fees \$334,842,805, Changes in uncollectible pledges reserve \$466,760.

SCHEDULE E
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
WASHINGTON UNIVERSITY

Schools

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.
► Go to www.irs.gov/Form990EZ for the latest information.

Employer identification number
43-0653611

OMB No. 1545-0047

2021

Open to Public Inspection

Part I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II.	3	Yes
4	Does the organization maintain the following?		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d	Yes
5	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	5a	No
b	Admissions policies?	5b	No
c	Employment of faculty or administrative staff?	5c	No
d	Scholarships or other financial assistance?	5d	No
e	Educational policies?	5e	No
f	Use of facilities?	5f	No
g	Athletic programs?	5g	No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5h	No
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? If you answered "Yes" to either line 6a or line 6b, explain on Part II.	6b	No
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.	7	Yes

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	The university's nondiscrimination policy is posted on bulletin boards across the university and electronically on the Human Resources website. It is included in key recruitment materials and publications and is the foundation for the Discrimination and Discriminatory Harassment Policy published annually.
SCHEDULE E, PART I, LINE 6A	Washington University received funds from the Department of Education for the administration of campus-based student financial aid programs, including Perkins Loans, Pell Grants, SEOG Grants and federal work study funding. The State of Missouri provides similar funding.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	6	11			7,234,662,981
b Total from continuation sheets to Part I	45	98			22,703,833
c Totals (add lines 3a and 3b)	51	109			7,257,366,814

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
2 5	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 ▶								
(6)									
3	Enter total number of other organizations or entities ▶								78
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☒ Yes ☐ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* ☒ Yes ☐ No

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	<p>The University maintains a formal policy defining its procedures for monitoring the use of sponsored funds by subrecipients who are performing a portion of a sponsored project externally awarded to the University. The policy provides guidance to ensure that subrecipients conduct their portions of a sponsored project in compliance with laws, regulations and terms and conditions of awards and sub-awards and that reimbursed costs incurred by subrecipients are allowed. The policy addresses the roles and responsibilities of the central offices and academic departments of the University and describes the monitoring procedures for each area. The full text of the University's Sub-recipient Policy is available online at the following web address: http://financialservices.wustl.edu/wfin-topic/sponsored-projects accounting/. The grants reported in Part III are primarily scholarships to students. The use of scholarships is controlled by applying such amounts directly against balances owed by the student for tuition, fees and other educational expenses. The University does not keep records that identify the charitable status of sub-grantees. Most sub-grantees are universities, hospitals and research institutions.</p>

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART III, LINE 1-8 COLUMN (E)	Scholarships are awarded by crediting directly to the student's account with the University.

Additional Data

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	0	Fundraising		8,827
Europe (Including Iceland and Greenland)	0	1	Fundraising		33,609

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America	0	0	Fundraising		6,679
Central America and the Caribbean	0	0	Grantmaking		6,019

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	0	Grantmaking		1,492,547
Europe (Including Iceland and Greenland)	0	0	Grantmaking		5,499,626

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
Middle East and North Africa	0	0	Grantmaking		39,232
North America	0	0	Grantmaking		978,382

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	0	0	Grantmaking		635,287
South Asia	0	0	Grantmaking		596,505

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Grantmaking		4,566,143
Central America and the Caribbean	0	0	Investments		6,320,302,251

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	0	Investments		535,565,244
North America	0	0	Investments		1,690,748

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America	0	0	Investments		360,104,856
Central America and the Caribbean	0	0	Program Services	EDUCATION	4,247

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	6	10	Program Services	EDUCATION	3,132,779
Europe (Including Iceland and Greenland)	32	23	Program Services	EDUCATION	5,531,052

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
Middle East and North Africa	0	0	Program Services	EDUCATION	52,913
North America	0	0	Program Services	EDUCATION	30,891

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	5	3	Program Services	EDUCATION	328,400
South Asia	2	9	Program Services	EDUCATION	134,130

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa	1	2	Program Services	EDUCATION	92,236
Central America and the Caribbean	0	0	Program Services	RESEARCH	408,579

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	0	Program Services	RESEARCH	1,063,652
Europe (Including Iceland and Greenland)	0	0	Program Services	RESEARCH	7,726,109

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	0	0	Program Services	RESEARCH	130,889
North America	0	0	Program Services	RESEARCH	738,671

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Russia and the Newly Independent States	0	0	Program Services	RESEARCH	19,818
South America	0	0	Program Services	RESEARCH	368,043

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia	0	0	Program Services	RESEARCH	127,084
Sub-Saharan Africa	5	61	Program Services	RESEARCH	4,757,471

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	0	0	Program Services	SEMINARS, CONFERENCES	10,352
East Asia and the Pacific	0	0	Program Services	SEMINARS, CONFERENCES	23,806

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	0	Program Services	SEMINARS, CONFERENCES	868,932
Middle East and North Africa	0	0	Program Services	SEMINARS, CONFERENCES	15,003

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America	0	0	Program Services	SEMINARS, CONFERENCES	227,231
Russia and the Newly Independent States	0	0	Program Services	SEMINARS, CONFERENCES	15,065

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	0	0	Program Services	SEMINARS, CONFERENCES	22,046
South Asia	0	0	Program Services	SEMINARS, CONFERENCES	10,783

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Program Services	SEMINARS, CONFERENCES	677

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	RESEARCH	106,672	WIRE TRANSFE		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	371,619	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	203,217	WIRE TRANSFE		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	150,010	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	150,000	WIRE TRANSFE		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	143,827	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	126,836	WIRE TRANSFE		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	100,783	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	48,210	WIRE TRANSFE		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	40,005	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	37,280	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	29,106	CHECK		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH	19,440	WIRE TRANSFE		N/A	N/A
		EAST ASIA AND THE PACIFIC	RESEARCH	13,778	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	748,498	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	512,454	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	204,524	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	180,551	CHECK		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	164,682	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	121,640	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	93,640	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	77,066	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	69,878	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	67,008	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	56,833	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	52,000	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	51,759	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	48,506	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	47,929	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	34,989	CHECK		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	34,057	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	25,772	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	25,706	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	19,440	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	19,440	WIRE TRANSFE		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	18,182	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	14,161	CHECK		N/A	N/A
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	11,159	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	10,803	WIRE TRANSFE		N/A	N/A
		NORTH AMERICA	RESEARCH	286,861	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	162,772	CHECK		N/A	N/A
		NORTH AMERICA	RESEARCH	128,726	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	123,199	WIRE TRANSFE		N/A	N/A
		NORTH AMERICA	RESEARCH	65,661	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	65,171	WIRE TRANSFE		N/A	N/A
		NORTH AMERICA	RESEARCH	50,136	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	45,500	WIRE TRANSFE		N/A	N/A
		NORTH AMERICA	RESEARCH	17,500	CHECK		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	17,468	WIRE TRANSFE		N/A	N/A
		SOUTH AMERICA	RESEARCH	152,901	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	RESEARCH	152,364	WIRE TRANSFE		N/A	N/A
		SOUTH AMERICA	RESEARCH	118,624	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	RESEARCH	20,805	WIRE TRANSFE		N/A	N/A
		SOUTH ASIA	RESEARCH	214,645	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	RESEARCH	96,508	WIRE TRANSFE		N/A	N/A
		SOUTH ASIA	RESEARCH	74,816	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	RESEARCH	55,026	WIRE TRANSFE		N/A	N/A
		SOUTH ASIA	RESEARCH	44,260	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	RESEARCH	44,100	WIRE TRANSFE		N/A	N/A
		SOUTH ASIA	RESEARCH	27,464	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH ASIA	RESEARCH	20,000	WIRE TRANSFE		N/A	N/A
		SOUTH ASIA	RESEARCH	19,614	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	1,992,012	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	613,482	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	521,617	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	387,271	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	383,947	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	190,925	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	152,026	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	97,069	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	89,148	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	79,727	WIRE TRANSFE		N/A	N/A

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	56,913	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	38,981	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	19,153	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	17,280	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	15,046	WIRE TRANSFE		N/A	N/A
		SUB-SAHARAN AFRICA	RESEARCH	14,174	WIRE TRANSFE		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	SPNSRSHP	6,356	WIRE TRANSFE		N/A	N/A

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIP	Europe (Including Iceland and Greenland)	117	2,683,835	CHECK/WIRETR		N/A	N/A
SCHOLARSHIP	Middle East and North Africa	1	33,168	CHECK/WIRETR		N/A	N/A

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIP	South America	7	180,925	CHECK/WIRETR		N/A	N/A
SCHOLARSHIP	Sub-Saharan Africa	4	53,278	CHECK/WIRETR		N/A	N/A

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP	Central America and the Caribbean	1	5,519	CHECK/WIRETR		N/A	N/A
FELLOWSHIP	East Asia and the Pacific	7	28,826	CHECK/WIRETR		N/A	N/A

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP	Europe (Including Iceland and Greenland)	16	33,315	CHECK/WIRETR		N/A	N/A
FELLOWSHIP	Middle East and North Africa	1	6,064	CHECK/WIRETR		N/A	N/A

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
FELLOWSHIP	Sub-Saharan Africa	1	2,200	CHECK/WIRETR		N/A	N/A
AWARDS	Central America and the Caribbean	1	500	CHECK/WIRETR		N/A	N/A

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AWARDS	East Asia and the Pacific	20	29,233	CHECK/WIRETR		N/A	N/A
AWARDS	Europe (Including Iceland and Greenland)	16	61,250	CHECK/WIRETR		N/A	N/A

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AWARDS	North America	4	2,426	CHECK/WIRETR		N/A	N/A
AWARDS	South America	1	4,000	CHECK/WIRETR		N/A	N/A

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
AWARDS	South Asia	1	71	CHECK/WIRETR		N/A	N/A
AWARDS	Sub-Saharan Africa	1	500	CHECK/WIRETR		N/A	N/A

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number

43-0653611

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 268

3 Enter total number of other organizations listed in the line 1 table ▶ 34

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIP	10536	331,330,791		N/A	N/A
(2) FELLOWSHIP	3740	83,020,430		N/A	N/A
(3) AWARDS	1624	1,141,943		N/A	N/A
(3)					
(4)					
(5)					
(6)					
(7)					

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

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

Additional Data

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A MILLION STARS INC 110 N JEFFERSON AVE ST LOUIS, MO 63103	20-4768985	501(C)(3)	7,500		N/A	N/A	SPONSORSHIP
ADVOCATE HEALTH AND HOSPITALS CORP 3075 HIGHLAND PKWY STE 600 DOWNERS GROVE, IL 60515	36-2167779	501(C)(3)	46,878		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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AECOM TECHNICAL SERVICES INC 300 S GRAND AVE 2ND FL LOS ANGELES, CA 900710001	95-2661922		12,013		N/A	N/A	RESEARCH
AFFINIA HEALTHCARE 1717 BIDDLE ST LOUIS, MO 631063454	43-0817642	501(C)(3)	20,888		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ALBERT EINSTEIN COLLEGE MEDICINE INC 1300 MORRIS PARK AVE BELFER BLDG RM BRONX, NY 104611900	47-2209056	501(C)(3)	45,802		N/A	N/A	RESEARCH
ALL CHILDRENS HOSPITAL 501 SIXTH AVE SOUTH ST PETERSBURG, FL 33701	59-2481742	501(C)(3)	8,888		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ALLIANCE FOR CLINCIAL TRIALS IN ONCOLO 125 S WACKER DR STE 1600 CHICAGO, IL 60606	02-0464400	501(C)(3)	6,985		N/A	N/A	RESEARCH
ALZHEIMERS ASSOCIATION 9370 OLIVE BLVD ST LOUIS, MO 631323214	43-1237069	501(C)(3)	15,200		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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AMBUSH SOCCER CLUB LLC 2480 EXECUTIVE DR STE 208 ST CHARLES, MO 63303	81-1669960		7,750		N/A	N/A	SPONSORSHIP
AMERICAN ACADEMY OF PEDIATRICS PO BOX 776394 CHICAGO, IL 606776364	36-2275597	501(C)(3)	203,169		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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AMERICAN CANCER SOCIETY PO BOX 28566 ST LOUIS, MO 63146	74-1185665	501(C)(3)	31,500		N/A	N/A	SPONSORSHIP
AMERICAN FRIENDS OF IDC 142 WEST 57TH ST 11TH FL NEW YORK, NY 10019	31-1577589	501(C)(3)	156,200		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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AMERICAN HEART ASSOCIATION PO BOX 1590 HAGERSTOWN, MD 21741	13-5613797	501(C)(3)	16,000		N/A	N/A	SPONSORSHIP
AMERICAN SOCIETY OF MECHANICAL ENGINEE 150 CLOVE RD 6TH FL LITTLE FALLS, NJ 074242139	13-1623899	501(C)(3)	9,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ARCHDIOCESE OF ST LOUIS 6352 FORSYTH BLVD CLAYTON, MO 63105	43-0653244	501(C)(3)	10,300		N/A	N/A	SPONSORSHIP
AREA RESOURCES FOR COMMUNITY AND HUMAN 539 NORTH GRAND BLVD 5TH FL ST LOUIS, MO 63103	31-1611583	501(C)(3)	20,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ARIZONA STATE UNIVERSITY 1475 N SCOTTSDALE RD STE 200 SCOTTSDALE, AZ 85257	86-0196696	STATE OF AZ	20,962		N/A	N/A	RESEARCH
ARKANSAS CHILDRENS RESEARCH INSTITUTE 1 CHILDRENS WAY SLOT 663 LITTLE ROCK, AR 722023591	71-0694931	501(C)(3)	75,136		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ARTHRITIS FOUNDATION INC 1355 PEACHTREE ST NE STE 600 ATLANTA, GA 30309	58-1341679	501(C)(3)	9,000		N/A	N/A	SPONSORSHIP
ARTS AS HEALING FOUNDATION 737 VILLA PLACE CT OLIVETTE, MO 63132	46-4448339	501(C)(3)	20,000		N/A	N/A	SPONSORSHIP

