EXTENDED TO MAY 15, 2023

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning JUL 1, 2021 and ending JUN 30, 2022 C Name of organization D Employer identification number Check if applicable: Address change UNIVERSITY OF PITTSBURGH 25-0965591 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 116 ATWOOD STREET, SUITE 201 (412) 624-3189 terminated G Gross receipts \$ 4,665,864,462. City or town, state or province, country, and ZIP or foreign postal code Amended return PITTSBURGH, PA 15260-0100 H(a) Is this a group return Applica-F Name and address of principal officer: PATRICK D. GALLAGHER ∫Yes X No for subordinates? pending 107 CATHEDRAL OF LEARNING, PGH, PA 15260 **H(b)** Are all subordinates included? __Yes L _ 501(c) (Tax-exempt status: X 501(c)(3)) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.PITT.EDU **H(c)** Group exemption number ▶ **K** Form of organization: X Corporation Trust Association Other -L Year of formation: 1787 M State of legal domicile: PA Part I Summary Briefly describe the organization's mission or most significant activities: TO PROVIDE HIGH QUALITY Activities & Governance EDUCATIONAL SERVICES, RESEARCH, AND COMMUNITY SERVICE. if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 34 Number of independent voting members of the governing body (Part VI, line 1b) 28 26951 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 207 6 34,970,821. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 504,730,728 580,482,564. Revenue 2,066,084,614 2,234,980,838. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 661,711,985 365,183,978. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -6,537,704 49,905,677. 3,225,989,623 3,230,553,057. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 357,156,533 398,942,947. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,528,997,821. 1,584,150,315. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 374 137. 441 222. **b** Total fundraising expenses (Part IX, column (D), line 25) 863,308,818 936,736,568. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,749,837,309 2,920,271,052. 476,152,314. 310,282,005. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 9,651,464,888 9,742,545,228. 20 Total assets (Part X, line 16) 3,102,244,519, 3,015,858,765. 21 Total liabilities (Part X, line 26) Net/ 6,549,220,369. 6,726,686,463. Net assets or fund balances. Subtract line 21 from line 20 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. 5/11/2023 Hari Sastry Signature of officer Date Sign HARI SASTRY, SENIOR VICE CHANCELLOR & CFO Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature 5/8/2023 BRIAN KEARNS Brian Kearen Paid P02061479 self-employed Preparer Firm's name KPMG Firm's EIN > 13-5565207 Firm's address 8350 BROAD STREET SUITE 900 Use Only MCLEAN, VA 22102 Phone no.703-286-8000 May the IRS discuss this return with the preparer shown above? See instructions X Yes

	1990 (2021) UNIVERSITY OF PITTSBURGH	25-0965591	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		х х
1	Briefly describe the organization's mission:		
	SEE SCHEDULE O		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2	prior Form 990 or 990-EZ?		Yes X No
	If "Yes." describe these new services on Schedule O.		1C3 NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services'	?	Yes X 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, a	s measured by ex	penses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 864,897,561. including grants of \$ 134,511,068.) (Rever	nue \$ 1,0	066,543,628.)
	RESEARCH - INCLUDES EXPENDITURES FOR ACTIVITIES SPECIFICALLY ORGANIZED		_
	TO PRODUCE RESEARCH OUTCOMES WHETHER COMMISSIONED BY AN EXTERNAL AGENCY		
	OR BUDGETED BY A UNIT.		
46	(Code:) (Expenses \$ 628,654,242. including grants of \$ 263,241,663.) (Reve)20 /19 965 \
4b	(Code:)(Expenses \$628,654,242. including grants of \$263,241,663.) (Reveil INSTRUCTION - INCLUDES EXPENDITURES FOR ACTIVITIES OF THE INSTITUTION'S	nue \$	720,410,003.
	INSTRUCTION PROGRAMS.		
	-		
4c	(Code:) (Expenses \$ 327,627,142. including grants of \$) (Rever	nue \$ 1	.10,526,699.)
	ACADEMIC SUPPORT - INCLUDES EXPENDITURES IN SUPPORT OF THE UNIVERSITY'S		_
	PRIMARY MISSIONS - INSTRUCTION, RESEARCH, AND PUBLIC SERVICE.		
4d	Other program services (Describe on Schedule O.)	120 F24 CFF :	
4.	(Expenses \$ 817,609,846. including grants of \$ 1,190,216.) (Revenue \$	139,524,655.)	
<u>4e</u>	Total program service expenses ▶ 2,638,788,791.		Form 990 (2021)
			FUITH 230 (2021)

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_		
·	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
40	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	х	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	10	Λ	
11	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	1 Ia		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	45	Х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-"		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19	х	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
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	Х	

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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	Х			
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	Х			
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		х			
h	Schedule K. If "No," go to line 25a	24a 24b	Λ	x		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240				
·	any tax-exempt bonds?	24c		х		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х		
	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		Х		
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		Х		
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%			v		
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X		
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	х			
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):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If					
	"Yes," complete Schedule L, Part IV	28a	X			
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х			
С	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	X			
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	х			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ļ .				
-	Schedule N, Part II	32		х		
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	Х			
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	X			
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х			
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	254	Х			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		<u> </u>		
55	If "Yes," complete Schedule R, Part V, line 2	36		х		
37						
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?					
_	Note: All Form 990 filers are required to complete Schedule O	38	Х			
Pa	Tt V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V			Щ.		
	E		Yes	No		
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b					
b	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1				
·	(nambling) winnings to prize winners?	10	х			

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 26951			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions	S			
			3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	•	١.		
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		F-		х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5a 5b		X
b			5c		Α
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		30		
Va	any contributions that were not tax deductible as charitable contributions?		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribut				
-	were not tax deductible?	•	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?	•	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f	Х	
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
			8		
9	Sponsoring organizations maintaining donor advised funds.		_		
а			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	ا ءما			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:	100			
'' 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	110			
-	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		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
	excess parachute payment(s) during the year?		15	Х	
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		Х
4-7	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in				
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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UNIVERSITY OF PITTSBURGH Form 990 (2021) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent _____ 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Х Х 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 Х 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶PA

18	Section 6104 requires an organization to make its Forms 1023 (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 X Upon request Other (explain on Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records									
	THURMAN D. WINGROVE - (412)624-6050								
	3015 CATHEDRAL OF LEARNING PITTSBURGH PA 15260-6471								

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot or/trus	h an	compensation	compensation	amount of
	week (list any	Η.					Ĺ	from the	from related organizations	other compensation
	hours for	ndividual trustee or director				pa		organization	(W-2/1099-MISC/	from the
	related	stee o	rustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal t		oloyee	comp		1099-NEC)		and related
	below line)	dividu	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) PATRICK R. NARDUZZI	40.00	드	드	5	3	표 등	꼰			
HEAD FOOTBALL COACH						х		5,620,201.	0.	255,616.
(2) F. JEFFREY CAPEL III	40.00							, ,		,
HEAD MEN'S BASKETBALL COACH						х		3,552,438.	0.	43,552.
(3) EDWARD J. GREFENSTETTE	5.00									
TRUSTEE	40.00	х						0.	1,995,072.	31,549.
(4) GREGORY SCHULER	40.00									
FORMER CIO THRU 6/30/21							Х	1,675,865.	0.	34,401.
(5) ARTHUR S. LEVINE	40.00									
FMR SVC HEALTH SCIENCES THRU 6/1/20	5.00						Х	1,461,660.	0.	52,810.
(6) ANANTHA SHEKHAR	40.00									
SVC HEALTH SCIENCES	1.00			Х				1,312,908.	0.	156,800.
(7) HEATHER R. LYKE	40.00									
DIRECTOR OF ATHLETICS						Х		782,789.	0.	129,696.
(8) PATRICK D. GALLAGHER	40.00									
CHANCELLOR / CEO	5.00	Х		Х				680,229.	25,000.	140,444.
(9) RANDY V. BATES	40.00									
ASSISTANT FOOTBALL COACH						Х		704,730.	0.	52,840.
(10) MICHAEL J. BECICH	40.00									
CHAIRMAN PCI						Х		661,890.	0.	22,402.
(11) PAUL LAWRENCE	40.00								_	
TREASURER				Х				509,971.	0.	70,693.
(12) ANN E. CUDD	40.00									
PROVOST/SR VICE CHANCELLOR	10.00			Х				490,077.	0.	55,383.
(13) ROBIN A. RUTENBAR	40.00			l				427 622		60.050
SR VICE CHANCELLOR- RESEARCH	10.00			Х				437,688.	0.	62,050.
(14) DAVID N. DEJONG	40.00			l				414 500	0	01 202
SVC BUSINESS OPS	40.00			Х				411,589.	0.	81,303.
(15) GEOVETTE E. WASHINGTON	40.00			١,,				420 541	0	46.057
SVC & CHIEF LEGAL OFFICER	40.00			Х				439,541.	0.	46,057.
(16) NARAHARI SASTRY	40.00	-		Į.,				207 500	0	E1 266
CFO/SR VICE CHANCELLOR (17) KATHY S. HUMPHREY	1.00	\vdash		Х	\vdash	\vdash		397,509.	0.	51,266.
SVC ENGAGEMENT- THRU 6/30/21	40.00	ł					х	256,275.	0.	36 606
DAC FINGWGEMENT - TUKO 0/20/5T							Δ	430,4/5.	0.	36,686.