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AUGUSTA UNIVERSITY RESEARCH INSTITUTE INC PO BOX 945552 ATLANTA, GA 303945552	58-1418202	501(C)(3)	12,871		N/A	N/A	RESEARCH
BARNES JEWISH HOSPITAL 1 BARNES JEWISH HOSPITAL PLAZA MAI ST LOUIS, MO 63110	23-7309937	501(C)(3)	82,306		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BATTELLE MEMORIAL INSTITUTE DBA PO BOX 999 MSIN J1-09 RICHLAND, WA 99352	31-4379427	501(C)(3)	111,638		N/A	N/A	RESEARCH
BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA RM S803 HOUSTON, TX 77030	74-1613878	501(C)(3)	1,011,534		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BAYLOR RESEARCH INSTITUTE 1950 N STEMMONS FREEWAY STE 5010 B DALLAS, TX 75207	75-1921898	501(C)(3)	15,594		N/A	N/A	RESEARCH
BETH ISRAEL DEACONESS MEDICAL CENTER 330 BROOKLINE AVE RESEARCH FINANCE BOSTON, MA 02215	04-2103881	501(C)(3)	210,837		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BETH ISRAEL MEDICAL CENTER 330 BROOKLINE AVE BR 109 RM 259 BOSTON, MA 02215	13-5564934	501(C)(3)	233,340		N/A	N/A	RESEARCH
BEYOND HOUSING INC 6506 WRIGHT WAY PINE LAWN, MO 63121	51-0179471	501(C)(3)	10,250		N/A	N/A	SPONSORSHIP

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BIOSTL 4340 DUNCAN AVE ST LOUIS, MO 63110	45-2137574	501(C)(3)	1,500,000		N/A	N/A	SPONSORSHIP
BJC HEALTH SYSTEMS PO BOX 958716 SAINT LOUIS, MO 631958716	43-1617558	501(C)(3)	13,593		N/A	N/A	RESEARCH

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BJC HEALTHCARE PO BOX 650723 DALLAS, TX 75265	43-0654870	501(C)(3)	65,534		N/A	N/A	RESEARCH
BLUEWILLOW BIOLOGICS FKA NANOBIO CORPO 2311 GREEN RD STE A ANN ARBOR, MI 481052965	20-5294469		74,737		N/A	N/A	RESEARCH

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BOARD OF REGENTS OF THE UNIVERSITY OF PO BOX 26901 AAT-5400 ATTN PAMELA OKLAHOMA CITY, OK 73126	73-1563627		9,878		N/A	N/A	RESEARCH
BOARD OF TRUSTEES OF LELAND STANFORD J PO BOX 885150 LOS ANGELES, CA 90088	94-1156365	501(C)(3)	578,049		N/A	N/A	RESEARCH

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BOSTON MEDICAL CENTER CORP 660 HARRISON GAMBRO BUILDING 2ND F BOSTON, MA 02118	04-3314093	501(C)(3)	82,958		N/A	N/A	RESEARCH
BRIGHAM AND WOMENS HOSPITAL INC PARTNERS HEALTHCARE RESEARCH CORE A SOMERVILLE, MA 02145	04-2312909	501(C)(3)	478,869		N/A	N/A	RESEARCH

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BROAD INSTITUTE INC 7 CAMBRIDGE CENTER CAMBRIDGE, MA 02142	26-3428781	501(C)(3)	397,487		N/A	N/A	RESEARCH
BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVE NW WASHINGTON, DC 200362188	53-0196577	501(C)(3)	98,934		N/A	N/A	RESEARCH

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BUTLER HOSPITAL 345 BLACKSTONE BOULEVARD PROVIDENCE, RI 02906	05-0258812	501(C)(3)	88,284		N/A	N/A	RESEARCH
CALIFORNIA INSTITUTE OF TECHNOLOGY CAROL CASEY STUDENT-FACULTY PROGRAM PASADENA, CA 91125	95-1643307	501(C)(3)	135,478		N/A	N/A	RESEARCH

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CALIFORNIA STATE UNIVERSITY SAN MARCOS 333 S TWIN OAKS VALLEY RD SAN MARCOS, CA 920960001	33-0397688	501(C)(3)	92,721		N/A	N/A	RESEARCH
CAMPBELL & ASSOCIATES CONSULTING 800 E STADIUM BEACH RD EAST GRAPEVIEW, WA 985469200	82-4128473		16,400		N/A	N/A	RESEARCH

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CARDINAL GLENNON CHILDRENS HOSPITAL 1465 S GRAND BLVD ST LOUIS, MO 63104	43-0738490	501(C)(3)	21,997		N/A	N/A	RESEARCH
CARNEGIE MELLON UNIVERSITY PO BOX 360456 PITTSBURGH, PA 15251	25-0969449	501(C)(3)	83,097		N/A	N/A	RESEARCH

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CASA DE SALUD 3200 CHOUTEAU AVE ST LOUIS, MO 63103	27-0732049	501(C)(3)	20,000		N/A	N/A	SPONSORSHIP
CASE WESTERN RESERVE UNIVERSITY 11075 EAST BLVD FINANCE OFFICE RM CLEVELAND, OH 44106	34-1018992	501(C)(3)	475,661		N/A	N/A	RESEARCH

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CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD 65-WIL SUTIE 1150 LOS ANGELES, CA 900481804	95-1644600	501(C)(3)	114,795		N/A	N/A	RESEARCH
CENTRAL MICHIGAN UNIVERSITY 304 WARRINER HALL MOUNT PLEASANT, MI 48859	38-6004447	501(C)(3)	39,767		N/A	N/A	RESEARCH

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CHAMPLAIN VALLEY PHYSICIANS HOSPITAL PO BOX 2868 PLATTSBURGH, NY 12901	14-1338471	501(C)(3)	6,000		N/A	N/A	RESEARCH
CHILDRENS HEALTHCARE OF ATLANTA 1575 NORTHEAST EXPRESSWAY ATLANTA, GA 30329	58-2367819	501(C)(3)	13,295		N/A	N/A	RESEARCH

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CHILDRENS HOSPITAL 200 HENRY CLAY AVE NEW ORLEANS, LA 70118	72-0467503	501(C)(3)	31,435		N/A	N/A	RESEARCH
CHILDRENS HOSPITAL BOSTON CORPORATION 300 LONGWOOD AVE MAILSTOP BCH1383 BOSTON, MA 02115	04-2774441	501(C)(3)	625,661		N/A	N/A	RESEARCH

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CHILDRENS HOSPITAL MEDICAL CENTER 3333 BURNET AVE CINCINNATI, OH 452293039	31-0833936	501(C)(3)	20,000		N/A	N/A	RESEARCH
CHILDRENS HOSPITAL OF PHILADELPHIA 3401 CIVIC CENTER BLVD PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	1,052,299		N/A	N/A	RESEARCH

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CHILDRENS MERCY HOSPITAL & CLINIC PO BOX 803852 KANSAS CITY, MO 641083852	44-0605373	501(C)(3)	274,414		N/A	N/A	RESEARCH
CHILDRENS RESEARCH INSTITUTE 1 INVENTA PLACE WEST TOWER 3RD FL SILVER SPRING, MD 20910	52-1654453	501(C)(3)	123,829		N/A	N/A	RESEARCH

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CHRISTIANA HEALTH CARE SERVICES INC 200 HYGEIA DR STE 2400 NEWARK, DE 19713	51-0103684	501(C)(3)	13,000		N/A	N/A	RESEARCH
CINEMA ST LOUIS 3547 OLIVE ST STE 260 ST LOUIS, MO 63103	43-1613176	501(C)(3)	7,026		N/A	N/A	SPONSORSHIP

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CLEVELAND CLINIC FOUNDATION PO BOX 931562 CLEVELAND, OH 441935012	34-0714585	501(C)(3)	182,253		N/A	N/A	RESEARCH
CLOSETSWITCH LLC 14143 EMELITA ST SHERMAN OAKS, CA 91401	60-8236022		10,000		N/A	N/A	AWARD

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COLORADO STATE UNIVERSITY 6015 CAMPUS DELIVERY FORT COLLINS, CO 805236015	84-6000545	STATE OF CO	32,441		N/A	N/A	RESEARCH
COLUMBIA UNIVERSITY 535 WEST 114TH ST 106 BUTLER LIBRA NEW YORK, NY 10027	13-5598093	501(C)(3)	1,688,659		N/A	N/A	RESEARCH

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CONSTRUCTION FORUM 3245 HAMPTON AVE 2ND FL ST LOUIS, MO 63139	81-1254809	501(C)(3)	5,525		N/A	N/A	SPONSORSHIP
CONSUMER WELLNESS SOLUTIONS INC 11000 OPTUM CIRCLE EDEN PRAIRIE, MN 55344	20-0231080		6,634		N/A	N/A	RESEARCH

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CONTEMPORARY ART MUSEUM ST LOUIS 3750 WASHINGTON BLVD ST LOUIS, MO 63108	43-1202816	501(C)(3)	7,250		N/A	N/A	SPONSORSHIP
COOPER HEALTH SYSTEM 1 FEDERAL ST STE NW-400A CAMDEN, NJ 08103	21-0634462	501(C)(3)	57,959		N/A	N/A	RESEARCH

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CORNELL UNIVERSITY PO BOX 22 ITHACA, NY 148510022	15-0532082	501(C)(3)	164,702		N/A	N/A	RESEARCH
CURATORS OF THE UNIVERSITY OF MISSOURI PO BOX 6023 MU VET MED DIAGNOSTIC COLUMBIA, MO 65211	43-6003859	501(C)(3)	1,607,774		N/A	N/A	RESEARCH

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DANA-FARBER CANCER INSTITUTE 450 BROOKLINE AVE BOSTON, MA 02215	04-2263040	501(C)(3)	80,024		N/A	N/A	RESEARCH
DONALD DANFORTH PLANT SCIENCE CENTER 975 NORTH WARSON RD ST LOUIS, MO 63132	31-1584621	501(C)(3)	161,503		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DREXEL UNIVERSITY 3141 CHESTNUT ST 106 MAIN PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	154,078		N/A	N/A	RESEARCH
DUKE UNIVERSITY PO BOX 90083 DURHAM, NC 27708	56-0532129	501(C)(3)	1,503,616		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTERSEALS MIDWEST 11933 WESTLINE INDUSTRIAL DR ST LOUIS, MO 63146	43-0979927	501(C)(3)	10,000		N/A	N/A	AWARD
ELECTRIC POWER RESEARCH INSTITUTE INC 3420 HILLVIEW AVE PALO ALTO, CA 94304	23-7175375	501(C)(3)	61,334		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMORY UNIVERSITY P O BOX 935084 ATLANTA, GA 311935084	58-0566256	501(C)(3)	488,801		N/A	N/A	RESEARCH
FLANCE MANAGEMENT INC 1908 OFALLON ST ST LOUIS, MO 63106	46-2048313	501(C)(3)	50,000		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD OUTREACH INC 3117 OLIVE ST ST LOUIS, MO 63103	43-1492878	501(C)(3)	16,000		N/A	N/A	SPONSORSHIP
FOUNDATION FOR BARNES JEWISH HOSPITAL 1001 HIGHLANDS PLZ DR WEST STE 140 ST LOUIS, MO 63110	43-1648435	501(C)(3)	30,500		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N PO BOX 19024 SEATTLE, WA 981091024	23-7156071	501(C)(3)	73,573		N/A	N/A	RESEARCH
FREEDOM COMMUNITY CENTER 4240 DUNCAN AVE STE 200 ST LOUIS, MO 63110	85-3332122	501(C)(3)	11,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEMAN HEALTH SYSTEMS 1102 WEST 32ND ST JOPLIN, MO 64804	43-1704371	501(C)(3)	88,311		N/A	N/A	RESEARCH
GATEWAY ACQUISITIONS INC 700 RACEWAY BLVD MADISON, IL 62060	80-0745628		30,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GATEWAY BIOTECHNOLOGY INC 1154 NORTH WARSON RD ST LOUIS, MO 63132	45-2848706		180,392		N/A	N/A	RESEARCH
GATEWAY HEMOPHILIA ASSOCIATION 4976 EICHELBERGER ST ST LOUIS, MO 63109	43-1447057	501(C)(3)	5,186		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEISINGER CLINIC AKA GEISINGER HEALTH 100 NORTH ACADEMY AVE DANVILLE, PA 17822	23-6291113	501(C)(3)	372,636		N/A	N/A	RESEARCH
GENECENTRIC THERAPEUTICS INC 100 CAPITOLA DR STE 275 DURHAM, NC 27713	45-2540158		148,474		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GENERAL HOSPITAL CORP DBA MASSACHUSETT PO BOX 3829 BOSTON, MA 022413829	04-2697983	501(C)(3)	1,639,322		N/A	N/A	RESEARCH
GEORGE WASHINGTON UNIVERSITY 1918 F ST NW WASHINGTON, DC 20052	53-0196584	501(C)(3)	6,366		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGETOWN UNIVERSITY PO BOX 825738 PHILADELPHIA, PA 191825738	53-0196603	501(C)(3)	95,162		N/A	N/A	RESEARCH
GEORGIA STATE UNIVERSITY RESEARCH FDN PO BOX 3999 ATLANTA, GA 303023999	58-1845423	501(C)(3)	261,881		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GORDON RESEARCH 512 LIBERTY LANE WEST KINGSTON, RI 02892	26-0150662	501(C)(3)	10,000		N/A	N/A	SPONSORSHIP
GREENSTATE CREDIT UNION 2355 LANDON RD NORTH LIBERTY, IA 523170800	42-0804594	501(C)(3)	15,000		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUNDERSEN LUTHERAN MEDICAL FOUNDATION 1900 SOUTH AVE MAILSTOP NCA1-01 LA CROSSE, WI 54601	39-1249705	501(C)(3)	12,000		N/A	N/A	RESEARCH
HARVARD UNIVERSITY PO BOX 415649 BOSTON, MA 022415649	04-2103580	501(C)(3)	866,310		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARTS FOR HEARING FOUNDATION 11500 N PORTLAND AVE OKLAHOMA CITY, OK 73120	58-2670613	501(C)(3)	40,873		N/A	N/A	RESEARCH
HEBREW REHABILITATION CENTER FOR AGED 1200 CENTER ST ROSLINDALE, MA 02131	04-2104298	501(C)(3)	434,121		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HENRY M JACKSON FOUNDATION 6720 A ROCKLEDGE DR STE 100 BETHESDA, MD 20817	52-1317896	501(C)(3)	116,283		N/A	N/A	RESEARCH
HIVE MEDICAL INC 1826 N WOOD ST CHSE 2 CHICAGO, IL 60622	84-3730514		35,000		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE HAPPENS 200 S HANLEY RD STE 1100 ST LOUIS, MO 63105	20-2523211	501(C)(3)	7,860		N/A	N/A	SPONSORSHIP
HOUSTON METHODIST HOSPITAL PO BOX 4805 HOUSTON, TX 772104805	74-1180155	501(C)(3)	9,902		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IMPOSSIBLE SENSING LLC 3407 S JEFFERSON AVE ST LOUIS, MO 63118	81-1333330		90,028		N/A	N/A	RESEARCH
INDIANA UNIVERSITY 1001 EAST 3RD ST BLOOMINGTON, IN 47405	35-6001673	501(C)(3)	352,944		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INDIANA UNIVERSITY HEALTH 1812 NORTH CAPITOL AVE STE 120 INDIANAPOLIS, IN 46202	35-1955872	501(C)(3)	14,000		N/A	N/A	RESEARCH
J DAVID GLADSTONE INSTITUTES 1650 OWENS ST SAN FRANCISCO, CA 94158	23-7203666	501(C)(3)	268,591		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOHNS HOPKINS UNIVERSITY 3400 N CHARLES ST 265 GARLAND HALL BALTIMORE, MD 21218	52-0595110	501(C)(3)	894,824		N/A	N/A	RESEARCH
JOHNS HOPKINS UNIVERSITY APPLIED PHYSI 11100 JOHNS HOPKINS RD LAUREL, MD 207236005	52-0595111	501(C)(3)	25,471		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KANSAS CITY UNIVERISTY MEDICAL CENTER 3901 RAINBOW BLVD MAIL- STOP 1032 KANSAS CITY, KS 66160	48-1108830	501(C)(3)	120,901		N/A	N/A	RESEARCH
KANSAS CITY MO HEALTH DEPARTMENT 2400 TROOST AVE STE 4200 KANSAS CITY, MO 64108	44-6000201	STATE OF KS	32,391		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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KENNEDY KRIEGER INC 707 NORTH BRDWAY BALTIMORE, MD 21205	52-1734695	501(C)(3)	1,214,641		N/A	N/A	RESEARCH
KINGDOM HOUSE 1321 S 11TH ST ST LOUIS, MO 63104	43-0652648	501(C)(3)	11,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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LA JOLLA INSTITUTE FOR ALLERGY IMMUN 9420 ATHENA CIRCLE LA JOLLA, CA 92037	33-0328688	501(C)(3)	127,415		N/A	N/A	RESEARCH
LEARFIELD COMMUNICATIONS LLC PO BOX 843038 KANSAS CITY, MO 641843038	90-0776492		14,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LINDE INC DEPT CH 10660 PALATINE, IL 60055	06-1249050		68,773		N/A	N/A	RESEARCH
LINDENWOOD UNIVERSITY 209 S KINGSHIGHWAY ST CHARLES, MO 63301	43-0652649	501(C)(3)	75,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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LOUISIANA HEALTH CARE CONNECTIONS INC PO BOX 84180 BATON ROUGE, LA 70884	27-1287287	STATE OF LA	153,865		N/A	N/A	RESEARCH
LOUISIANA STATE UNIVERSITY 433 BOLIVAR ST RM 619 NEW ORLEANS, LA 70112	72-6000848	501(C)(3)	888,158		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUNDQUIST INSTITUTE 1124 W CARSON ST TORRANCE, CA 90502	95-2138184	501(C)(3)	43,810		N/A	N/A	RESEARCH
LURIE CHILDRENS HOSPITAL OF CHICAGO 225 E CHICAGO AVE CAMPUS BOX 73 CHICAGO, IL 60611	36-3357006	501(C)(3)	12,295		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MARFAN FOUNDATION INC 22 MANHASSET AVE PORT WASHINGTON, NY 110503121	52-1265361	501(C)(3)	11,250		N/A	N/A	SPONSORSHIP
MARSHFIELD CLINIC 1000 N OAK AVE MARSHFIELD, WI 54449	39-0452970	501(C)(3)	242,603		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASSACHUSETTS INSTITUTE OF TECHNOLOGY 31 AMES ST 68-270 CAMBRIDGE, MA 02142	04-2103594	501(C)(3)	111,124		N/A	N/A	RESEARCH
MAYO CLINIC PO BOX 9146 MINNEAPOLIS, MN 554809146	41-6011702	501(C)(3)	1,535,751		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAYO CLINIC ARIZONA PO BOX 4006 ROCHESTER, MN 559034006	86-0800150	501(C)(3)	8,909		N/A	N/A	RESEARCH
MAYO CLINIC JACKSONVILLE PO BOX 860334 MINNEAPOLIS, MN 55486	59-3337028	501(C)(3)	492,942		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDICAL UNIVERSITY OF SOUTH CAROLINA 96 JONATHAN LUCAS ST STE 301 CHARLESTON, SC 29425	57-6000722	501(C)(3)	450,254		N/A	N/A	RESEARCH
MEDSTAR RESEARCH INSTITUTE PO BOX 418223 BOSTON, MA 022418223	52-6056274	501(C)(3)	97,443		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDTRONIC NAVIGATION INC 13584 COLLECTION CENTER DR CHICAGO, IL 60693	84-1295737		29,645		N/A	N/A	RESEARCH
MEHARRY MEDICAL COLLEGE 1005 DR D B TODD JR BLVD NASHVILLE, TN 372083599	62-0488046	501(C)(3)	8,495		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEMORIAL SLOAN-KETTERING CANCER CENTER PO BOX 27084 NEW YORK, NY 10087	13-1624182	501(C)(3)	123,857		N/A	N/A	RESEARCH
MERCY COLLEGE 555 BRDWAY DOBBS FERRY, NY 105221189	13-1967321	501(C)(3)	6,420		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCY RESEARCH PO BOX 505367 ST LOUIS, MO 631505367	87-0796305	501(C)(3)	6,718		N/A	N/A	RESEARCH
MICHIGAN STATE UNIVERSITY 446 WEST CIRCLE DR RM 11 EAST LANSING, MI 48824	38-6005984	501(C)(3)	20,356		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSOURI BOTANICAL GARDEN 15193 OLIVE BLVD FAUST PARK ST LOUIS, MO 63017	43-0666759	501(C)(3)	6,100		N/A	N/A	SPONSORSHIP
MISSOURI COALITION FOR THE ENVIRONMENT 725 KINGSLAND AVE STE 100 ST LOUIS, MO 63130	23-7167066	501(C)(3)	121,050		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSOURI CURES EDUCATION FOUNDATION PO BOX 16580 ST LOUIS, MO 63105	27-0576111	501(C)(3)	10,000		N/A	N/A	SPONSORSHIP
MISSOURI PHYSICIANS HEALTH PROGRAM 1023 EXECUTIVE PARKWAY STE 16 ST LOUIS, MO 63141	43-1572458	501(C)(3)	20,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MISSOURI STATE UNIVERSITY 901 S NATIONAL AVE SPRINGFIELD, MO 65897	44-6000308	501(C)(3)	38,743		N/A	N/A	RESEARCH
MORGRIDGE INSTITUTE FOR RESEARCH I PO BOX 88103 MILWAUKEE, WI 532880103	20-8325570	501(C)(3)	50,546		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE LEVY PLACE NEW YORK, NY 10029	13-6171197	501(C)(3)	562,424		N/A	N/A	RESEARCH
MUNICIPAL THEATRE ASSOCIATION OF ST LOUIS 1 THEATRE DR SAINT LOUIS, MO 63112	43-0662485	501(C)(3)	6,200		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL CONGRESS OF AMERICAN INDIANS 1516 P ST NW WASHINGTON, DC 20005	53-6017907	501(C)(3)	105,933		N/A	N/A	RESEARCH
NEMOURS FOUNDATION 1600 ROCKLAND RD WILMINGTON, DE 19803	59-0634433	501(C)(3)	17,396		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEURAL DYNAMIC TECHNOLOGIES LLC 8 ST MARYS ST BOSTON, MA 022152421	83-0837055		72,380		N/A	N/A	RESEARCH
NEW YORK BLOOD CENTER INC 310 EAST 67TH ST NEW YORK CITY, NY 10065	13-1949477	501(C)(3)	63,823		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK UNIVERSITY 430 E 29TH ST RM 316 NEW YORK, NY 10016	13-5562308	501(C)(3)	398,967		N/A	N/A	RESEARCH
NEW YORK UNIVERSITY MEDICAL CENTER P O BOX 415026 BOSTON, MA 02241	13-5562309	501(C)(3)	294,525		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH CAROLINA A&T STATE UNIVERSITY 1601 E MARKET ST STE 112 GREENSBORO, NC 27411	56-6000007	501(C)(3)	8,518		N/A	N/A	RESEARCH
NORTH CAROLINA STATE UNIVERSITY CAMPUS BOX 7214 RALEIGH, NC 276957214	56-6000756	STATE OF NC	231,472		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHSHORE UNIVERSITY HEALTHSYSTEM 1001 UNIVERSITY PLACE EVANSTON, IL 60201	36-2167060	501(C)(3)	6,000		N/A	N/A	RESEARCH
NORTHWESTERN UNIVERSITY 2169 CAMPUS DR EVANSTON, IL 60208	36-2167817	501(C)(3)	1,432,014		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NUPEAK THERAPEUTICS INC C/O RIGHT ON SITE FENTON, MO 63026	32-0393939		77,780		N/A	N/A	RESEARCH
OHIO STATE UNIVERSITY OBIC 1960 KENNY RD COLUMBUS, OH 43210	31-6025986	501(C)(1)	1,641,974		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OSF HEALTHCARE SYSTEM 1420 W PIONEER PARKWAY PEORIA, IL 61615	37-0813229	501(C)(3)	19,418		N/A	N/A	RESEARCH
OYSTAR WORLD LLC 4501 MARYLAND AVE ST LOUIS, MO 63108	85-3043911		7,500		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC GRADUATE SCHOOL OF PSYCHOLOGY 1791 ARASTRADERO RD PALO ALTO, CA 943041337	94-2340692	501(C)(3)	31,105		N/A	N/A	RESEARCH
PARAQUAD INC 5240 OAKLAND AVE ST LOUIS, MO 63110	23-7112449	501(C)(3)	6,140		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARENTS AS TEACHERS NATIONAL CENTER 2228 BALL DR ST LOUIS, MO 63146	43-1569124	501(C)(3)	146,653		N/A	N/A	RESEARCH
PATIKA INC 1401 PENNSYLVANIA AVE UNIT 105 WILMINGTON, DE 19806	87-4001035		15,000		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEDAL THE CAUSE 9288 DIELMAN INDUSTRIAL DR ST LOUIS, MO 63132	27-2233336	501(C)(3)	15,000		N/A	N/A	SPONSORSHIP
PENNSYLVANIA STATE UNIVERSITY 500 UNIVERSITY DR PO BOX 850 HERSHEY, PA 17033	24-6000376	501(C)(3)	232,560		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PORTLAND VA RESEARCH FOUNDATION PO BOX 19832 PORTLAND, OR 972800832	94-3090170	501(C)(3)	37,095		N/A	N/A	RESEARCH
POWERED BY SHAKTI LLC 1021 CRITTENDEN ST NE WASHINGTON, DC 20017	84-4017286		162,000		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREPAREAI 6665 DELMAR BLVD STE 3000 UNIVERSITY CITY, MO 63130	82-2714443	501(C)(3)	10,000		N/A	N/A	SPONSORSHIP
PRESERVE SOUTH INC 5023 B U BOWMAN DR BUFORD, GA 30518	82-3951643		25,925		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRINCETON UNIVERSITY 701 CARNEGIE CENTER STE 434 PRINCETON, NJ 08540	21-0634501	501(C)(3)	10,000		N/A	N/A	RESEARCH
PROJECT PEANUT BUTTER 7435 FLORA AVE ST LOUIS, MO 63143	59-3785405	501(C)(3)	87,410		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PSYCHOLOGICAL CLINICAL SCIENCE ACCREDITATIO 1101 E 10TH ST BLOOMINGTON, IN 46405	26-3018654	501(C)(3)	30,000		N/A	N/A	SPONSORSHIP
REACTION ENGINEERING INTERNATIONAL 189 E FORT UNION BLVD STE 201 MIDVALE, UT 840474657	87-0474621		111,053		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RECINTO DE CIENCIAS MEDICAS PO BOX 365067 SAN JUAN, PR 009365067	66-0433762		37,518		N/A	N/A	RESEARCH
REGENTS OF NEW MEXICO STATE UNIVERSITY P O BOX 30002 LAS CRUCES, NM 880038002	85-6000401	STATE OF NM	19,900		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REGENTS OF THE UNIVERSITY OF CALIFORNIA 9500 GILMAN DR LA JOLLA, CA 92093	95-2226406	501(C)(3)	2,182,785		N/A	N/A	RESEARCH
REGENTS OF THE UNIVERSITY OF MICHIGAN 919 S UNIVERSITY AVE ANN ARBOR, MI 481091185	38-6006309	501(C)(3)	949,992		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REGENTS OF UNIVERSITY OF CALIFORNIA 3200 REGATTA BLVD STE E RICHMOND, CA 94804	94-2951741	STATE OF CA	64,370		N/A	N/A	RESEARCH
REGENTS OF UNIVERSITY OF CALIFORNIA DAVIS PO BOX 743168 LOS ANGELES, CA 90074	94-6036494	501(C)(3)	39,842		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REGENTS UNIVERSITY OF CALIFORNIA ONE SHIELDS AVE DAVIS, CA 95616	95-6006142	501(C)(3)	81,149		N/A	N/A	RESEARCH
REHABILITATION INSTITUTE OF CHICAGO 355 EAST ERIE ST 26TH FL CHICAGO, IL 606114496	36-2256036	501(C)(3)	9,884		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESEARCH FDN UNIV GEORGIA 310 EAST CAMPUS RD ATHENS, GA 30602	58-1353149	501(C)(3)	48,809		N/A	N/A	RESEARCH
RESEARCH FOUND FOR MENTAL HYGIENE INC 150 BRDWAY STE 301 MENANDS, NY 12204	14-1410842	501(C)(3)	128,242		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RESEARCH FOUNDATION OF THE CITY UNIVER 230 WEST 41ST ST 7TH FL NEW YORK, NY 10036	13-1988190	501(C)(3)	21,440		N/A	N/A	RESEARCH
RESEARCH INSTITUTE AT NATIONWIDE CHILD PO BOX 7800 DEP 781653 DETROIT, MI 48278	31-6056230	501(C)(3)	22,220		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RICE UNIVERSITY PO BOX 1892 MS 44 HOUSTON, TX 77251	74-1109620	501(C)(3)	54,452		N/A	N/A	RESEARCH
ROWAN UNIVERSITY 201 MULLICA HILL RD GLASSBORO, NJ 08028	22-2764819	501(C)(3)	14,728		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUSH UNIVERSITY MEDICAL CENTER 1700 WEST VAN BUREN STE 277 CHICAGO, IL 60612	36-2174823	501(C)(3)	110,482		N/A	N/A	RESEARCH
RUTGERS STATE UNIVERSITY OF NEW JERSEY 205 SOUTH ORANGE AVE NEWARK, NJ 07103	22-6001086	501(C)(3)	105,325		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAINT LOUIS UNIVERSITY 3545 LAFAYETTE AVE ST LOUIS, MO 63104	43-0654872	501(C)(3)	807,207		N/A	N/A	RESEARCH