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Part VIII a 1 arr						-			23 0303331	Fage G
Part VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C			
(A)	1 ' '	(B) (C)						(D)	(E)	(F)
Name and title	Average hours per		Position (do not check more than one					Reportable	Reportable	Estimated
	week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	Į.						the	organizations	compensation
	hours for	direct				p		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee		1099-NEC)	•	and related
	below	vidua	tutior	Je.	Key employee	nest c loyee	ner			organizations
	line)	Indi	Insti	Officer	Key	High emp	Former			
(18) ROSALYN E. JONES	40.00									
VC/SECRETARY OF THE BOT				Х				240,785.	0.	25,486.
(19) JANE BILEWICZ ALLRED	5.00									
TRUSTEE		Х						0.	0.	0.
(20) JOHN A. BARBOUR	5.00									
TRUSTEE		Х						0.	0.	0.
(21) SUNDAA BRIDGETT-JONES	5.00									
TRUSTEE		х						0.	0.	0.
(22) DOUGLAS M. BROWNING	5.00									
CHAIR OF THE BOT		х						0.	0.	0.
(23) GARY T. BROWNLEE	5.00									
TRUSTEE		х						0.	0.	0.
(24) MARY ELLEN CALLAHAN	5.00									
VICE CHAIR OF THE BOT		х		х				0.	0.	0.
(25) LOUIS R. CESTELLO	5.00									
VICE CHAIR OF THE BOT		х		х				0.	0.	0.
(26) DAVID C. CHAVERN	5.00									
TRUSTEE		х						0.	0.	0.
1b Subtotal	1b Subtotal									1,349,034.
c Total from continuation sheets to Part V	c Total from continuation sheets to Part VII, Section A									0.
d Total (add lines 1b and 1c)								19,636,145.	2,020,072.	1,349,034.

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

2,598

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
CHARTWELLS DINING SERVICES		
2 INTERNATIONAL DR, RYE BROOK, NY 10573	FOOD SERVICE	15,338,631.
PJ DICK INC		
225 NORTH SHORE DRIVE, PITTSBURGH, PA 15212	CONSTRUCTION	15,038,488.
TURNER CONSTRUCTION CO, 925 LIBERTY AVENUE		
3RD FL, PITTSBURGH, PA 15222	CONSTRUCTION	9,040,408.
BURCHICK CONSTRUCTION CO INC		
500 LOWRIES RUN ROAD, PITTSBURGH, PA 15237	CONSTRUCTION	8,855,683.
REGENTS OF THE UNIVERSITY OF MICHIGAN		
500 S. STATE STREET, ANN ARBOR, MI 48109	RESEARCH SUBCONTRACTS	6,312,798.
2 Total number of independent contractors (including but not limited to those lis	sted above) who received more than	
\$100,000 of compensation from the organization > 339		
		200

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 UNIVERSITY OF PITTSBURGH 25-0965591

Form 990	UNIVERSITY OF	F PITTSBURG	H							25-096559	1
Part VII Section A. Offi	cers, Directors, Tru	ıstees, Key Eı	mplo	oyee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
(A)		(B)			((C)			(D)	(E)	(F)
Name and t	itle	Average				ition			Reportable	Reportable	Estimated
		hours	(cl	heck				ly)	compensation	compensation	amount of
		per						Ė	from	from related	other
		week	L				oyee		the	organizations	compensation
		(list any	recto				empl		organization	(W-2/1099-MISC)	from the
		hours for	or di	ee			sated		(W-2/1099-MISC)		organization
		related organizations	ustee	frust		ee	ubeus				and related organizations
		below	dual tr	tional		nploy	st con	L			Organizations
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) VAUGHN S. CLAGET	re	5.00									
TRUSTEE			х						0.	0.	0
(28) JAY COSTA, JR.		5.00									
TRUSTEE			Х						0.	0.	0
(29) JAMES P. COVERT		5.00									
TRUSTEE			Х						0.	0.	0
(30) BRADLEY J. FRANC		5.00									
TRUSTEE			Х						0.	0.	0
(31) DEBORAH J. GILLO	TTI	5.00									
TRUSTEE			Х						0.	0.	0
(32) LISA A. GOLDEN		5.00									
TRUSTEE			Х						0.	0.	0
(33) DIANE P. HOLDER		5.00									
TRUSTEE			Х						0.	0.	0
(34) SY HOLZER		5.00	1						_	_	_
TRUSTEE			Х						0.	0.	0
(35) PATRICIA D. HOROF	Ю	5.00	ļ								
TRUSTEE			Х						0.	0.	0
(36) S. JEFFREY KONDIS	5	5.00	ļ								
TRUSTEE			Х						0.	0.	0
(37) WILLIAM K. LIEBER	RMAN	5.00	1						_	_	_
TRUSTEE			Х						0.	0.	0
(38) ROBERTA A. LUXBAC	CHER	5.00	ļ								
TRUSTEE	-		Х						0.	0.	0
(39) JOHN A. MAHER III	_	5.00	١								
TRUSTEE		F 00	Х						0.	0.	0
(40) ERIN MCDOWELL TRUSTEE		5.00	x								0
(41) LARRY J. MERLO		5.00	^						0.	0.	0
TRUSTEE		3.00	x						0.	0.	_
(42) NATALIE MIHALEK		5.00	^						0.	0.	0
TRUSTEE		3.00	X						0.	0.	0
(43) JOHN H. PELUSI, S	JR.	5.00	 						· ·	· · ·	<u> </u>
TRUSTEE	-		x						0.	0.	0
(44) KEITH E. SCHAEFER	₹	5.00							1		
TRUSTEE		-	х						0.	0.	0
(45) PETER C. VARISCHE	TTI	5.00									
TRUSTEE		-	x						0.	0.	0
(46) JOHN J. VERBANAC		5.00									
TRUSTEE		-	х						0.	0.	0
		•									
Total to Part VII, Section A, li	ne 1c										

Form 990 UNIVERSITY OF PITTSBURGH 25-0965591

	F PITTSBURG	RGH 25-0965591							1	
Part VII Section A. Officers, Directors, Tr	ustees, Key Eı	nplo	oyee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	(cl		Pos	C) ition that		ly)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) ADAM WALKER	5.00									,
FRUSTEE (48) MICHAEL G. WELLS	5.00	Х						0.	0.	(
TRUSTEE	5.00	Х						0.	0.	
(49) JAKE WHEATLEY, JR.	5.00	Λ						0.	0.	
TRUSTEE	— 3.30	х						0.	0.	
(50) MARNA CUPP WHITTINGTON	5.00									
TRUSTEE		х						0.	0.	
(51) JEFFER CHOUDHRY	40.00									
SVC & CIO (AS OF 2/25/22)				Х				0.	0.	
		1								
		L	L	L	L	$L_{\!\scriptscriptstyle{-}}$	L			
			1		1			i		