SAINT LOUIS ZOO ASSOCIATION ONE GOVERNMENT DR ST LOUIS, MO 63110	43-1727309	501(C)(3)	10,000		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN DIEGO STATE UNIVERSITY RESEARCH FOUNDAT 5500 CAMPANILE DR SAN DIEGO, CA 921824730	95-6042721	501(C)(3)	216,292		N/A	N/A	RESEARCH
SAN FRANCISCO STATE UNIVERSITY 1600 HOLLOWAY SAN FRANCISCO, CA 941321722	93-1137247	501(C)(3)	91,081		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANFORD BURNHAM MEDICAL RESEARCH INSTI 10901 NORTH TORREY PINES RD LA JOLLA, CA 92037	51-0197108	501(C)(3)	508,314		N/A	N/A	RESEARCH
SCRIPPS RESEARCH INSTITUTE PO BOX 741745 LOS ANGELES, CA 900741745	33-0435954	501(C)(3)	715,736		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE CHILDRENS HOSPITAL PO BOX 24728 SEATTLE, WA 981240728	91-0564748	501(C)(3)	18,166		N/A	N/A	RESEARCH
SHELDON ARTS FOUNDATION 3648 WASHINGTON BLVD ST LOUIS, MO 63108	43-1489756	501(C)(3)	18,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SICKLE CELL ASSOCIATION PO BOX 2751 FLORISSANT, MO 63032	36-4713585	501(C)(3)	25,002		N/A	N/A	RESEARCH
SIMMONS COLLEGE 300 THE FENWAY BOSTON, MA 02115	04-2103629	501(C)(3)	24,812		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SITEMAN GARLAND ENTERPRISES LLC 11 HEATHER LANE OLIVETTE, MO 63132	26-2787643		20,000		N/A	N/A	SPONSORSHIP
SLING HEALTH 4240 DUNCAN AVE STE 200 ST LOUIS, MO 63110	46-5658453	501(C)(3)	70,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY FOR REPRODUCTIVE INVESTIGATION 555 E WELLS ST STE 1100 MILWAUKEE, WI 53202	95-2293816	501(C)(3)	10,000		N/A	N/A	SPONSORSHIP
SOCIETY FOR SOCIAL WORK AND RESEARCH 11240 WAPLES MILL RD STE 200 FAIRFAX, VA 22030	13-3768131	501(C)(3)	9,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY FOR VASCULAR SURGERY FOUNDATION 9400 W HIGGINS RD STE 315 ROSEMONT, IL 60018	43-3580038	501(C)(3)	10,000		N/A	N/A	SPONSORSHIP
SOMALOGIC INC 2945 WILDERNESS PLACE BOULDER, CO 80301	52-2195896		318,800		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH FLORIDA BEHAVIORAL 7205 CORPORATE CENTER DR 200 MIAMI, FL 331261216	59-3380599	501(C)(3)	70,029		N/A	N/A	RESEARCH
SOUTHERN ILLINOIS HOSPITAL SERVICES PO BOX 1845 INDIANAPOLIS, IN 46206	37-0618939	501(C)(3)	56,556		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTHWEST FOUNDATION FOR BIOMED RES PO BOX 760549 SAN ANTONIO, TX 782450549	74-1109630	501(C)(3)	634,571		N/A	N/A	RESEARCH
SSM HEALTH SAINT LOUIS UNIVERSITY HOSP 3700 WEST PINE MALL3RD FL ST LOUIS, MO 63108	43-6039903	501(C)(3)	11,046		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOSEPH HOSPITAL OF ORANGE PO BOX 35143 SEATTLE, WA 981245143	95-1643359	501(C)(3)	16,000		N/A	N/A	RESEARCH
ST JOSEPHS HOSPITAL AND MEDICAL CENTER 2148 S HIGH ST DENVER, CO 80208	86-0096787	501(C)(3)	17,250		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 501 ST JUDE PLACE MEMPHIS, TN 38105	62-0646012	501(C)(3)	56,461		N/A	N/A	RESEARCH
ST LOUIS BLACK REPERTORY COMPANY 6662 OLIVE BLVD UNIVERSITY CITY, MO 631302644	43-1220180	501(C)(3)	35,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST LOUIS CENTER FOR INTERNATIONAL RELA 120 SOUTH CENTRAL AVE STE 1200 ST LOUIS, MO 63105	43-1491605	501(C)(3)	7,500		N/A	N/A	SPONSORSHIP
ST LOUIS COMMUNITY FOUNDATION INC 2 OAK KNOLL PARK SAINT LOUIS, MO 63105	43-1758789	501(C)(3)	57,500		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST LOUIS COUNTY 6121 NORTH HANLEY RD BERKELEY, MO 63134	43-6003242	GOVERNMENT	6,280		N/A	N/A	RESEARCH
ST LOUIS INTEGRATED HEALTH NETWORK 30 MARYLAND PLAZA STE 300C ST LOUIS, MO 63108	20-3288245	501(C)(3)	57,349		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST LOUIS OVARIAN CANCER AWARENESS 12015 MANCHESTER RD STE 130 ST LOUIS, MO 63131	05-0523962	501(C)(3)	6,500		N/A	N/A	SPONSORSHIP
ST LOUIS SYMPHONY 718 N GRAND BLVD ST LOUIS, MO 63103	43-0666769	501(C)(3)	13,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST LUKES HOSPITAL OF KANSAS CITY INC PO BOX 505335 ST LOUIS, MO 631505335	44-0545297	501(C)(3)	58,301		N/A	N/A	RESEARCH
STAGES ST LOUIS 1023 CHESTERFIELD PARKWAY EAST CHESTERFIELD, MO 63017	31-1434156		10,000		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STATE OF ALASKA 3601 C ST STE 322 ANCHORAGE, AK 99503	92-6001185	GOVERNMENT	30,000		N/A	N/A	RESEARCH
SWIM ACROSS AMERICA INC 8508 PARK RD STE 389 CHARLOTTE, NC 28210	22-3248256	501(C)(3)	25,000		N/A	N/A	SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE UNIVERSITY 2001 NORTH 13TH ST PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	258,894		N/A	N/A	RESEARCH
TENET HEALTHCARE CORPORATION 5325 GREENWOOD AVE STE 203 WEST PALM BEACH, FL 33407	95-2557091		26,378		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS A&M UNIVERSITY 400 HARVEY MITCHELL PKWY S STE 300 COLLEGE STATION, TX 778454375	74-6000531		59,301		N/A	N/A	RESEARCH
TEXAS A&M UNIVERSITY SYSTEM 1484 AVE A STE 300 BRYAN, TX 77807	74-1974733	STATE OF TX	25,057		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BLACK REPERTORY 4709 DELMAR ST LOUIS, MO 63108	43-1395056	501(C)(3)		45,738	FMV	SPACE RENTAL	NON-CASH SPNSRSHP
THE MAGIC HOUSE 516 S KIRKWOOD RD ST LOUIS, MO 63122	51-0138441	501(C)(3)	10,000		N/A	N/A	AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THOMAS JEFFERSON UNIVERSITY 833 CHESTNUT ST STE 900 PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	10,000		N/A	N/A	RESEARCH
TIETRONIX SOFTWARE INC 1131 GEMINI AVE STE 300 HOUSTON, TX 770582794	76-0611704		112,454		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOLEDO HOSPITAL JOBST VASCULAR CENTER 2142 N COVE BLVD TOLEDO, OH 43606	34-4428256	501(C)(3)	9,000		N/A	N/A	RESEARCH
TRAILNET INC 317 N 11TH ST STE 302 ST LOUIS, MO 63101	43-1509048	501(C)(3)	28,182		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUMAN MEDICAL CENTER PO BOX 957712 SAINT LOUIS, MO 631957712	44-0661018	501(C)(3)	42,492		N/A	N/A	RESEARCH
TRUSTEES OF BOSTON UNIVERSITY PO BOX 28770 NEW YORK, NY 10087	04-2103547	501(C)(3)	1,275,075		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF DARTMOUTH COLLEGE 6132 MCNUTT HALL RM 103 HANOVER, NH 037553541	02-0222111	501(C)(3)	156,725		N/A	N/A	RESEARCH
TRUSTEES OF PURDUE UNIVERSITY 24025 NETWORK PLACE CHICAGO, IL 606731240	35-6002041	501(C)(3)	479,190		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF THE TUFTS COLLEGE 163 PACKARD AVE BARNUM HALL MEDFORD, MA 02155	04-2103634	501(C)(3)	190,442		N/A	N/A	RESEARCH
TRUSTEES UNIVERSITY OF PENNSYLVANIA 3440 MARKET ST STE 100 PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	878,950		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TUFTS MEDICAL CENTER INC 136 HARRISON AVE BOSTON, MA 02111	04-3400617	501(C)(3)	190,274		N/A	N/A	RESEARCH
TWIN CITIES ORTHOPEDICS 4010 WEST 65TH ST EDINA, MN 55435	41-1861374		7,700		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER ST LOUIS 910 NORTH 11TH ST ST LOUIS, MO 63101	43-0714167	501(C)(3)	19,324		N/A	N/A	RESEARCH
UNIV OF KENTUCKY RESEARCH FOUNDATION 800 ROSE ST RM MN564 LEXINGTON, KY 40536	61-6033693	501(C)(3)	162,653		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERISTY OF TEXAS DALLAS 800 WEST CAMPBELL RD RICHARDSON, TX 750803021	75-1305566	501(C)(3)	39,719		N/A	N/A	RESEARCH
UNIVERSITIES SPACE RESEARCH ASSOCIATIO 425 3RD ST SW STE 950 WASHINGTON, DC 20024	52-0892064	501(C)(3)	9,027		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF AKRON OFFICE OF RESEARCH ADMIN AKRON, OH 443252102	01-0725371	501(C)(3)	208,875		N/A	N/A	RESEARCH
UNIVERSITY OF ALABAMA BIRMINGHAM 1720 2ND AVE SOUTH BIRMINGHAM, AL 35294	63-6005396	501(C)(3)	66,100		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ARIZONA 888 N EUCLID AVE RM 402 TUSCON, AZ 85721	74-2652689	STATE OF AZ	104,795		N/A	N/A	RESEARCH
UNIVERSITY OF ARKANSAS FOR MED SCIENCE 4301 W MARKHAM ST LITTLE ROCK, AR 72205	71-6046242	STATE OF AR	361,998		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CALIFORNIA LOS ANGELES 10833 LE CONTE AVE LOS ANGELES, CA 90024	95-6006143	501(C)(3)	1,191,659		N/A	N/A	RESEARCH
UNIVERSITY OF CALIFORNIA SAN FRANCISCO 1111 FRANKLIN ST 11TH FL OAKLAND, CA 94607	94-6036493	501(C)(3)	572,613		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CHICAGO 5801 S ELLIS AVE CHICAGO, IL 60637	36-2177139	501(C)(3)	306,328		N/A	N/A	RESEARCH
UNIVERSITY OF CINCINNATI PO BOX 932368 CLEVELAND, OH 44193	31-6000989	501(C)(3)	1,429,808		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF COLORADO DENVER 13001 E 17TH PLACE AURORA, CO 80045	84-6000555	501(C)(3)	716,985		N/A	N/A	RESEARCH
UNIVERSITY OF CONNECTICUT HEALTH 263 FARMINGTON AVE FARMINGTON, CT 06030	52-1725543		683,053		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF DELAWARE 15 INNOVATION WAY DBI LAB 246 NEWARK, DE 19711	51-6000297	501(C)(3)	354,186		N/A	N/A	RESEARCH
UNIVERSITY OF DENVER 2148 S HIGH ST DENVER, CO 80208	84-0404231	501(C)(3)	16,999		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF FLORIDA 213 GRINTER HALL PO BOX 115500 GAINESVILLE, FL 32611	59-6002052	STATE OF FL	304,983		N/A	N/A	RESEARCH
UNIVERSITY OF HAWAII 2600 CAMPUS RD 112 HONOLULU, HI 96822	99-6000354	GOVERNMENT	250,571		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF HEALTH SCIENCES AND PHARMACY 1 PHARMACY PL ST LOUIS, MO 63110	43-0652675	501(C)(3)	32,539		N/A	N/A	RESEARCH
UNIVERSITY OF ILLINOIS 28392 NETWORK PL CHICAGO, IL 60673	37-6000511	501(C)(3)	543,199		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF IOWA 280 BOYD LAW BUILDING IOWA CITY, IA 52242	42-6004813	STATE OF IA	429,134		N/A	N/A	RESEARCH
UNIVERSITY OF KANSAS CENTER FOR RESEAR 3901 RAINBOW BLVD MS 1039 KANSAS CITY, KS 66160	48-0680117	501(C)(3)	83,192		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MARYLAND BALTIMORE 1000 HILLTOP CIRCLE BALTIMORE, MD 21250	52-6002033	501(C)(3)	977,132		N/A	N/A	RESEARCH
UNIVERSITY OF MASSACHUSETTS 100 VENTURE WAY STE 201 HADLEY, MA 010359462	04-3167352	501(C)(3)	620,050		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MIAMI PO BOX 025551 MIAMI, FL 331025551	59-0624458	501(C)(3)	35,522		N/A	N/A	RESEARCH
UNIVERSITY OF MINNESOTA PO BOX 1450 NW 5957 MINNEAPOLIS, MN 554855957	41-6007513	501(C)(3)	2,637,582		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MISSISSIPPI MEDICAL CENT 2500 NORTH STATE ST RM U-019 JACKSON, MS 39216	64-6008520	501(C)(3)	38,117		N/A	N/A	RESEARCH
UNIVERSITY OF MONTANA 32 CAMPUS DR MISSOULA, MT 598124104	81-0362989	501(C)(3)	74,298		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NEBRASKA PO BOX 30014 OMAHA, NE 681031114	47-4049123	STATE OF NE	39,096		N/A	N/A	RESEARCH
UNIVERSITY OF NEW HAMPSHIRE 51 COLLEGE RD RM 109 DURHAM, NH 038243585	02-6000937	501(C)(3)	84,811		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NORTH CAROLINA 123 W FRANKLIN ST CAROLINA SQUARE CHAPEL HILL, NC 275162524	56-6001393	501(C)(3)	1,546,389		N/A	N/A	RESEARCH
UNIVERSITY OF OKLAHOMA PO BOX 26901 URP 865 STE 490 OKLAHOMA CITY, OK 731260901	73-1489051	501(C)(3)	15,231		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PENNSYLVANIA PO BOX 785546 PHILADELPHIA, PA 19178	23-2743077	501(C)(3)	325,375		N/A	N/A	RESEARCH
UNIVERSITY OF PITTSBURGH 500 ROSS ST 154-0455 PITTSBURGH, PA 15262	25-0965591	501(C)(3)	3,500,692		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ROCHESTER BOX 278832 ROCHESTER, NY 14627	16-0743209	501(C)(3)	887,565		N/A	N/A	RESEARCH
UNIVERSITY OF SOUTH FLORIDA PO BOX 947568 ATLANTA, GA 303947568	59-3102112	STATE OF FL	328,363		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTHERN CALIFORNIA 1450 BIGGY ST NRT-1509L LOS ANGELES, CA 900899601	95-1642394	501(C)(3)	802,936		N/A	N/A	RESEARCH
UNIVERSITY OF TENNESSEE 615 MCCALLIE AVE DEPT 6005 CHATTANOOGA, TN 37403	62-6001636	501(C)(3)	46,186		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TEXAS AT ARLINGTON BOX 19136 ARLINGTON, TX 760190136	75-6000121	501(C)(3)	34,980		N/A	N/A	RESEARCH
UNIVERSITY OF TEXAS AT AUSTIN 727 EAST DEAN KEETON ST AUSTIN, TX 78705	31-1657375	501(C)(3)	238,645		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TEXAS DALLAS 800 W CAMPBELL RD RICHARDSON, TX 75080	05-0559514	501(C)(3)	52,878		N/A	N/A	RESEARCH
UNIVERSITY OF TEXAS HEALTH SCIENCE CEN 7703 FLOYD CURL DR MAIL CODE 7755 SAN ANTONIO, TX 78229	74-1761309	501(C)(3)	144,990		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TEXAS MD ANDERSON CANCER PO BOX 4390 ACCT 1644 HOUSTON, TX 772104390	74-6001118	501(C)(3)	37,997		N/A	N/A	RESEARCH
UNIVERSITY OF TEXAS MEDICAL BRANCH P O BOX 660120 DEPT 750 DALLAS, TX 752660120	74-6000949	STATE OF TX	210,822		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TEXAS PRESS PO BOX 7819 AUSTIN, TX 787137849	74-6000203	501(C)(3)	67,763		N/A	N/A	RESEARCH
UNIVERSITY OF TEXAS SOUTHWESTERN P O BOX 842265 DALLAS, TX 752845477	75-6002868	STATE OF TX	263,138		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF UTAH PO BOX 581289 SALT LAKE CITY, UT 84158	87-6000525	501(C)(3)	1,541,548		N/A	N/A	RESEARCH
UNIVERSITY OF VIRGINIA PO BOX 801392 CHARLOTTESVILLE, VA 22908	54-6001796	501(C)(3)	286,192		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON BOX 357710 SEATTLE, WA 98195	91-6001537	501(C)(3)	1,468,416		N/A	N/A	RESEARCH
UNIVERSITY OF WISCONSIN UW-MADISON GAR ACCOUNT - DRAWER 53 MILWAUKEE, WI 53278	39-6006492	STATE OF WI	429,106		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WISCONSIN MADISON 2195 MEDICAL SCIENCES CENTER MADISON, WI 53706	39-1805963	501(C)(3)	81,522		N/A	N/A	RESEARCH
URBAN LEAGUE 1408 N KINGSHIGHWAY BLVD ST LOUIS, MO 63113	43-0653605	501(C)(3)		266,752	FMV	VEHICLES	NON-CASH SPNSRSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US DEPARTMENT OF AGRICULTURE PO BOX 979099 SAINT LOUIS, MO 631799000	72-0564834	GOVERNMENT	46,204		N/A	N/A	RESEARCH
US GOVERNMENT CENSUS BUREAU 4600 SILVER HILL RD WASHINGTON, DC 20233	53-0204537	GOVERNMENT	5,300		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USGBC ST LOUIS REGIONAL CHAPTER 4651 SHAW BLVD ST LOUIS, MO 63110	30-0001663	501(C)(3)	30,500		N/A	N/A	SPNSRSHP
VANDERBILT UNIVERSITY PO BOX 12136 DALLAS, TX 753121236	62-0476822	501(C)(3)	182,583		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANDERBILT UNIVERSITY MEDICAL CENTER DEPT 1236 PO BOX 121236 DALLAS, TX 753121236	35-2528741	501(C)(3)	1,631,663		N/A	N/A	RESEARCH
VIRGINIA COMMONWEALTH UNIVERSITY PO BOX 980617 RICHMOND, VA 23298	54-6001758	STATE OF VA	27,961		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIVENT HEALTH INC 648 NORTH PLANKINTON AVE STE 200 MILWAUKEE, WI 53203	39-1534049	501(C)(3)	72,079		N/A	N/A	RESEARCH
WAKE FOREST UNIVERSITY HEALTH SCIENCES DIR GRANTS MGMT GTS 36886 WINSTON SALEM, NC 271571060	22-3849199	501(C)(3)	28,312		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEPOWER 20 S SARAH ST ST LOUIS, MO 63108	82-3591958	501(C)(3)	56,200		N/A	N/A	RESEARCH
WESLEYAN UNIVERSITY 291 MAIN ST MIDDLETOWN, CT 06457	06-0646959	501(C)(3)	89,482		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST VIRGINIA RESEARCH CORPORATION PO BOX 6002 MORGANTOWN, WV 26506	55-0665758	501(C)(3)	62,632		N/A	N/A	RESEARCH
WISTAR INSTITUTE 3601 SPRUCE ST PHILADELPHIA, PA 191044265	23-6434390	501(C)(3)	19,560		N/A	N/A	RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY PO BOX 418618 BOSTON, MA 02241	06-0646973	501(C)(3)	792,719		N/A	N/A	RESEARCH
YOUNG MENS CHRISTIAN ASSOCIATION OF ST LOUIS 400 GRAND AVE FOUR RIVERS FAMILY Y WASHINGTON, MO 63090	43-0653616	501(C)(3)	18,000		N/A	N/A	SPNSRSHP

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No. 1545-0047
		2021
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization WASHINGTON UNIVERSITY	Employer identification number 43-0653611
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Part I	Questions Regarding Compensation	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	<div><input checked="" type="checkbox"/> First-class or charter travel</div> <div><input checked="" type="checkbox"/> Travel for companions</div> <div><input type="checkbox"/> Tax idemnification and gross-up payments</div> <div><input type="checkbox"/> Discretionary spending account</div> <div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div> <div><input type="checkbox"/> Payments for business use of personal residence</div> <div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div> <div><input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</div>		
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	No
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
	<div><input checked="" type="checkbox"/> Compensation committee</div> <div><input checked="" type="checkbox"/> Independent compensation consultant</div> <div><input checked="" type="checkbox"/> Form 990 of other organizations</div> <div><input checked="" type="checkbox"/> Written employment contract</div> <div><input checked="" type="checkbox"/> Compensation survey or study</div> <div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div>		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	Yes
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	Yes
b	Any related organization?	6b	No
	If "Yes," on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	Yes
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	Yes
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	No

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

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

[illegible]

Part III Supplemental Information

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A & 1B	<p>A) Airfare upgrades or charter travel: For all employees, the university's travel policy provides reimbursement of the lowest available economy/coach fare available that meets the business purpose of the trip but does allow upgrade on flights in excess of five hours, for medical reasons, or with upper management approval. Under a written travel policy, chartered airfare is allowable for members of executive leadership. Three officers, one trustee, and two of the five highest compensated employees were provided with airfare upgrades to first class. Three officers, two trustees, and one of the five highest compensated employees used chartered airfare in accordance with the university's travel policy. These benefits were not treated as taxable income. (B) Travel for companions: For all employees, the university's travel policy provides reimbursement for incremental travel expenses of a spouse or other companion when there is a legitimate business purpose for their attendance and written authorization is obtained. One officer was provided with travel for companions in accordance with the university's travel policy. This benefit was not treated as taxable income. (C) Housing allowance or residence for personal use is subject to review and approval of the Board of Trustees or applicable committee thereof. As a condition of his employment and as necessary for performance of his duties and the convenience of the university as his employer, the Chancellor is required to reside on campus in a university-owned residence. This benefit is not treated as taxable income. Two officers were provided housing allowances which were treated as taxable income. (D) Health or Social club dues or initiation fees: Four officers and one former officer are reimbursed for social club dues. Social club dues are paid for a limited number of members of executive management for the purpose of providing a venue conducive to the success of alumni and university business-related activities. The decision to make these payments was approved by the Chancellor for senior executives and by the Chairman of the Board of Trustees for the Chancellor. This benefit was not treated as taxable income. (E) Personal services were made available in the form of housekeeping for the Chancellor's residence, a university owned property concurrent with employment. As a condition of his employment and as necessary for performance of his duties and the convenience of the university as his employer, the Chancellor is required to reside on campus and housekeeping was included as part of the agreement.</p>

Part III **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4A	A severance payment of \$172,000 was made during the reporting period to Ida Early under a two year agreement. A severance payment of \$262,250 was made during the reporting period to David Blasingame under a two year agreement.

Part III **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4B	(A) Andrew Martin - university contribution to 457(f) plan of \$201,250. (B) David Perlmutter - university contribution to 457(f) plan of \$255,000. Several other listed persons participated in a 457(f) plan maintained by the university, none of whom received contributions from the university.

Part III **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 6 & 7	The university's School of Medicine is organized into major Departments. Each department has a faculty compensation plan that provides guidelines to the Chair of the Department for setting annual compensation of the individual faculty members. One of the five highest compensated employees listed in Part VII, Section A of the Form 990 are faculty in a department that had salaries determined under departmental guidelines that provide for base salaries that are fixed payments. In this department, however, there are elements of compensation under the guidelines that are not fixed payments or determined by fixed formula. The Chair of the Department determines, in full or in part, the amount of this element based on the employee's performance. Further, there is an element expressed as a percent of net surplus generated by the efforts of the employee. The university's Chief Investment Officer, Deputy Chief Investment Officer, Managing Directors of Investments, and Chief Operating Officer of Investment Management also receive a payment based on the net earnings of an activity of the university using a fixed formula. See discussion of Part I, line 7 below for further information.

Part III **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 7	The Chief Investment Officer, Deputy Chief Investment Officer, Managing Directors of Investments, and Chief Operating Officer of Investment Management compensation arrangements provide for both fixed base compensation and incentive compensation based on the performance of the university's investment portfolio relative to pre-established peer and market benchmarks. An annual incentive is comprised of three components: two of which are based upon a fixed formula and one which is based on qualitative factors. The latter is determined at the discretion of a governing board under authority assigned by the university Board of Trustees to oversee management of the university's endowment. Additionally, a long term incentive based on fixed formula for performance includes a five year vesting schedule for the payout of earned incentive.

Part III **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 8	The University applies the initial contract exception to officers whose employment with the University began during the fiscal year. During fiscal year 2022, this included four (4) individuals.