Form 990 (2021) UNIVERSITY

Part VIII Statement of Revenue

		Check if Schedule O	conta	ains a res	ponse	or note to any lir	ne in this Part VIII			
						,	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
ts ts	1:	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues			+					
ا ق ق		Fundraising events			+	215,031.				
ifts		Related organizations			+	225,684,833.				
n is G		Government grants (conti				221,672,487.				
Sir		All other contributions, gifts,		· —		221,072,407.				
it je	'	similar amounts not included				132 910 213				
등등					1	9,581,439.				
in S		Noncash contributions included in			•	J,301,43J.	580 482 564			
<u> </u>		Total. Add lines 1a-1f				Business Code	580,482,564.			
	•	GRANTS/CONTRACTS				541700	1,066,543,628.			1066543628.
je						611710	<u> </u>	020 410 065		1000343020.
Jer Ine	ľ	·					920,418,865.		2 002 755	_
Wen S	•	SALES-AUXILIARY				900004	139,524,655.		2,002,755.	
gra	(SALES-EDUCATIONAL				711300	108,252,990.		2,271,131.	
Program Service Revenue	•	UNIVERSITY PRESS				511130	240,700.	240,700.		
_		All other program service					2 224 000 020			
$\overline{}$		Total. Add lines 2a-2f					2,234,980,838.			
	3	Investment income (include					44 000 000			44 000 000
		other similar amounts)					44,069,608.			44,069,608.
	4	Income from investment of		-	-		10 160 142			10 100 143
	5	Royalties					12,168,143.			12,168,143.
	_		_	(i) Re		(ii) Personal				
		Gross rents	-	16,223						
		Less: rental expenses		11,028						
		Rental income or (loss)	6с	5,195	,559.		- 100			
		Net rental income or (loss) <u> </u>	(1) 0		(2) OH	5,195,559.			5,195,559.
	7 a	Gross amount from sales of		(i) Secu		(ii) Other				
		assets other than inventory	7a	173895	7142.					
o l	ŀ	Less: cost or other basis								
ğ		and sales expenses		141784						
Other Revenue		Gain or (loss)		321,114						
ž.		Net gain or (loss)			····	<u> </u>	321,114,370.			321,114,370.
the	8 8	Gross income from fundraisi	<u>.</u>							
0		including \$								
		contributions reported on								
		Part IV, line 18				110,695.				
		Less: direct expenses				388,164.	0.55			0.77 460
		Net income or (loss) from				D	-277,469.			-277,469.
	9 a	Gross income from gamin				040 740				
		Part IV, line 19				243,740.				
		Less: direct expenses				154,240.	00 500			00.500
		Net income or (loss) from	~	•	ies	D	89,500.			89,500.
	10 a	Gross sales of inventory,				0 044 074				
		and allowances								
		Less: cost of goods sold					2 115 221	0 000 000	4 442 075	
$\overline{}$		Net income or (loss) from	sales	s of inven	tory		3,146,284.	2,033,009.	1,113,275.	
sn		D1DM11111	a c ·			Business Code	00 500 555		00 500 555	
Miscellaneous Revenue		PARTNERSHIP GAIN(LO	SS)			523000	29,583,660.		29,583,660.	
lar en	ŀ									
Re	(
ž		All other revenue					00 500 500			
		Total. Add lines 11a-11d				>	29,583,660.	4 466 45	24 2-2	444000
	12	Total revenue. See instruction	ns				3,230,553,057.	1,166,196,333.	34,970,821.	1448903339.

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

Do	Check if Schedule O contains a responsion tinclude amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	129,623,657.	129,623,657.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	263,296,010.	263,296,010.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	5 000 000			
_	individuals. See Part IV, lines 15 and 16	6,023,280.	6,023,280.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	5 600 022	1 111 122	4 160 665	410 125
_	trustees, and key employees	5,689,933.	1,111,133.	4,160,665.	418,135
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	0 011 505	1 442 066	1 214 421	154 000
_	persons described in section 4958(c)(3)(B)	2,911,705.	1,443,066.	1,314,431.	154,208
7	Other salaries and wages	1,189,277,838.	1,090,542,838.	82,907,934.	15,827,066
8	Pension plan accruals and contributions (include	110 050 455	100 215 400	0 275 140	1 560 000
_	section 401(k) and 403(b) employer contributions)	112,253,455.	102,315,499.	8,375,149.	1,562,807
9	Other employee benefits	193,766,540.	176,300,954.	15,018,132.	2,447,454
10	Payroll taxes	80,250,844.	72,917,008.	6,208,557.	1,125,279
11	Fees for services (nonemployees):	E40 030		E40 030	
	Management	540,938.		540,938.	
b	Legal	13,038,986.		13,038,986.	
C	Accounting	1,151,950.	623,750.	1,151,950.	
a	Lobbying	623,750.	623,750.		441 222
e	Professional fundraising services. See Part IV, line 17	441,222. 57,639,603.		57,639,603.	441,222
f	Investment management fees	37,039,003.		37,033,003.	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)	227,527,408.	196,151,625.	29,878,728.	1,497,055
40		2,181,118.	2,177,921.	25,070,720.	3,197
12	Advertising and promotion	115,355,117.	114,690,580.		664,537
13 • •	Office expenses	47,461,387.	46,738,618.	280,054.	442,715
14 15	Information technology	17,101,307.	40,730,010.	200,034.	442,713
16	Royalties	156,267,993.	146,486,678.	8,368,292.	1,413,023
10 17	Occupancy	39,178,994.	38,668,170.	0,300,232.	510,824
17 18	Travel	35,170,554.	30,000,170.		310,024
10	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials Conferences, conventions, and meetings	4,877,197.	4,827,869.		49,328
20		51,482,624.	48,176,822.	3,305,802.	
20 21	Payments to affiliates	32,202,021.	20,2.0,022.	2,000,002.	
2 i 22	Depreciation, depletion, and amortization	193,852,728.	181,249,534.	12,603,194.	
22 23	Insurance	11,663,396.	2,406,274.	9,247,494.	9,628
23 24	Other expenses. Itemize expenses not covered	, 555, 556	=,200,272.	- , ,	, 320
∓	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	LIBRARY	9,233,718.	9,233,718.		
b	DUES AND FEES	4,659,661.	3,783,787.	815,668.	60,206
c		, , ,	, ,	, ,	,
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,920,271,052.	2,638,788,791.	254,855,577.	26,626,684
<u></u> 26	Joint costs. Complete this line only if the organization	· · · · · ·	, , ,	. , ,	, ,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2021) Part X Balance Sheet

Part .	X	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	• • • • • • • • • • • • • • • • • • • •			1,225,674,034.	2	1,111,206,572
	3	Pledges and grants receivable, net			210,315,040.	3	69,687,774
		Accounts receivable, net			103,397,842.	4	258,011,485
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs	stantial c	contributor, or 35%			
		controlled entity or family member of any of the	se perso	ons		5	
	6	Loans and other receivables from other disqua	ified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
ន្ទ	7	Notes and loans receivable, net			28,836,425.	7	26,635,921
Assets	8	Inventories for sale or use			4,579,035.	8	5,635,697
⋖	9	Prepaid expenses and deferred charges			19,018,552.	9	24,449,677
1	l0a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	3,412,898,448.	2,053,683,226.	10c	2,397,508,041
1	11	Investments - publicly traded securities			1,290,954,963.	11	1,317,461,960
1	12	Investments - other securities. See Part IV, line		4,418,128,842.	12	4,262,599,508	
1	13	Investments - program-related. See Part IV, line	11			13	
1	4	Intangible assets			14		
1	15	Other assets. See Part IV, line 11			296,876,929.	15	269,348,593
1	16	Total assets. Add lines 1 through 15 (must equ	ıal line 3	3)	9,651,464,888.	16	9,742,545,228
1	17	Accounts payable and accrued expenses		980,775,879.	17	793,298,700	
1	18	Grants payable		18			
1	19	Deferred revenue		147,981,347.	19	159,297,501	
2	20	Tax-exempt bond liabilities		95,756,690.	20	95,718,550	
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
ဖ္မ 2	22	Loans and other payables to any current or for	ner offic	er, director,			
		trustee, key employee, creator or founder, subs	stantial c	contributor, or 35%			
<u>a</u>		controlled entity or family member of any of the	se perso	ons		22	
- 2	23	Secured mortgages and notes payable to unre				23	
2	24	Unsecured notes and loans payable to unrelate			1,414,390,936.	24	1,367,985,653
2	25	Other liabilities (including federal income tax, pa	ayables '	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			463,339,667.		599,558,361
2	26	Total liabilities. Add lines 17 through 25			3,102,244,519.	26	3,015,858,765
ပ္သ		Organizations that follow FASB ASC 958, ch	eck her	e ▶ X			
<u> </u>		and complete lines 27, 28, 32, and 33.					
B 2	27	Net assets without donor restrictions			4,201,260,977.	27	4,356,312,437
0 2	28	Net assets with donor restrictions			2,347,959,392.	28	2,370,374,026
⋚ │		Organizations that do not follow FASB ASC 9	958, che	eck here			
Net Assets or Fund Balances		and complete lines 29 through 33.					
၌ 2	29	Capital stock or trust principal, or current funds				29	
၌ 3	30	Paid-in or capital surplus, or land, building, or e				30	
[3	31	Retained earnings, endowment, accumulated in		_		31	
_	32	Total net assets or fund balances		· ·	6,549,220,369.	32	6,726,686,463
3	33	Total liabilities and net assets/fund balances			9,651,464,888.	33	9 , 742 , 545 , 228 Form 990 (202

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?

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 on Schedule O and describe any steps taken to undergo such audits

Form 990 (2021)

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SCHEDULE A

(Form 990)

Total

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

Open to Public Inspection

Name of the organization Employer identification number UNIVERSITY OF PITTSBURGH 25-0965591 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). 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: 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). 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar 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.")	272,881,210.	278,771,458.	301,857,506.	509,627,810.	562,423,485.	1925561469.
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	272,881,210.	278,771,458.	301,857,506.	509,627,810.	562,423,485.	1925561469.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						1925561469.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	272,881,210.	278,771,458.	301,857,506.	509,627,810.	562,423,485.	1925561469.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	98,266,163.	105,549,582.	80,213,104.	131,003,931.	56,237,751.	471,270,531.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11							2396832000.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 13	,165,594,884.
13	First 5 years. If the Form 990 is for the	•	,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stor				_		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2021 (line 6, column (f), d	livided by line 11,	column (f))		14	80.34 %
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	75.86 %
16a	33 1/3% support test - 2021. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				> X
b	33 1/3% support test - 2020. If the o	organization did no	t check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes						or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances to	est. The organization	on qualifies as a pu	ublicly supported	organization		>
b	10% -facts-and-circumstances tes	_	· · · · · · · · · · · · · · · · · · ·		-		
	more, and if the organization meets the	-					
	organization meets the facts-and-circ				-		>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u>s</u>

Schedule A (Form 990) 2021

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.)

Se	ction A. Public Support	, 1	,				
Cale	ndar 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 per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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	1					
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support				_	_	
Cale	endar 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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
11							
	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
							<u></u> ▶∟⊥
	ction C. Computation of Publ					11	
	Public support percentage for 2021 (I					15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Inves					Land	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
198	a 33 1/3% support tests - 2021. If the						I / IS not
	more than 33 1/3%, check this box a						P
k	33 1/3% support tests - 2020. If the	•			•	•	
20	line 18 is not more than 33 1/3%, che						

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Schedule A (Form 990) 2021

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	3		
	9a		
	OI-		
	9b		
	9c		
	10a		
	10b		
ulo		~ 000	

Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
-	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	•		
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			<u> </u>
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations	•		
	aon 2.7th Type in Supporting Organizations		Yes	No
4	Did the expenientian provide to each of its supported expenientians, by the last day of the fifth month of the		res	NO
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	_		
2		2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	2		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	3		
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
1 a	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
C	The organization is the parent of each of its supported organizations. Complete line 3 bolow. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	ne)	
2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
h	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	<u> La</u>		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
		2h		
2	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	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? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	The time organization exercises a substantial degree of all obtain ever the policies, programs, and activities of Each			

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust or	n Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integra	ted Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990) 2021

Par	t V T	Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations _{(continu}	ued)	
Secti	on D - D	istributions				Current Year
1	Amounts	s paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts	s paid to perform activity that directly furthers exemp	ot purposes of supported			
	organiza	ations, in excess of income from activity			2	
3	Adminis	trative expenses paid to accomplish exempt purpose	es of supported organization	าร	3	
4	Amount	s paid to acquire exempt-use assets		4		
5	Qualified	d set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6		stributions (describe in Part VI). See instructions.			6	
7	Total an	nnual distributions. Add lines 1 through 6.			7	
8	Distribut	tions to attentive supported organizations to which the	ne organization is responsiv	e		
	(provide	details in Part VI). See instructions.			8	
9	Distribut	table amount for 2021 from Section C, line 6			9	
10	Line 8 a	mount divided by line 9 amount			10	
		•	(i)	(ii)		(iii)
Secti	ion E - Di	istribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2021	ns	Distributable Amount for 2021
1	Distribut	table amount for 2021 from Section C, line 6				
2	Underdi	stributions, if any, for years prior to 2021 (reason-				
	able cau	se required - explain in Part VI). See instructions.				
3	Excess	distributions carryover, if any, to 2021				
а	From 20	16				
b	From 20	17				
С	From 20	18				
d	From 20	19				
е	From 2020					
f	Total of	lines 3a through 3e				
g	Applied	to underdistributions of prior years				
h	Applied	to 2021 distributable amount				
i	Carryove	er from 2016 not applied (see instructions)				
j	Remaind	der. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distribut	tions for 2021 from Section D,				
	line 7:	\$				
a	Applied	to underdistributions of prior years				
b	Applied	to 2021 distributable amount				
С	Remaind	der. Subtract lines 4a and 4b from line 4.				
5	Remaini	ng underdistributions for years prior to 2021, if				
	any. Sub	otract lines 3g and 4a from line 2. For result greater				
	than zer	o, explain in Part VI. See instructions.				
6	Remaini	ng underdistributions for 2021. Subtract lines 3h				
	and 4b f	rom line 1. For result greater than zero, explain in				
		See instructions.				
7	Excess	distributions carryover to 2022. Add lines 3j				
	and 4c.	-,				
8		own of line 7:				
		from 2017				
		from 2018				
		from 2019				
		from 2020				
		from 2021				

Schedule A (Form 990) 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.)

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public

Inspection

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

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

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

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

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

Tax) (See separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nar	ne of organization			E	mployer identification number
		OF PITTSBURGH			25-0965591
Pa	art I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 52	7 organization.
2	Provide a description of the organic Political campaign activity expendic Volunteer hours for political campa	tures		J	> \$
		ganization is exempt und			
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955		\$
	Enter the amount of any excise tax				
	If the organization incurred a section				
	a Was a correction made?				Yes No
	o If "Yes," describe in Part IV.		dan aa atian 504/a\		04(-)(0)
	art I-C Complete if the org	·		•	` ' ' '
	Enter the amount directly expende		•		> \$
2	Enter the amount of the filing organ		~		
_	exempt function activities				> \$
3	Total exempt function expenditures			•	Φ.
4	line 17b Did the filing organization file Form	1120 DOL for this year?			Yes No
4	Enter the names, addresses and e				
3	made payments. For each organiza	• •	•		
	contributions received that were pr	•	• •		•
	political action committee (PAC). If	additional space is needed, pro	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization' funds. If none, enter	s contributions received and

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

Schedule C (Form 990) 2021

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Part II-A Complete if the organ section 501(h)).	nization is exe		n 501(c)(3) and file	ed Form 5768 (e	election under
	n helongs to an affi	liated aroun (and list in	n Part IV each affiliated	aroun member's nar	ne address FIN
expenses, and share of			TI alt IV each anniated	group member s nar	ne, address, Liiv,
B Check ▶ ☐ if the filing organization	, ,	• ,	ovisions apply.		
Limits of (The term "expenditu	on Lobbying Expe ures" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influer	nce public opinion (grassroots lobbying)			
b Total lobbying expenditures to influer	nce a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add line	s 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (a					
f Lobbying nontaxable amount. Enter t		e following table in bot	th columns.		
If the amount on line 1e, column (a) or (i	o) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,0		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500	, ,	00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,00		00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (enter					<u> </u>
h Subtract line 1g from line 1a. If zero o					<u> </u>
i Subtract line 1f from line 1c. If zero or	,	the end of all the end of	-		
j If there is an amount other than zero		· · ·			Yes No
reporting section 4911 tax for this yea		eraging Period Under	Section 501(h)		res no
(Some organizations that	made a section 5		have to complete all o	of the five columns I	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					ula C (Form 990) 2021