Additional Data

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1EVA AAGAARD VC MEDICAL ED. (AS OF 7/21)	(i)	378,709	50,000	6,891	20,300	29,987	485,887	0
	(ii)	0	0	0	0	0	0	0
1MONICA ALLEN VC & GENERAL COUNSEL	(i)	483,777	0	26,503	33,350	14,002	557,632	0
	(ii)	0	0	0	0	0	0	0
2MARK AMIRI ASO VC FIN & TREA (UNTIL 2/22)	(i)	282,955	0	3,616	20,045	22,044	328,660	0
	(ii)	0	0	0	0	0	0	0
3SHANTAY BOLTON EXEC VC ADMIN (AS OF 7/21)	(i)	244,909	100,000	34,020	0	22,005	400,934	0
	(ii)	0	0	0	0	0	0	0
4REBECCA BROWN VC SEC TO BD & CHIEF OF STAFF	(i)	380,497	35,000	20,493	20,300	24,669	480,959	0
	(ii)	0	0	0	0	0	0	0
5DEDRIC CARTER VC INNOVATION & CCO	(i)	355,403	0	471	20,300	21,136	397,310	0
	(ii)	0	0	0	0	0	0	0
6LEGAIL CHANDLER VC HUMAN RESOURCES	(i)	376,199	0	24,820	153,669	16,183	570,871	0
	(ii)	0	0	0	0	0	0	0
7KURT DIRKS VC INTERNATIONAL AFFAIRS	(i)	550,346	0	1,119	33,350	25,469	610,284	0
	(ii)	0	0	0	0	0	0	0
8JULIE FLORY VC MARKETING & COMMUNICATIONS	(i)	293,279	0	687	20,300	25,363	339,629	0
	(ii)	0	0	0	0	0	0	0
9ANNA GONZALEZ VC STUDENT AFF. (AS OF 6/21)	(i)	224,830	125,000	29,582	0	11,180	390,592	0
	(ii)	0	0	0	0	0	0	0
10LYNDA HEANEY VC MEDICAL ADVANCEMENT	(i)	403,535	0	22,316	0	35,497	461,348	0
	(ii)	0	0	0	0	0	0	0
11PAMELLA HENSON EXEC VC UNIVERSITY ADVANCEMENT	(i)	453,363	0	22,330	153,350	23,484	652,527	0
	(ii)	0	0	0	0	0	0	0
12AMY KWESKIN EXEC VC FINANCE & CFO	(i)	422,405	38,200	21,569	33,350	27,509	543,033	0
	(ii)	0	0	0	0	0	0	0
13JENNIFER LODGE VC RESEARCH (UNTIL 1/22)	(i)	428,077	0	91,447	29,000	20,944	569,468	40,000
	(ii)	0	0	0	0	0	0	0
14PAMELA LOKKEN VC GOV'T & COMMUNITY RELATIONS	(i)	304,577	0	21,736	33,350	13,928	373,591	0
	(ii)	0	0	0	0	0	0	0
15MARK LOWE INTER VC RESEARCH (AS OF 1/22)	(i)	400,375	20,000	28,838	20,300	27,509	497,022	0
	(ii)	0	0	0	0	0	0	0
16ANDREW MARTIN CHANCELLOR	(i)	1,040,598	100,000	24,401	221,550	159,136	1,545,685	0
	(ii)	0	0	0	0	0	0	0
17DAVID PERLMUTTER EXEC VC MEDICAL AFFAIRS	(i)	1,658,584	162,500	41,598	275,300	16,183	2,154,165	0
	(ii)	0	0	0	0	0	0	0
18STEPHANIE REEL INTERIM VC & CIO (UNTIL 4/22)	(i)	530,421	0	11,884	0	9,308	551,613	0
	(ii)	0	0	0	0	0	0	0
19PAUL SCHEEL JR VC CLINICAL AFF. (AS OF 7/21)	(i)	896,402	100,000	25,129	20,300	18,270	1,060,101	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21RICHARD STANTON VC MEDI FIN & ADM (AS OF 7/21)	(i)	486,231	197,400	25,495	29,000	20,944	759,070	0
	(ii)	0	0	0	0	0	0	0
1WILLIAM STOLL SR VC UNIVERSITY ADVANCEMENT	(i)	418,436	0	22,666	33,350	25,469	499,921	0
	(ii)	0	0	0	0	0	0	0
2HENRY WEBBER EXEC VC ADMIN. (UNTIL 10/21)	(i)	607,025	0	232,904	237,054	20,944	1,097,927	150,000
	(ii)	0	0	0	0	0	0	0
3BEVERLY WENDLAND PROVOST & EXEC VC ACAD AFFAIRS	(i)	762,665	0	43,173	0	27,509	833,347	0
	(ii)	0	0	0	0	0	0	0
4SCOTT WILSON CHIEF INVESTMENT OFFICER	(i)	884,975	5,495,804	21,166	80,300	35,253	6,517,498	0
	(ii)	0	0	0	0	0	0	0
5DAVID BLASINGAME FORMER EXEC VC ALUMNI & DEV	(i)	0	0	305,607	0	0	305,607	0
	(ii)	0	0	0	0	0	0	0
6MARION CRAIN FORMER PROVOST & EXEC VC ACAD.	(i)	484,137	0	22,426	29,000	16,183	551,746	0
	(ii)	0	0	0	0	0	0	0
7IDA EARLY SEC TO BD OF TRUSTEES	(i)	0	0	172,000	0	0	172,000	129,000
	(ii)	0	0	0	0	0	0	0
8JAMES WERTSCH FORMER VC INTL AFFAIRS	(i)	331,720	0	24,198	33,350	27,465	416,733	0
	(ii)	0	0	0	0	0	0	0
9ROBERT WILD INTERIM VC STUDENTS	(i)	265,278	0	523	31,583	29,852	327,236	0
	(ii)	0	0	0	0	0	0	0
10MARK WRIGHTON FORMER CHANCELLOR	(i)	846,015	0	31,984	33,350	35,497	946,846	0
	(ii)	0	0	0	0	0	0	0
11SEAN ARP COO - INVESTMENT MGMT	(i)	519,951	1,280,280	17,330	20,300	29,987	1,867,848	0
	(ii)	0	0	0	0	0	0	0
12ANDREW CHOQUETTE DEP CHIEF INVESTMENT OFFICER	(i)	643,617	2,883,941	20,250	20,300	46,636	3,614,744	0
	(ii)	0	0	0	0	0	0	0
13JOHN CLOHISY DIST PROF OF ORTHO SURGERY	(i)	722,813	938,581	22,854	33,350	24,669	1,742,267	0
	(ii)	0	0	0	0	0	0	0
14ADAM KURKIEWICZ MANAGING DIR. OF INVESTMENTS	(i)	396,989	1,247,709	19,905	20,300	25,469	1,710,372	0
	(ii)	0	0	0	0	0	0	0
15MICHAEL STOHLER MANAGING DIR. OF INVESTMENTS	(i)	354,382	1,583,444	563	20,300	26,435	1,985,124	0
	(ii)	0	0	0	0	0	0	0
16ERIC UPIN TRUSTEE	(i)	390,000	0	0	0	0	390,000	0
	(ii)	0	0	0	0	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
WASHINGTON UNIVERSITY

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Employer identification number

43-0653611

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A HEALTH & EDUCATIONAL AUTHORITY FACILITIES	43-1178966	606901N93	02-05-2003	25,135,000	HEALTH & EDUCATIONAL AUTHORITY FAC		X		X		X
B HEALTH & EDUCATIONAL FACILITIES AUTHORITY	43-1178966	60636AAS2	06-29-2011	127,122,717	HEALTH & EDUCATIONAL FACILITIES AU	X			X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	0		0					
2	Amount of bonds legally defeased	0		119,335,000					
3	Total proceeds of issue	25,142,853		127,123,185					
4	Gross proceeds in reserve funds	0		0					
5	Capitalized interest from proceeds	726,998		402,784					
6	Proceeds in refunding escrows	0		102,941,118					
7	Issuance costs from proceeds	108,340		177,442					
8	Credit enhancement from proceeds	23,500		0					
9	Working capital expenditures from proceeds	0		0					
10	Capital expenditures from proceeds	24,281,880		23,601,836					
11	Other spent proceeds	2,135		5					
12	Other unspent proceeds	0		0					
13	Year of substantial completion	2003		2012					
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2020, a current refunding issue)?		X	X					
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2020, an advance refunding issue)?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III

Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X					
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X			X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X		X				
c	Are there any research agreements that may result in private business use of bond-financed property?		X	X					
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X		X				
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	1.600 %		0.730 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %					
6	Total of lines 4 and 5	1.600 %		0.730 %					
7	Does the bond issue meet the private security or payment test? . . .		X		X				
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?.		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . .								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?.		X		X				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?.	X		X					

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X				
b	Exception to rebate?	X			X				
c	No rebate due?		X	X					
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X			X				

Part IV

Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?			X				
b	Name of provider		0		0			
c	Term of hedge							
d	Was the hedge superintegrated?							
e	Was the hedge terminated?							
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?			X				
b	Name of provider		0		0			
c	Term of GIC							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?							
6	Were any gross proceeds invested beyond an available temporary period?			X				
7	Has the organization established written procedures to monitor the requirements of section 148? . . .		X		X			

Part V

Procedures To Undertake Corrective Action

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

Part VI

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Return Reference	Explanation
SCHEDULE K, PART I, BOND A	Provide funds for new construction, expansion and renovation of garages and buildings (including fixed equipment).

Return Reference	Explanation
SCHEDULE K, PART I, BOND B	Series 2011A - Provide funds for the new construction of buildings (including fixed equipment). Series 2011B - provide funds to defease a portion of Series 1998A issued February 15, 1998, and a portion of Series 2001B issued August 15, 2001.

Return Reference	Explanation
SCHEDULE K, PART II, LINE 3	Total proceeds of issue includes investment earnings - Bond A - 7,853. Bond B - 468.

Return Reference	Explanation
SCHEDULE K, PART IV, LINE 2C	Date rebate calculation was performed - Bond B - 11/15/2012.

Schedule L
(Form 990)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

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

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

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) DEDRIC CARTER	OFFICER	RETENTION		X	75,000	60,484		No		No	Yes	
Total ▶ \$						60,484						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

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

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

Part V Supplemental Information

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

Return Reference	Explanation
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Additional Data

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

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Elizabeth Abente	Sister of former officer Rob Wild	91,188	Employment		No
(1) Alexandra Carr	Sister of officer Monica Allen	146,480	Employment		No

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(3) Ebony Carter	Spouse of officer Dedric Carter	443,656	Employment		No
(1) Barbara Cohan	Spouse of officer David Perlmutter	400,010	Employment		No

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(5) Gerald Early	Spouse of former officer Ida Early	381,488	Employment		No
(1) Rosalind Early	Daughter of former officer Ida Early	87,856	Employment		No

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(7) Janet Scheel	Spouse of officer Paul Scheel Jr	378,455	Employment		No
(1) Andrew Sobel	Spouse of officer Pamela Lokken	235,828	Employment		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons					
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(9) Kingdom Capital	Trustee David Steward owns more than 35% of the company	341,451	Refund of research agreement		No
(1) World Wide Technology Inc	Trustee David Steward owns more than 35% of the company	7,350,617	Computer licensing,consulting		No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons					
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(11) Schnuck Markets Inc	Trustee Craig Schnuck and family own more than 35% of the company	152,642	Purchase food, supplies, gifts		No

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
►Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	4	5,003	Opinion of expert
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		5	Fair market value
5 Clothing and household goods	X		9,998	Fair market value
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	273	47,635,366	Quoted market price
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests	X	2	1,637,956	Fair market value
12 Securities—Miscellaneous	X	2	247,877	Fair market value
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	10	2,059	Donor estimate
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
Historical	X	7	7	Fair market value
25 Other ► (Documents)				
26 Other ► (Equipment)	X	3	502	Opinion of expert
27 Other ► ()				
28 Other ► ()				

29

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

29

13

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II.

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

No

b

If "Yes," describe in Part II.

33

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Return Reference	Explanation
SCHEDULE M, PART I - ALL Column (b)	Amounts reported in column (b) of Part I are the number of contributions received.
SCHEDULE M, PART I, LINE 1	Revenue was not reported on line 1 for art works that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received.
SCHEDULE M, PART I, LINE 4	Revenue was not reported on line 4 for books and publications that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received.

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number

43-0653611

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 1	community services. Its schools and colleges encompass most areas of scholarship and professional training, with interschool centers and institutes, libraries, computing facilities, athletic programs and undergraduate and graduate housing. The University offers undergraduate and graduate degrees and sponsors interdisciplinary institutes and centers engaged principally in research and advanced training. Many educational programs include one or more practicum or experiential learning components. The School of Medicine (WUSM) is among the leading medical research institutions in the nation. WUSM carries out its educational, research, and clinical programs through 23 departments, approximately 60 divisions, and 4 programs in allied health professions, and provides patient care as part of its educational and research programs. WUSM provides emergency and non-emergency medical care to all patients in its community, including those who are underinsured and non-insured as well as those who have adequate insurance coverage or the ability to pay for such care.

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1	<p>Washington University's mission is to act in service of truth through the formation of leaders, the discovery of knowledge and the treatment of patients for the betterment of our region, our nation, and our world. At Washington University, we generate, disseminate, and apply knowledge. We foster freedom of inquiry and expression of ideas in our research, teaching, and learning. We aim to create an environment that encourages and supports wide-ranging exploration at the frontier of discovery by embracing diverse perspectives from individuals of all identities and backgrounds. We promote higher education and rigorous research as a fundamental component of an open, vibrant society. We strive to enhance the lives and livelihoods not only of our students, patients, and employees, but also of the people of the greater St. Louis community and beyond. We do so by addressing scientific, social, economic, medical, and other challenges in the local, national, and international realms. Our goals are: to foster excellence and creativity in our teaching, research, scholarship, patient care and service; to welcome students, faculty, and staff from all backgrounds to create an inclusive, equitable community that is nurturing and intellectually rigorous; to cultivate in students habits of lifelong learning and critical and ethical thinking, thereby enabling them to be productive members and leaders of a global society; and to contribute positively to our home community of St. Louis, and to effect meaningful, constructive change in our world. To this end we intend: to hold ourselves to the highest standards of excellence; to educate aspiring leaders of great ability from diverse backgrounds; to encourage faculty and students to be innovative, bold, independent, critical thinkers; to build an inclusive, equitable, respectful, ethically-principled environment for living, teaching, learning and working for the present and future generations; and to focus on meaningful measurable results for all of our endeavors.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4D	ACADEMIC SUPPORT: Represents primarily administrative activities that directly support program services but do not qualify as management and general costs. Significant components include the central and school libraries, animal care, environmental compliance, the Deans' offices, school information systems, school-specific human resource activities, and human research participant protection.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A	<p>The Executive Committee is composed of The Chair, Vice Chairs, Chancellor and not less than six voting members of The Board of Trustees appointed by The Board at its annual meeting . The Executive Committee is subordinate and responsible to The Board of Trustees. In the interval between meetings of The Board of Trustees, the Executive Committee has and may exercise all powers of The Board of Trustees except (i) to approve or authorize amendments to the Charter or Bylaws or other major changes in the organization of the University, (ii) except as authorized or delegated by resolution of The Board of Trustees, (a) to create any debt encumbering any property of the University, (b) to grant diplomas, or (c) to approve budgets, (iii) to grant tenure, and (iv) to act on matters as regards which other specific directions have been given by The Board of Trustees.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	Trustees David Kemper and Priscilla Hill-Ardoin have a business relationship. Trustees Priscilla Hill-Ardoin and David Steward have a business relationship.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	<p>Washington University amended its bylaws to eliminate lifetimes trustees - a class of trustees that held a lifelong term. Further, the bylaws were amended to establish that an ad hoc committee of Distinguished Trustees will provide successor recommendations when there is a vacancy in the position of Board Chair. Lastly, the Chair has the authority to establish limited duration ad hoc committees to address specific topics or issues as they arise. Such committees will be subordinate to the Board of Trustees.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	<p>The Form 990 is initially prepared by the University's Tax Department and then reviewed by the University's tax preparers. Their review is thorough and provides sufficient assurance for them to sign as paid preparers. The return is then reviewed by the University's Controller (who signs the return) and its CFO. It is then reviewed with the University's Board of Trustees Audit, Risk, and Compliance Committee. Following their review, the final return is made available to the full Board. All reviews take place prior to filing the return.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>The University regularly monitors and enforces compliance with its conflict of interest policies. The External Professional Activities Policy describes institutional standards around external professional activities, prescribes disclosure and review requirements. Each of the Policy on Institutional Conflict of Interest, Research Conflicts of Interest Policy and the Policy on Conflicts of Interest in Clinical Care established a dedicated committee, comprised of faculty and staff, to assess the financial relationships of faculty and determine whether a conflict of interest (COI) exists and a management plan warranted. Faculty involved in research are required to disclose annually their financial interests or within 30 days of a new financial relationship. The financial disclosures are circulated to the three COI committees for COI evaluation. The Research COI and the Institutional COI committees regularly monitor faculty compliance with their management plans. If the committees determine that a faculty member is not in compliance with a management plan, the matter is investigated by the committees and appropriate action taken. The University Compliance Office annually audits clinical faculty members compliance with management plans imposed by the Clinical COI committee. Any noncompliance is addressed and remediated by the Vice Chancellor for Research and the faculty member's department. Disclosures by staff employees are made to their immediate supervisors. Disclosures by officers and Deans are made to the Chancellor for resolution, and the Chancellor reports on those and his own disclosures to the Chair of the Board. The Board of Trustees has approved a separate conflict of interest policy applicable to its members. Under that policy, members of the Board are required to make annual disclosure of existing or prospective matters that reasonably create an actual or potential conflict of interest involving the University (including 50% or more affiliated entities) and the member (including certain affiliated business entities and family members). With certain limited exceptions, that policy further requires a member to be excused from participation in or vote on a matter with respect to which she/he has a conflict of interest.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>THE RECOMMENDED COMPENSATION OF THE CHANCELLOR, OFFICERS, AND KEY EMPLOYEES (COLLECTIVELY, THE EXECUTIVE GROUP) IS REVIEWED AND APPROVED ANNUALLY BY THE COMPENSATION COMMITTEE, A COMMITTEE OF INDEPENDENT VOTING MEMBERS OF THE BOARD OF TRUSTEES. THE COMMITTEE'S DISCUSSION AND REVIEW INCLUDES EXAMINATION OF THE F.W. COOK AND COMPANY'S EXECUTIVE COMPENSATION CONSULTANT'S MARKET ANALYSIS COMPRISED OF MULTIPLE THIRD-PARTY SOURCES OF COMPARATOR MARKET DATA SPECIFIC TO THOSE INSTITUTIONS WITH WHICH THE UNIVERSITY COMPARES ITSELF. THIS INCLUDES AVAILABLE MARKET DATA PROVIDED BY INDUSTRY SPECIFIC PROFESSIONAL ORGANIZATIONS INCLUDING MOST RECENTLY AVAILABLE FORM 990S. THE CHAIRMAN OF THE BOARD OF TRUSTEES MAKES A RECOMMENDATION TO THE COMMITTEE FOR THE CHANCELLOR'S COMPENSATION. THE CHANCELLOR RECOMMENDS TO THE COMMITTEE THE COMPENSATION OF OFFICERS. THE CHIEF INVESTMENT OFFICER'S COMPENSATION AND INCENTIVES PACKAGE IS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE, ACTING ON BEHALF OF THE GOVERNING BOARD. ALL COMMITTEE DELIBERATIONS AND DECISIONS ARE CONTEMPORANEOUSLY SUBSTANTIATED IN THE COMMITTEE'S MEETING MINUTES.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	The University makes its charter, conflict of interest policy, and annual reports available to the public through the University website (see 990 Page 1 Box J).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, LINE 1A, COLUMN D	Reportable compensation for officers Lodge and Webber and former officer Blasingame include a distribution or vesting of amounts under nonqualified deferred compensation plans reviewed and approved by the Compensation Committee of the Board of Trustees, individually or as part of their overall compensation. The amounts distributed or vested for officers Lodge and Webber, and for former officer Blasingame, among other amounts, are reported on Schedule J, Part II, column B(iii).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, LINE 26	<p>Trustee Eric Upin served as Executive Board Chair of the Washington University Investment Management Company, a division of the University, from July 1, 2021 - June 30, 2022. During this period, Trustee Upin devoted an average of 12 hours per week in his capacity as Executive Board Chair. Additionally, Trustee Upin was compensated for consulting services provided in this capacity and received reimbursement for reasonable travel and lodging expenses. During the period of July 1, 2021 - June 30, 2022, Trustee Upin devoted an average of 1 hour per week to the university in his capacity as a Member of the Board of Trustees.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A, ROW 37	Trustee Nickerson is compensated as an adjunct professor for teaching activities.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	\$3,502,183 of changes and reclassifications in split-interest agreements and a \$466,759 change in uncollectible pledges.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
WASHINGTON UNIVERSITY