Schedule C (Form 990) 2021

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

For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(1	b)
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?	Х			
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х			
С	Media advertisements?	Х			630,079.
	Mailings to members, legislators, or the public?	Х			49,997.
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?	x	Х	1	,003,532.
	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		1,	
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X			11,536.
	Other activities?			1	,706,512.
	Total. Add lines 1c through 1i		х	Ι,	,700,312.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		A		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
_	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 this year?	on 501(c)(5), or se	ection	
. a.	501(c)(6).	511 55 1(5	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	701.011	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
_	t III-B Complete if the organization is exempt under section 501(c)(4), section			ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ıe 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 politi				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditure next year?		4		
_5	Taxable amount of lobbying and political expenditures. See instructions		5		
Pai	t IV Supplemental Information				
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part	II-A, lines 1	and 2 (See	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PAR	I II-B, LINE 1, LOBBYING ACTIVITIES:				
LINI	E A: VOLUNTEERS- THE UNIVERSITY UTILIZES ALUMNI AND STUDENTS TO				
ADV	CATE FOR STATE SUPPORT FOR THE UNIVERSITY THROUGH LETTER WRITING,				
					<u></u>
EMA	ILS AND VISITS TO LEGISLATORS AND STATE OFFICIALS.				
		·			
LINI	B: STAFF MEMBERS- THE UNIVERSITY GOVERNMENTAL RELATIONS OFFICE				
			Schedu	le C (Form	n 990) 2021

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LINE I: OTHER ACTIVITIES- THE EXPENSE RELATES TO THE EFFORTS OF

UNIVERSITY STAFF WHO HELP TO ORGANIZE AND TRACK THE EFFORTS OF

VOLUNTEER ALUMNI, STAFF AND STUDENTS.

Schedule C (Form 990) 2021

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number 25-0965591

Pai			r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) zener adviced ianae	(5)
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		funde
3	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
Ū	for charitable purposes and not for the benefit of the donor		
	• •		
Pai		ganization answered "Yes" on Form 990. Part	
1	Purpose(s) of conservation easements held by the organizat	-	,
	Preservation of land for public use (for example, recreations)		nistorically important land area
	Protection of natural habitat		certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic st		
	Number of conservation easements included in (c) acquired		
	listed in the National Register		l I
3	Number of conservation easements modified, transferred, re		
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic 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 conserv	vation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	n easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) abo	ve 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 conservat	ion easements in its revenue and expense sta	atement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statement	s that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of		er Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 99	58, not to report in its revenue statement and	balance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in furth	erance of public
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 98		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in further	ance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre		ain, provide
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2021

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		(*	OF PITTSBURGH						25-09655			ige 2
Pai	rt III	Organizations Maintaining C	collections of A	rt, Histor	ical Tr	easures, c	r Othe	er Simil	ar Asse	ts (contin	ued)	
3	Using	g the organization's acquisition, accessi	on, and other record	ds, check an	ny of the	following that	t make s	ignificant	use of its			
		ction items (check all that apply):										
а			d			hange progra	ım					
b		Scholarly research	е	e L Oth	er							
С	Preservation for future generations											
4		de a description of the organization's co	•	•		ū			ose in Par	XIII.		
5		g the year, did the organization solicit o								1	77	1
Dai		sold to raise funds rather than to be ma								Yes	X	No
Pai	rt IV	Escrow and Custodial Arran reported an amount on Form 990, Pal		ete if the org	ganizatio	n answered "	Yes" on	Form 99	u, Part IV,	line 9, or		
10	lo the			diam , for oon	tribution		anta nat	inaludad				
ıa		e organization an agent, trustee, custod								Yes		No
h		orm 990, Part X? es," explain the arrangement in Part XIII								」 res		NO
D	11 16	s, explain the arrangement in Fart Am	and complete the ic	nowing tabl	С.					Amount		
c	Regir	nning balance						1c				
	U	tions during the year						·· —				
		butions during the year										
f		ng balance						1f				
2a		ne organization include an amount on F						ity?		Yes		No
		es," explain the arrangement in Part XIII.]
Pai	rt V	Endowment Funds. Complete i	f the organization ar	swered "Ye	es" on Fo	rm 990, Part	IV, line 1	0.				
			(a) Current year	(b) Prior	•	(c) Two year		(d) Three y	years back	(e) Four	years I	oack
1a	Begir	nning of year balance	5,680,225,886.	4,203,47	74,474.			4,226,3	329,646.	3,970,	046,	974.
b	Cont	ributions	59,744,000.	29,83	31,000.	30,445	,000.	31,7	709,000.	63,	962,	000.
		nvestment earnings, gains, and losses	1,215,000.	1,605,84	12,000.	-1,518	,000.	204,8	336,000.	342,	945,	000.
d	Grant	ts or scholarships	20,435,624.	19,27	75,340.	17,886	,528.	17,1	L70,023.	16,	440,	322.
е		r expenditures for facilities										
		programs	148,676,865.						527,514.			
f		nistrative expenses	15,057,968.			-			513,704.			865.
g		of year balance	5,557,014,429.				,474.	4,342,5	63,405.	4,226,	329,	646.
2		de the estimated percentage of the cur			olumn (a	i)) held as:						
		d designated or quasi-endowment	51.4000	%								
		anent endowment 39.0000	%									
С		endowment 9.6000										
20	-	percentages on lines 2a, 2b, and 2c sho here endowment funds not in the posse	•	ation that a	ro hold a	nd administs	rad far th	ao oraani	zation			
Sa	by:	nere endowment funds not in the posse	ssion of the organiz	alion mai ai	re rieiu ai	nu auministe	rea for ti	ie organi	Zation	Г	Yes	No
	•	Inrelated organizations								3a(i)	х	
		Related organizations								3a(ii)		x
b	If "Ye	es" on line 3a(ii), are the related organiza	tions listed as requi	red on Sche	edule R?					3b	\neg	
4		ribe in Part XIII the intended uses of the										
Pai	rt VI	Land, Buildings, and Equipm										
		Complete if the organization answere	d "Yes" on Form 990	0, Part IV, lir	ne 11a. S	See Form 990	, Part X,	line 10.				
		Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Book	value	
			basis (investr	ment)	basis ((other)	dep	reciation				
1a	Land				110	,296,368.				110,	296,	368.
b	Build	ings			3,992	,528,498.	2,4	38,762	577.	1,553,	765,	921.
		ehold improvements										
d	Equip	oment				,134,208.		69,185			948,	
		r				,447,415.	3	04,950	,299.		497,	
Tata	1 744	lines to through to (Column (d) must a	aual Form 990 Port	Y column /	(D) lino 1	001				2 397	508	041

Schedule D (Form 990) 2021

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	2.
---------------------------------------	--------------------	--------------------	---------------------------------	----

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PRIVATE INVESTMENTS	2,989,481,413.	END-OF-YEAR MARKET VALUE
(B) COMMINGLED INVESTMENTS IN PUBLIC SEC.	1,271,314,575.	END-OF-YEAR MARKET VALUE
(C) INSURANCE CSV & INSURANCE SURPLUS	1,803,520.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	4,262,599,508.	

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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	>	

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	REFUNDABLE US GOVERNMENT STUDENT LOANS	18,599,660.
(3)	PRESENT VALUE OF SPLIT INTEREST AGREEMENTS	14,463,570.
(4)	OTHER LIABILITIES	3,770,486.
(5)	CONDITIONAL ASSET REMEDIATION OBLIGATION	23,898,124.
(6)	INTEREST RATE SWAP AGREEMENTS	40,208,952.
(7)	AMOUNTS HELD IN CUSTODY	20,104,194.
(8)	RIGHT OF USE LEASE LIABILITIES	268,911,685.
(9)	ASSEMBLY BUILDING FINANCING	209,601,690.
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	599,558,361.

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

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 UNIVERSITY OF PITTSBURGH		25-0965591	Page 4
	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Reve	nue per Return.	<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b			
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Par	t XII Reconciliation of Expenses per Audited Financial Sta		enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line			
	Total expenses and losses per audited financial statements		1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
	Donated services and use of facilities			
	Prior year adjustments			
	Other losses			
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d			
	Subtract line 2e from line 1		3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)	· · · · · · · · · · · · · · · · · · ·		
	Add lines 4a and 4b			
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information.	3.)	5	
		. Dowl IV lines the and Oh	Doub V. line 4. Doub V. line 0. D	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an		, Part V, line 4, Part A, line 2, P	art Ai,
111165	zu and 45, and Fart Air, illies zu and 45. Also complete this part to provide ar	iy additional imormation.		
PART	III, LINE 4:			
	•			
THE	UNIVERSITY'S COLLECTIONS OF ART, HISTORICAL TREASURES, AND	OTHER		
SIMI	LAR ASSETS INCLUDE A VARIETY OF PAINTINGS, SCULPTURES, PHO	TOGRAPHS,		
ANTI	QUES, AND FURNISHINGS AS WELL AS SCHOLARLY PAPERS AND ARCH	IVES. THESE		
ITEM	S ARE HOUSED IN VARIOUS FACILITIES AROUND CAMPUS INCLUDING	THE FRICK		
FINE	ARTS BUILDING, THE HILLMAN LIBRARY, AND THE NATIONALITY R	OOMS. THE		
WORK	S OF ART, HISTORICAL TREASURES, AND OTHER SIMILAR ASSETS A	RE USED FOR		
PUBL	IC EXHIBITION AND THE PRESERVATION OF ARTIFACTS AND ANTIQU	ES FOR THE		
BENE	FIT OF FUTURE GENERATIONS. THE SCHOLARLY PAPERS AND ARCHI	VES ARE USED		
FOR	BOTH ACADEMIC RESEARCH AND THE PRESERVATION OF DOCUMENTS R	ELATED TO		
KEY	HISTORICAL FIGURES AND EVENTS.			

Schedule D (Form 990) 2021

SCHEDULE E

(Form 990)

Part I

Department of the Treasury Internal Revenue Service

Schools

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number
25-0965591

			YES	NC
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
	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	Х	
	THROUGH ELECTRONIC AND PRINT DISTRIBUTION AT THE BEGINNING OF			
	EACH ACADEMIC TERM.			
	Does the organization maintain the following?			
а	7, 7,	4a	Х	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		х
a b	Students' rights or privileges? Admissions policies?	5a 5b		Х
a b c	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff?			X
a b c d	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance?	5b		X X
a b c d	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5b 5c		X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities?	5b 5c 5d		X X X
a b c d e f g	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e		X X X X
a b c d e f g	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f		X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g		X X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f 5g		X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	x	X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5b 5c 5d 5e 5f 5g 5h	x	X X X X X
b d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	x	X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5b 5c 5d 5e 5f 5g 5h	x	X X X X X

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

Schedule E (Form 990) 2021

Schedule E (Form 990) 2021	UNIVERSITY OF PITTSBURGH	25-0965591	Page 2
Part II Supplemental Info	ormation. Provide the explanations required by Part I, lines 3	s, 4d, 5h, 6b, and 7, as	
	e any other additional information.		
LINE 6 - EXPLANATION OF GOV	ERNMENT FINANCIAL AID:		
THE UNIVERSITY OF PITTSBURG	H RECEIVES FUNDS FROM THE COMMONWEALTH OF		
PENNSYLVANIA. IN ADDITION,	THE UNIVERSITY RECEIVES FEDERAL PELL GRANTS		
AND COMMONWEALTH PHEAA GRAN	TS THAT ARE APPLIED TO STUDENTS' ACCOUNTS.		

Schedule E (Form 990) 2021

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

UNIVERSITY OF PITTSBURGH 25-0965591 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I 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? 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.) (b) Number of (e) If activity listed in (d) (a) Region (c) Number of (d) Activities conducted in the region (f) Total émployees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region PROGRAM SERVICES IN RELATION TO EDUCATIONAL CENTRAL AMERICA AND THE CARIBBEAN PROGRAM SERVICES, PROGRAMS 203,841. PROGRAM SERVICES IN RELATION TO EDUCATIONAL EAST ASTA AND THE PACIFIC PROGRAM SERVICES. PROGRAMS. 1,935,904. PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS EUROPE PROGRAM SERVICES. 14,116,219. PROGRAM SERVICES IN MIDDLE EAST AND RELATION TO EDUCATIONAL NORTH AFRICA PROGRAM SERVICES, PROGRAMS 302,968. PROGRAM SERVICES IN RELATION TO EDUCATIONAL NORTH AMERICA PROGRAM SERVICES PROGRAMS. 7,893,529. PROGRAM SERVICES IN RELATION TO EDUCATIONAL RUSSTA AND NEIGHBORING STATES PROGRAM SERVICES. PROGRAMS. 11,820. PROGRAM SERVICES IN RELATION TO EDUCATIONAL SOUTH AMERICA PROGRAM SERVICES. PROGRAMS. 386,842. PROGRAM SERVICES IN RELATION TO EDUCATIONAL PROGRAMS SOUTH ASTA PROGRAM SERVICES 845,849. 3 a Subtotal 25,696,972. **b** Total from continuation 104,713,066. sheets to Part I c Totals (add lines 3a 130,410,038. and 3b)

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

Schedule F (Form 990) 2021

Schedule F (Form 990) 2021 UNIVERSITY OF PITTSBURGH 25-0965591 Page 2

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	RESEARCH SUBCONTRACT.	565 _. 912.	WIRE/CHECK	0.		
			-	, -		-		
		EUROPE	RESEARCH SUBCONTRACT.	1,492,474.	WIRE/CHECK	0.		
		MIDDLE EAST AND						
		NORTH AFRICA	RESEARCH SUBCONTRACT.	181,801.	WIRE/CHECK	0.		
		NORTH AMERICA	RESEARCH SUBCONTRACT.	2,674,950.	WIRE/CHECK	0.		
		SOUTH ASIA	RESEARCH SUBCONTRACT.	438,515.	WIRE/CHECK	0.		
		SUB-SAHARAN						
		AFRICA	RESEARCH SUBCONTRACT	399,772.	WIRE/CHECK	0.		_
		L	rocognized as charities by the					

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax		
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	>	60
3	Enter total number of other organizations or entities	•	7

Schedule F (Form 990) 2021

UNIVERSITY OF PITTSBURGH

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. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

Schedule F (Form 990) 2021 Tent IV Foreign Forms

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

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

► 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 Employer identification number UNIVERSITY OF PITTSBURGH 25-0965591 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants X Mail solicitations X Internet and email solicitations f X Solicitation of government grants X Phone solicitations g X Special fundraising events X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization listed in col. (i) DAVINCI DIRECT, INC. - 36 DIRECT MAIL SOLICITATION & Yes No CORDAGE PARK CIRCLE SUITE CONSULTING Х 285,236 178,298 106,938. PLUS DELTA PARTNERS - 6965 EL CAMINO REAL, CARLSBAD, CA CONSULTING-SEE PART IV Х 0 49,249 -49,249. GRADUWAY INC - 2815 ELLIOTT AVE, SEATTLE, WA 98121 CONSULTING-SEE PART IV Х 0 79,663 -79,663. RUFFALO, NOEL, LEVITZ - 1025 KIRKWOOD PKWY, CEDAR RAPIDS CONSULTING-SEE PART IV Х 0. 86,762 -86,762. WASHBURN & MCGOLDRICK - 24 N BRYN MAWR AVENUE, BRYN MAWR CONSULTING-SEE PART IV Х 0. -45,000. 45,000 285,236, 438 972 -153736Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing AL, AK, AR, CO, CT, FL, GA, IN, KS, KY, MD, MI, MN, MS, NJ, NH, NM, NC, ND, OH, OK, PA, RI, SC, TN UT, VA, WV, HI, CA, DC, IL, MA, ME, NV, OR, WA, WI