Employer identification number
43-0653611

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
See Additional Data Table					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)BARNARD FREE SKIN & CANCER HOSPITAL 4590 CHILDRENS PLACE CB 8092 ST LOUIS, MO 63110 43-6033760	PATIENT CARE	MO	501(C)(3)	12A	WASH U	Yes	
(2)BIOSTL 4340 DUNCAN AVE ST LOUIS, MO 63110 45-2137574	SCIEN RESEARC	MO	501(C)(3)	7	WASH U	Yes	
(3)QUADRANGLE HOUSING COMPANY 700 ROSEDALE AVE CB 1034 ST LOUIS, MO 63112 43-1767210	MEMBER SUPPRT	MO	501(C)(3)	12A	WASH U	Yes	
(4)QUADRANGLE MANAGEMENT COMPANY 700 ROSEDALE AVE CB 1034 ST LOUIS, MO 63112 43-1558136	HOLDING COMPA	MO	501(C)(25)		WASH U	Yes	
(5)WASH U MEDICAL CENTER 1408 TOWER GROVE AVE ST LOUIS, MO 63110 23-7060605	MEMBER SUPPRT	MO	501(C)(3)	12A	N/A		No
(6)WASH U PHYSICIANS IN ILLINOIS INC 1515 CROSS ST O FALLON, IL 62269 82-2026363	PATIENT CARE	IL	501(C)(3)	12A	WASH U	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
See Additional Data Table									

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b Yes

1c Yes

1d Yes

1e

No

1f Yes

1g

No

1h

No

1i

No

1j Yes

1k Yes

1l Yes

1m Yes

1n Yes

1o Yes

1p

No

1q Yes

1r Yes

1s Yes

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

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

Schedule R (Form 990) 2021

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.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 43-0653611

Name: WASHINGTON UNIVERSITY

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
ARCH PEDIATRICS LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 82-5262785	PATIENT CARE	MO	4,857,137	493,324	WUCA LLC
MIRACL LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 61-1904605	PATIENT CARE	MO	4,110,816	0	WASH U
PREMIER PEDIATRICS LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 82-5415317	PATIENT CARE	MO	5,515,683	162,050	WUCA LLC
PURELY PEDIATRICS LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 30-0957830	PATIENT CARE	MO	2,660,212	588,683	WUCA LLC
QUADRANGLE PHARMACY LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 43-0653611	STUDENT PHARM	MO	622,165	96,271	WASH U
SCHF I-3 INVESTOR WU GP LLC 700 ROSEDALE AVE CB 1034 ST LOUIS, MO 63112 43-0653611	FINANCIAL INV	DE	0	0	WASH U
UNIVERSITY PEDIATRIC ASSOCIATES LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 30-0871000	PATIENT CARE	MO	2,528,496	228,273	WUCA LLC
WASH U CLINICAL ASSOCIATES - BLUE FISH 660 SOUTH EUCLID ST LOUIS, MO 63108 61-1740030	PATIENT CARE	MO	6,485,476	899,506	WUCA LLC
WASH U CLINICAL ASSOCIATES - CLOVERLEAF 660 SOUTH EUCLID ST LOUIS, MO 63108 37-1770035	PATIENT CARE	MO	3,477,071	341,288	WUCA LLC
WASH U CLINICAL ASSOCIATES - FENTON PEDI 660 SOUTH EUCLID ST LOUIS, MO 63108 35-2641104	PATIENT CARE	MO	2,542,639	101,041	WUCA LLC
WASH U CLINICAL ASSOCIATES - FOREST PARK 660 SOUTH EUCLID ST LOUIS, MO 63108 61-1696383	PATIENT CARE	MO	4,344,541	263,865	WUCA LLC
WASH U CLINICAL ASSOCIATES - KIDS DOCS 660 SOUTH EUCLID ST LOUIS, MO 63108 35-2548685	PATIENT CARE	MO	2,118,580	329,633	WUCA LLC
WASH U CLINICAL ASSOCIATES - MD MEDICAL 660 SOUTH EUCLID ST LOUIS, MO 63108 27-2046978	PATIENT CARE	MO	3,439,436	498,838	WUCA LLC
WASH U CLINICAL ASSOCIATES - NASH PEDIAT 660 SOUTH EUCLID ST LOUIS, MO 63108 37-1802234	PATIENT CARE	MO	883,810	13,520	WUCA LLC
WASH U CLINICAL ASSOCIATES - NW PEDIATRI 660 SOUTH EUCLID ST LOUIS, MO 63108 35-2458831	PATIENT CARE	MO	7,235,123	1,203,605	WUCA LLC
WASH U CLINICAL ASSOCIATES - O'FALLON PE 660 SOUTH EUCLID ST LOUIS, MO 63108 32-0453423	PATIENT CARE	MO	5,925,455	1,114,737	WUCA LLC
WASH U CLINICAL ASSOCIATES - UNIV PERSON 660 SOUTH EUCLID ST LOUIS, MO 63108 26-3917142	PATIENT CARE	MO	1,480,379	917,189	WUCA LLC
WASH U CLINICAL ASSOCIATES - WESTSIDE PE 660 SOUTH EUCLID ST LOUIS, MO 63108 35-2581863	PATIENT CARE	MO	3,020,226	725,227	WUCA LLC
WASH U CLINICAL ASSOCIATES - WOODS MILL 660 SOUTH EUCLID ST LOUIS, MO 63108 37-1829105	PATIENT CARE	MO	1,418,399	109,938	WUCA LLC
WASH U CLINICAL ASSOCIATES LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 20-0708217	PATIENT CARE	MO	20,578,593	21,422,145	WASH U

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
WASH U REGIONAL PHYSICIANS LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 82-3109456	PATIENT CARE	MO	0	0	WASH U
WASH U UGANDA LTD ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 61-1711507	MANAGE INTERN	UG	699,924	142,170	WUSTL INTL
WILLIAM GREENLEAF ELIOT SEED FUND INVEST ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 81-3046439	FINANCIAL INV	MO	0	100	WASH U
WILLIAM GREENLEAF ELIOT SEED FUND MANAGE ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 81-3003790	FINANCIAL INV	MO	0	100	WASH U
WUCA - SOUTHWEST PEDIATRICS LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 32-0554062	PATIENT CARE	MO	8,244,219	2,086,099	WUCA LLC
WASH U CLINICAL ASSOCIATES - WUCARE LLC 660 SOUTH EUCLID ST LOUIS, MO 63108 43-0653611	PATIENT CARE	MO	1,058,010	506,139	WUCA LLC
WUSTL ADVISORS (SHANGHAI) CO LTD ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 61-1711507	MANAGE INTERN	CH	1,170	518,465	WUSTL INTL
WUSTL INTERNATIONAL LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 61-1711507	MANAGE INTERN	MO	0	5,222	WASH U

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
8VC SPV IA LP 425 SHERMAN AVE SUITE 120 PALO ALTO, CA 94306 30-0885126	INVESTMENT	DE	WASH U	Excluded	5,636	9,593,101		No			No	66.000 %
BIG BRICK BUILDINGS ML LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 82-1906099	REAL ESTATE	MO	BOBB LLC	Excluded	-342,226	35,731,822		No			No	90.000 %
BIG BRICK BUILDINGS MT LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 82-3761088	REAL ESTATE	MO	BOBB LLC	Related	-2,418	80,196		No			No	1.000 %
CASTLEREAGH ML LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 81-2578815	REAL ESTATE	MO	BOBB LLC	Excluded	-206,081	13,952,853		No			No	90.000 %
CASTLEREAGH MT LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 82-0881545	REAL ESTATE	MO	BOBB LLC	Related	-2,618	103,591		No			No	1.000 %
CLAYTON EUCLID ML LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 81-2764555	REAL ESTATE	MO	BOBB LLC	Excluded	-578,181	31,112,187		No			No	90.000 %
CLAYTON EUCLID MT LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 82-1124230	REAL ESTATE	MO	BOBB LLC	Related	-1,178	114,428		No			No	1.000 %
COLISEUM CAPITAL PARTNERS II LP 105 ROWAYTON AVE ROWAYTON, CT 06853 46-1301579	INVESTMENT	DE	WASH U	Excluded	25,662,625	6,780,067		No			No	49.000 %
CRESCENT ML LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 82-1921163	REAL ESTATE	MO	BOBB LLC	Excluded	-807,249	43,145,428		No			No	90.000 %
CRESCENT MT LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 82-3700737	REAL ESTATE	MO	BOBB LLC	Excluded	43	92,163		No			No	1.000 %
DECATHLON ALPHA IV LP 1441 WEST UTE BLVD SUITE 240 PARK CITY, UT 84098 83-1157736	INVESTMENT	DE	WASH U	Excluded	16,199,713	86,823,589		No			No	60.000 %
EASTGATE ML LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 47-2994311	REAL ESTATE	MO	BOBB LLC	Excluded	-60,429	0		No			No	0 %
EASTGATE MT LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 47-5294794	REAL ESTATE	MO	BOBB LLC	Related	-1,261	0		No			No	0 %
ECLIPSE SPV I LP 514 HIGH STREET SUITE 4 PALO ALTO, CA 94301 82-5079677	INVESTMENT	DE	WASH U	Excluded	0	91,540,455		No			No	70.000 %
ELM PARK CREDIT OPPORTUNITIES FUND LP 2300 N FIELD ST SUITE2180 DALLAS, TX 75201 45-2685002	INVESTMENT	DE	WASH U	Excluded	-1,973,950	295,464		No			No	80.000 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
EQMC PARTNERS LP 48 WALL ST FL27 NEW YORK, NY 10005 47-4281379	INVESTMENT	DE	WASH U	Excluded	13,672,613	155,641,139		No			No	64.000 %
FOUNDATION ENERGY FUND V-B LP 5057 KELLER SPRINGS RD SUITE 650 ADDISON, TX 75001 46-5755749	INVESTMENT	DE	WASH U	Excluded	5,258,239	25,127,485		No			No	64.000 %
KINGSWAY FCF OVERFLOW SPC - SEGREGATED P CORPORATE CENTRE 27 HOSPITAL ROAD GEORGETOWN, GR CJ 98-1498619	INVESTMENT	CJ	WASH U	Excluded	252,294	20,145,096		No			No	76.000 %
KORA RUSSIA FUND LP 55 PROSPECT ST SUITE 310 BROOKLYN, NY 11201 98-1398361	INVESTMENT	DE	WASH U	Excluded	36,614,351	54,097,960		No			No	78.000 %
KURAMO AFRICA OPPORTUNITY CO- INVESTMENT 500 5TH AVE 44TH FLOOR NEW YORK, NY 10110 82-4762558	INVESTMENT	DE	WASH U	Excluded	958,425	43,535,231		No			No	77.000 %
KURAMO AFRICA OPPORTUNITY FUND III LP 500 5TH AVE 44TH FLOOR NEW YORK, NY 10110 82-4747981	INVESTMENT	DE	WASH U	Excluded	4,154	4,698,607		No			No	0 %
LEWIS CENTER ML LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 47-3015612	REAL ESTATE	MO	BOBB LLC	Excluded	2,676,766	38,059,561		No			No	90.000 %
LEWIS CENTER MT LLC ONE BROOKINGS DR CB 1058 ST LOUIS, MO 63130 47-4490012	REAL ESTATE	MO	BOBB LLC	Related	-4,769	41,139		No			No	1.000 %
PAGE FIELD COMMONS HOLDINGS LLC 150 BAKER AVE EXT SUITE 303 CONCORD, MA 01742 82-3087660	INVESTMENT	DE	WASH U	Excluded	616,169	34,410,312		No			No	76.000 %
SESSA CAPITAL SPECIAL OPPORTUNITY FUND I 888 7TH AVE 30TH FLOOR NEW YORK, NY 10019 82-4890968	INVESTMENT	DE	WASH U	Excluded	18,766,920	107,107,916		No			No	42.000 %
ST LOUIS INTERNET2 ACCESS CONSORTIUM LLC 700 ROSEDALE AVE CB 1034 ST LOUIS, MO 63112 47-0849522	INTERNET ACCE	MO	WASH U	Unrelated	2,791	88,794		No	2,791	Yes		57.000 %
ST LOUIS LAND COMPANY LLC 4320 FOREST PARK AVE SUITE 201 ST LOUIS, MO 63108 13-4229138	REAL ESTATE	MO	WASH U	Excluded	178,205	15,681,150		No		Yes		52.000 %
THELEME SPECIAL PURPOSE FUND I LP PO Box 309 UGLAND HOUSE Georgetown, Grand Cayman CJ 99-9999999	INVESTMENT	CJ	WASH U	Excluded	26,372,561	51,788,808		No			No	88.000 %
WE 113 NORTH MAPLE ST HOLDINGS LLC 150 BAKER AVE EXT SUITE 303 CONCORD, MA 01742 82-1205603	INVESTMENT	DE	WASH U	Excluded	1,564,794	0		No			No	90.000 %
WE 137 LATHROP ROAD HOLDINGS LLC 150 BAKER AVE EXT SUITE 303 CONCORD, MA 01742 82-3046857	INVESTMENT	DE	WASH U	Excluded	-284,343	0		No			No	90.000 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispropportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
4140 ML LLC One Brookings Dr CB 1058 St Louis, MO 63130 85-2817328	Real Estate	MO	BOBB LLC	Excluded	-143	1,100		No			No	100.000 %
4140 MT LLC One Brookings Dr CB 1058 St Louis, MO 63130 85-2827991	Real Estate	MO	BOBB LLC	Excluded	-156	1,090		No			No	100.000 %
ECLIPSE SPV III LP 514 HIGH STREET SUITE 4 PALO ALTO, CA 94301 84-4231922	INVESTMENT	DE	WASH U	Excluded	23	44,242,684		No			No	100.000 %
ECLIPSE SPV IV LP 514 HIGH STREET SUITE 4 PALO ALTO, CA 94301 84-5060495	INVESTMENT	DE	WASH U	Excluded	12	29,926,415		No			No	58.000 %
ECLIPSE SPV V LP 514 HIGH STREET SUITE 4 PALO ALTO, CA 94301 85-2714762	INVESTMENT	DE	WASH U	Excluded	2	9,479,729		No			No	59.000 %
GREENOAKS CAPITAL MS LP - SURH COMPLEX S 535 Pacific Avenue 4th Floor SAN FRANCISCO, CA 94133 85-3104037	INVESTMENT	DE	WASH U	Excluded	0	16,100,614		No			No	64.000 %
KINGSWAY FCF OVERFLOW SPC -SEGREGATED PO 27 HOSPITAL ROAD GEORGETOWN, GR CJ 98-1544386	INVESTMENT	CJ	WASH U	Excluded	34	24,893,551		No			No	62.000 %
KINGSWAY FCF OVERFLOW SPC -SEGREGATED PO 27 HOSPITAL RD GEORGETOWN, GR CJ 98-1544396	INVESTMENT	CJ	WASH U	Excluded	0	12,093,771		No			No	100.000 %
KYNIKOS SPV 5 LP 20 West 55th St 8th Floor NEW YORK, NY 10019 85-1796574	INVESTMENT	DE	WASH U	Excluded	-5,297,248	56,850,365		No			No	100.000 %
ECLIPSE SPV VIII LP 514 High Street Suite 4 Palo Alto, CA 94301 86-2833907	Investment	DE	WASH U	Excluded	70	74,096,916		No			No	62.000 %
ECLIPSE SPV X LP 514 High Street Suite 4 Palo Alto, CA 94301 87-2038213	Investment	DE	WASH U	Excluded	0	17,803,961		No			No	59.000 %
KINGSWAY FCI CO- INVESTMENT SPC - SEGREGA 27 Hospital Road Georgetown, Grand Cayman CJ 98-1596506	Investment	CJ	WASH U	Excluded	298	19,271,148		No			No	91.000 %
KINGSWAY FCI CO- INVESTMENT SPC -SEGREGAT 27 Hospital Road Georgetown, Grand Cayman CJ 98-1596481	Investment	CJ	WASH U	Excluded	-5,167	60,984,370		No			No	70.000 %
PERMANENT EQUITY II PARALLEL FUND LP 315 North 10th Street Columbia, MO 65201 84-3462829	Investment	DE	WASH U	Excluded	4,218	12,354,217		No			No	100.000 %

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h)	(i)	
							Percentage ownership	Section 512 (b)(13) controlled entity?	
AHAN-I LTD 190 Elgin Avenue GEORGE TOWN, GRAND CAYMAN CJ	INVESTMENT	CJ	WASH U	C CORP	-24,706,293	119,181,285	83.000 %	Yes	
ANABRANCH OFFSHORE FUND LTD 61 BROADWAY SUITE 2825 NEW YORK, NY 10006	INVESTMENTS	CJ	WASH U	C CORP	0	94,635,864	53.000 %	Yes	
BOBB LLC ONE BROOKINGS DRIVE CB 1058 ST LOUIS, MO 63130 32-0423075	REAL ESTATE	MO	PARALLEL PROPER	C CORP	4,619,569	54,296,362	100.000 %	Yes	
CHARITABLE REMAINDER TRUSTS (47)	CHARITABLE TR	MO	WASH U	TRUST				Yes	
CORRE HORIZON II OFFSHORE FUND LP 12 East 49th St 40th Floor NEW YORK, NY 10017 98-1548258	INVESTMENTS	CJ	WASH U	C CORP	114,733	19,011,288	41.000 %	Yes	
CORRE HORIZON OFFSHORE FUND LP 12 EAST 49TH ST 40TH FLOOR NEW YORK, NY 10017 98-1437030	INVESTMENT	CJ	WASH U	C CORP	18,925,411	124,709,429	84.000 %	Yes	
DYAL JAMES CAYMAN LP 1290 AVE OF THE AMERICAS 24TH FLO NEW YORK, NY 10104 98-1243524	INVESTMENT	CJ	WASH U	C CORP	265,859	1,200,634	73.000 %	Yes	
Kora Holdings I Offshore Fund Ltd UGLAND HOUSE SOUTH CHURCH ST GEORGE TOWN, GRAND CAYMAN CJ 98-1506261	Investment	CJ	WASH U	C CORP	21,071,252	202,420,444	98.000 %	Yes	
NET INCOME WITH MAKEUP CRUTS (5)	CHARITABLE TR	MO	WASH U	TRUST				Yes	
PARALLEL PROPERTIES LLC ONE BROOKINGS DRIVE CB 1058 ST LOUIS, MO 63130 45-3714626	REAL ESTATE	MO	WASH U	C CORP	2,952,568	32,772,157	100.000 %	Yes	
POOLED INTEREST FUNDS (3)	CHARITABLE TR	MO	WASH U	TRUST				Yes	
SCHF I-3 WU LP 700 ROSEDALE AVE CB 1034 ST LOUIS, MO 631121408 98-0464397	INVESTMENTS	UK	WASH U	C CORP	40,486	1,575,145	100.000 %	Yes	
SUSTAINABLE CAPITAL AFRICA ALPHA FUND 4TH FLOOR 19 BANK STREET CYBERCITY EBENE MP	INVESTMENTS	MP	WASH U	C CORP	17,004,646	324,571,377	70.000 %	Yes	
WASHINGTON UNIVERSITY PHYSICIANS NETWORK 4240 DUNCAN AVE SUITE 301 ST LOUIS, MO 63110 43-1660462	FEE NEGOTIATI	MO	WASH U	C CORP	1,223,449	14,386	100.000 %	Yes	

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

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
BIOSTL	A	1,300,000	ARMS LENGTH
BOBB LLC	A	665,215	ARMS LENGTH
Castlereagh ML LLC	A	360,722	ARMS LENGTH
Clayton Euclid ML LLC	A	547,459	ARMS LENGTH
Eastgate ML LLC	A	114,707	ARMS LENGTH
Parallel Properties LLC	A	6,982	ARMS LENGTH
Quadrangle Housing Company	A	207,346	ARMS LENGTH
Lewis Center ML LLC	A	67,843	ARMS LENGTH
AHAN-I Ltd	B	30,000,000	CASH CONTRIB
BioSTL	B	1,500,000	CASH CONTRIB
CORRE HORIZON II OFFSHORE FUND LP	B	17,801,103	CASH CONTRIB
CORRE HORIZON OFFSHORE FUND LP	B	21,999,392	CASH CONTRIB
DECATHLON ALPHA IV LP	B	37,500,000	CASH CONTRIB
ECLIPSE SPV VIIILP	B	74,110,000	CASH CONTRIB
ECLIPSE SPV X LP	B	17,812,500	CASH CONTRIB
Elm Park Credit Opportunities Fund LP	B	723,960	CASH CONTRIB
KINGSWAY FCF OVERFLOW SPC -SEGR PORT FOUR	B	70,000	CASH CONTRIB
KINGSWAY FCI CO-INVEST SPC -SEGR PORT SIX	B	19,321,610	CASH CONTRIB
KINGSWAY FCI CO-INVEST SPC -SEGR PORT SEVEN	B	62,045,196	CASH CONTRIB
KURAMO AFRICA OPPOR CO-INVEST VEHICLE III LP	B	13,727,700	CASH CONTRIB
KURAMO AFRICA OPPORTUNITY FUND III LP	B	1,769,464	CASH CONTRIB
PARALLEL PROPERTIES LLC	B	2,054,411	ARMS LENGTH
PERMANENT EQUITY II PARALLEL FUND LP	B	12,349,999	CASH CONTRIB
THELEME SPECIAL PURPOSE FUND I LP	B	25,000,000	CASH CONTRIB
WASHINGTON UNIV PHYSICIANS IN ILLINOIS INC	B	847,880	CASH CONTRIB

Form 990, Schedule R, Part V - Transactions With Related Organizations			
(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
BARNARD FREE SKIN AND CANCER HOSPITAL	C	4,800,000	CASH CONTRIB
BOBB LLC	D	1,333,629	ARMS LENGTH
Lewis Center ML LLC	D	26,555,131	ARMS LENGTH
Quadrangle Management Company	D	346,941	ARMS LENGTH
Clayton Euclid MT LLC	J	87,521	ACTUAL COST
Quadrangle Housing Company	J	59,979	ACTUAL COST
BOBB LLC	K	567,896	ARMS LENGTH
Clayton Euclid MT LLC	K	338,008	ARMS LENGTH
BARNARD FREE SKIN AND CANCER HOSPITAL	K	676,129	ARMS LENGTH
Quadrangle Housing Company	L	3,203,516	ACTUAL COST
Quadrangle Management Company	L	91,747	ARMS LENGTH
BARNARD FREE SKIN AND CANCER HOSPITAL	L	344,194	ACTUAL COST
Washington University Physician Network	M	1,047,080	ACTUAL COST
Clayton Euclid MT LLC	Q	196,943	ACTUAL COST
Quadrangle Housing Company	Q	3,442,402	ACTUAL COST
Quadrangle Management Company	Q	426,841	ARMS LENGTH
Washington University Physician Network	Q	1,044,157	ACTUAL COST
WASHINGTON UNIV PHYSICIANS IN ILLINOIS INC	Q	29,403,214	ACTUAL COST
4140 ML LLC	R	2,168,146	ARMS LENGTH
Clayton Euclid ML LLC	R	180,470	ARMS LENGTH
Parallel Properties LLC	R	6,472,290	ARMS LENGTH
Quadrangle Management Company	R	316,653	ARMS LENGTH
BARNARD FREE SKIN AND CANCER HOSPITAL	R	2,310,198	FAIR VALUE
Big Brick Buildings ML LLC	S	1,891,802	ARMS LENGTH
BOBB LLC	S	4,564,686	ARMS LENGTH

Form 990, Schedule R, Part V - Transactions With Related Organizations			
(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
Castlereagh ML LLC	S	2,274,254	ARMS LENGTH
Clayton Euclid ML LLC	S	711,411	ARMS LENGTH
COLISEUM CAPITAL PARTNERS II LP	S	38,500,576	CASH DISTRIB
Crescent ML LLC	S	332,223	ARMS LENGTH
DECATHLON ALPHA IV LP	S	26,055,432	CASH DISTRIB
Eastgate ML LLC	S	10,402,983	ARMS LENGTH
Elm Park Credit Opportunities Fund LP	S	1,272,017	CASH DISTRIB
Foundation Energy Fund V-B LP	S	5,411,250	CASH DISTRIB
KORA RUSSIA FUND LP	S	50,000,000	CASH DISTRIB
KURAMO AFRICA OPPORTUNITY FUND III LP	S	179,372	CASH DISTRIB
Lewis Center ML LLC	S	3,303,069	ARMS LENGTH
Net Income with Makeup CRUTs (3)	S	1,616,154	CASH DISTRIB
PAGE FIELD COMMONS HOLDINGS LLC	S	2,135,380	CASH DISTRIB
Quadrangle Management Company	S	51,874	ARMS LENGTH
THELEME SPECIAL PURPOSE FUND I LP	S	20,000,000	CASH DISTRIB
Washington Univ Physicians in Illinois Inc	S	85,021,105	CASH DISTRIB
WE 113 North Maple St Holdings LLC	S	5,950,343	CASH DISTRIB
WE 137 LATHROP ROAD HOLDINGS LLC	S	5,558,099	CASH DISTRIB