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

Schedule G (Form 990) 2021

SEE PART IV FOR CONTINUATIONS

_			OF PITTSBURGH			965591 Page 2
Pa	art		_			
		of fundraising event contributions and gr				ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			20TH ANNUAL DEAN'S			(add col. (a) through
				DEAN'S CIRCLE	9	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	108,558.	51,650.	160,293.	320,501.
	2	Less: Contributions	58,658.	36,650.	117,088.	212,396.
	3	Gross income (line 1 minus line 2)	49,900.	15,000.	43,205.	108,105.
	4	Cash prizes				
ω	5	Noncash prizes			87.	87.
pense	6	Rent/facility costs	5,670.		157,209.	162,879.
Direct Expenses	7	Food and beverages	28,191.		88,596.	116,787.
Ц	8	Entertainment	3,500.			3,500.
	9	Other direct expenses			75,799.	104,911.
	10	Direct expense summary. Add lines 4 through			•	388,164.
	11	· · · · · · · · · · · · · · · · · · ·			_	-280,059.
Pa	art I		answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		1		
				(b) Pull tabs/instant		(al) Tatal aramainan (a alal
/enne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue	(a) Bingo		(c) Other gaming	
_		Gross revenue				col. (a) through col. (c))
_	2				243,740.	col. (a) through col. (c)) 243,740.
Direct Expenses Revenue	2	Cash prizes			243,740.	col. (a) through col. (c)) 243,740.
ct Expenses	2	Cash prizes Noncash prizes		bingo/progressive bingo	243,740. 107,795. 46,445.	col. (a) through col. (c)) 243,740.
ct Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs		bingo/progressive bingo	243,740. 107,795.	col. (a) through col. (c)) 243,740. 107,795.
ct Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	Yes%	bingo/progressive bingo Yes%	243,740. 107,795. 46,445. Yes% No	col. (a) through col. (c)) 243,740. 107,795.
ct Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes% No h 5 in column (d)	bingo/progressive bingo Yes% No	243,740. 107,795. 46,445. Yes% X No	col. (a) through col. (c)) 243,740. 107,795.
o Direct Expenses	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct the organization licensed to conduct gaming a	Yes% No h 5 in column (d) from line 1, column (d) ucts gaming activities: Pctivities in each of these	yes % No	243,740. 107,795. 46,445. Yes % X No	243,740. 243,740. 107,795. 46,445. 154,240. 89,500.
o Direct Expenses	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through the gaming income summary. Subtract line 7 ter the state(s) in which the organization conditions.	Yes% No h 5 in column (d) from line 1, column (d) ucts gaming activities: Pctivities in each of these	yes % No	243,740. 107,795. 46,445. Yes % X No	243,740. 243,740. 107,795. 46,445. 154,240. 89,500.
Boot Expenses	2 3 4 5 6 7 8 Ent 1 Is 1 West	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct organization licensed to conduct gaming a line," explain: ere any of the organization's gaming licenses related to the organization licenses related to the organization.	Yes% No h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: P. ctivities in each of these evoked, suspended, or t	Yes% No A states? erminated during the tax	243,740. 107,795. 46,445. Yes% X No	243,740. 243,740. 107,795. 46,445. 154,240. 89,500.
Boot Expenses	2 3 4 5 6 7 8 Ent 1 Is 1 West	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct the organization licensed to conduct gaming a No," explain:	Yes% No h 5 in column (d) 7 from line 1, column (d) ucts gaming activities: P. ctivities in each of these evoked, suspended, or t	Yes% No A states? erminated during the tax	243,740. 107,795. 46,445. Yes% X No	243,740. 243,740. 107,795. 46,445. 154,240. 89,500.

132082 10-21-21 Schedule G (Form 990) 2021

Sch	nedule G (Form 990) 2021 UNIVERSITY OF PITTSBURGH 25-	0965591		Page 3
11	Does the organization conduct gaming activities with nonmembers?	х	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	🖳	Yes	X No
13	Indicate the percentage of gaming activity conducted in:			
a	a The organization's facility	13a		58.80 %
	o An outside facility	13b		41.20 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name RYAN VARLEY			
	Address ▶ 3105 PETERSEN EVENTS CENTER - PITTSBURGH, PA 15260			
	- Address P			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	х	Yes	☐ No
k	If "Yes," enter the amount of gaming revenue received by the organization > \$89,500. and the amount			
	of gaming revenue retained by the third party \blacktriangleright \$46,445.			
c	If "Yes," enter name and address of the third party:			
	Name SEE PART IV			
	Address ▶			
16	Gaming manager information:			
	Name SEE PART IV			
	Gaming manager compensation > \$			
	Description of convices averyided			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	X No
k	n Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	е		
_	organization's own exempt activities during the tax year ▶ \$ 0.			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	l Part III, I	ines 9	, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
SCH	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
(T)	NAME OF FUNDRAISER: DAVINCI DIRECT, INC.			
	NAME OF FORDRATISER. DAVINGS DIRECT, INC.			
(I)	ADDRESS OF FUNDRAISER:			
36	CORDAGE PARK CIRCLE SUITE 339, PLYMOUTH, MA 02360			
	·			
(I)	NAME OF FUNDRAISER: PLUS DELTA PARTNERS			
<u>(I)</u>	ADDRESS OF FUNDRAISER: 6965 EL CAMINO REAL, CARLSBAD, CA 92009			

Schedule G (Form 990)

CARNEGIE, PA 15106

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** 25-0965591 UNIVERSITY OF PITTSBURGH Part I **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) NEW YORK UNIVERSITY 726 BROADWAY- 9TH FL 13-5562308 RESEARCH- SUBCONTRACT NEW YORK, NY 10003 501(C)(3) 17,074,410 0 CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE PITTSBURGH, PA 15213 25-0969449 501(C)(3) 7,692,987 RESEARCH- SUBCONTRACT UNIVERSITY OF ILLINOIS 506 S WRIGHT ST URBANA, IL 61801 37-6000511 1115 5 049 445 0 RESEARCH- SUBCONTRACT REGENTS OF THE UNIVERSITY OF CALIFORNIA - 1111 FRANKLIN ST 10TH FL - OAKLAND CA 94607 94-3067788 115 4 964 719 RESEARCH- SUBCONTRACT REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 S STATE ST - ANN 38-6006309 RESEARCH- SUBCONTRACT ARBOR, MI 48109 115 4,004,581 0 WASHINGTON UNIVERSITY IN ST. LOUIS 7425 FORSYTH WEST CAMPUS CLAYTON, MO 63105 43-0653611 501(C)(3) 2 732 695 0 RESEARCH- SUBCONTRACT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 304. 24. 3 Enter total number of other organizations listed in the line 1 table

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

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHAM AND WOMENS HOSPITAL INC							
75 FRANCIS ST							
BOSTON, MA 02115	04-2312909	501(C)(3)	2,717,817.	0.			RESEARCH- SUBCONTRACT
JOHNS HOPKINS UNIVERSITY							
1101 EAST 33RD ST							
BALTIMORE, MD 21218	52-0595110	501(C)(3)	2,509,503.	0.			RESEARCH- SUBCONTRACT
NORTHEASTERN UNIVERSITY							
360 HUNTINGTON AVE							
BOSTON, MA 02115	04-1679980	501(C)(3)	1,833,502.	0.			RESEARCH- SUBCONTRACT
MASSACHUSETTS GENERAL HOSPITAL							
55 FRUIT ST							
BOSTON, MA 02114	04-1564655	501(C)(3)	1,778,494.	0.			RESEARCH- SUBCONTRACT
	01 1001000		2,770,1310	-			20201111101
VANDERBILT UNIVERSITY MEDICAL							
CENTER - 2525 WEST END AVE STE 450							
- NASHVILLE, TN 37203	35-2528741	501(C)(3)	1,728,618.	0.			RESEARCH- SUBCONTRACT
BOARD OF REGENTS OF THE UNIVERSITY							
OF WISCONSIN SYSTEM - 700 REGENT							
ST, STE 301 - MADISON, WI 53715	39-1805963	115	1,697,839.	0.			RESEARCH- SUBCONTRACT
			, , ,				
UNIVERSITY OF CHICAGO							
6054 S DREXEL AVE NO 300							
CHICAGO, IL 60637	36-2177139	501(C)(3)	1,688,610.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MARYLAND							
PO BOX 41428							
BALTIMORE, MD 21203-6248	52-6002033	115	1,688,589.	0.			RESEARCH- SUBCONTRACT
VERSITI WISCONSIN, INC							
PO BOX 2178	30 0007035	E01/G)/3)	1 635 443	_			DEGENDAN GYPROYMEN ST
MILWAUKEE, WI 53201	39-0807235	bot(c)(3)	1,637,419.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990) UNIVERSITY OF							5-0965591 Page
Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD UNIVERSITY							
1033 MASSACHUSETTS AVE STE 3	04-2103580	501(C)(3)	1 501 402	0.			RESEARCH- SUBCONTRACT
CAMBRIDGE, MA 02138 TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - P221 FRANKLIN 3451 WALNUT ST - PHILADELPHIA, PA	04-2103380	501(C)(3)	1,591,402.	0.			RESEARCH SUBCONTRACT
19104-6205	23-1352685	501(C)(3)	1,567,948.	0.			RESEARCH- SUBCONTRACT
OHIO STATE UNIVERSITY RESEARCH FOUNDATION - 1960 KENNY RD -							
COLUMBUS, OH 43210	31-6401599	501(C)(3)	1,567,544.	0.			RESEARCH- SUBCONTRACT
CONSORTIUM FOR PUBLIC EDUCATION 410 9TH ST							
MCKEESPORT, PA 15132	25-1533592	501(C)(3)	1,550,309.	0.			RESEARCH- SUBCONTRACT
MED-ALLY LLC PO BOX 975							
GOOSE CREEK, SC 29445	45-4662780	N/A	1,390,726.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER - 3500 CAMP BOWIE							
BLVD - FORT WORTH, TX 76107	71-0986983	501(C)(3)	1,336,888.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF FLORIDA PO BOX 115500							
GAINESVILLE, FL 32611	59-6002052	501(C)(3)	1,229,382.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTHERN CALIFORNIA 837 W. DOWNEY WAY RM 315							
LOS ANGELES, CA 90089	95-1642394	501(C)(3)	1,164,978.	0.			RESEARCH- SUBCONTRACT
WEILL MEDICAL COLLEGE 1300 YORK AVE							
NEW YORK, NY 10021	13-1623978	501(C)(3)	1,136,408.	0.			RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ALBERT EINSTEIN COLLEGE OF MEDICINE - 500 WEST 185TH ST - NEW YORK, NY 10033 23-7075620 501(C)(3) 1,127,359 0 RESEARCH- SUBCONTRACT TRUSTEES OF COLUMBIA UNIVERSITY 615 W 131ST ST NEW YORK, NY 10027 13-5598093 501(C)(3) 1,119,670 0 RESEARCH- SUBCONTRACT INDIANA UNIVERSITY 400 E 7TH ST RM 501 BLOOMINGTON, IN 47405 35-6001673 115 1,092,491 0 RESEARCH- SUBCONTRACT THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON - 7000 FANNIN ST - HOUSTON, TX 75303 74-1761309 115 1,076,784 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - 104 AIRPORT DR -CHAPEL HILL, NC 27599 56-6001393 992,389 RESEARCH- SUBCONTRACT 115 0 COMMUNITY HUMAN SERVICES CORP 374 LAWN ST PITTSBURGH, PA 15213 25-1219610 501(C)(3) 975,398 RESEARCH- SUBCONTRACT 0 WEST VIRGINIA UNIVERSITY RESEARCH CORP - PO BOX 6005 - MORGANTOWN 55-0665758 WV 26506 501(C)(3) 971 688 0 RESEARCH- SUBCONTRACT YALE UNIVERSITY 47 COLLEGE ST STE 203 NEW HAVEN, CT 06520 06-0646973 501(C)(3) 946,380 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CALIFORNIA DAVIS 202 COUSTEAU PL STE 185 DAVIS, CA 95617 94-6036494 115 940,318 RESEARCH- SUBCONTRACT 0

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Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA STATE UNIVERSITY							
UNIVERSITY PARK, PA 16802	24-6000376	115	903,527.	0.			RESEARCH- SUBCONTRACT
KUMC RESEARCH INSTITUTE INC 300 EXECUTIVE DR STE 150 WEST ORANGE, NJ 07052	48-1108830	501(C)(3)	900,020.	0.			RESEARCH- SUBCONTRACT
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE							
CLEVELAND, OH 44106	34-1018992	501(C)(3)	896,380.	0.			RESEARCH- SUBCONTRACT
RUSH UNIVERSITY MEDICAL CENTER 1700 W VAN BUREN RM 150							
CHICAGO, IL 60612	36-2174823	501(C)(3)	893,687.	0.			RESEARCH- SUBCONTRACT
CARNEGIE FOUNDATION FOR THE ADVANCEMENT OF TEACHING - 51 VISTA							
LN - STANFORD, CA 94305	13-1623924	501(C)(3)	868,844.	0.			RESEARCH- SUBCONTRACT
BOARD OF TRUSTEES LELAND STANFORD UNIVERSITY - 3145 PORTER DR - PALO							
ALTO, CA 94304	94-1156365	501(C)(3)	847,713.	0.			RESEARCH- SUBCONTRACT
THERMAQUIL INC 1020 WALNUT ST							
PHILADELPHIA, PA 19107	82-3445801	N/A	807,810.	0.			RESEARCH- SUBCONTRACT
WILLIAM MARSH RICE UNIVERSITY 6100 MAIN ST							
HOUSTON, TX 77005	74-1109620	501(C)(3)	792,677.	0.			RESEARCH- SUBCONTRACT
RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY - 65 DAVIDSON RD- RM							
317 - PISCATAWAY, NJ 08854	22-6001086	115	751,476.	0.			RESEARCH- SUBCONTRACT

Part II Continuation of Grants and Other	r Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	- Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OHIO STATE UNIVERSITY							
154 WEST 12TH AVE							
COLUMBUS, OH 43210	31-6025986	115	729,301.	0.			RESEARCH- SUBCONTRACT
NORTHWESTERN UNIVERSITY							
619 CLARK ST RM 217							
EVANSTON, IL 60208	36-2167817	501(C)(3)	724,000.	0.			RESEARCH- SUBCONTRACT
MAGEE-WOMENS RESEARCH INSTITUTE AND FOUNDATION - 3339 WARD ST -							
PITTSBURGH, PA 15213	25-1462312	501(C)(3)	721,305.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CINCINNATI 500 UNIVERSITY HALL							
CINCINNATI, OH 45221	31-6000989	115	711,374.	0.			RESEARCH- SUBCONTRACT
MAYO CLINIC ROCHESTER 200 FIRST ST SW							
ROCHESTER, MN 55905	41-6011702	501(C)(3)	695,751.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MASSACHUSETTS 225 FRANKLIN ST							
BOSTON, MA 02110	04-3167352	115	686,563.	0.			RESEARCH- SUBCONTRACT
VITALANT PO BOX 1867							
SCOTTSDALE, AZ 85252	86-0098929	501(C)(3)	671,893.	0.			RESEARCH- SUBCONTRACT
EMORY UNIVERSITY 201 DOWAN DR							
201 DOWAN DR ATLANTA, GA 30322	58-0566256	501(C)(3)	633,918.	0.			RESEARCH- SUBCONTRACT
MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE LEVY PL			111,710.	•			
NEW YORK, NY 10029	13-6171197	501(C)(3)	623,409.	0.			RESEARCH- SUBCONTRACT

Part II Continuation of Grants and Other							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF VERMONT							
850 SO PROSPECT ST RM 333							
BURLINGTON, VT 05405	03-0179440	115	617,915.	0.			RESEARCH- SUBCONTRACT
HENRY M JACKSON FOUNDATION							
6720 ROCKLEDGE DR STE A							
BETHESDA, MD 20817	52-1317896	501(C)(3)	616,331.	0.			RESEARCH- SUBCONTRACT
TURTLE CREEK VALLEY MH/MR INC							
723 BRADDOCK AVE							
BRADDOCK, PA 15104	25-1250510	501(C)(3)	611,464.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEBRASKA MEDICAL							
CENTER - 987835 NEBRASKA MEDICAL							
CENTER - OMAHA, NE 68198	47-0771713	115	610,357.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF UTAH							
540 ARAPEEN DR, STE 250							
SALT LAKE CITY, UT 84108	87-6000525	115	608,013.	0.			RESEARCH- SUBCONTRACT
FRED HUTCHINSON CANCER RESEARCH							
1100 FAIRVIEW AVE NORTH							
SEATTLE, WA 98109	23-7156071	501(C)(3)	578,859.	0.			RESEARCH- SUBCONTRACT
GLOBAL COALITION FOR ADAPTIVE							
RESEARCH INC - PO BOX 49272 - LOS							
ANGELES, CA 90049	82-1199380	501(C)(3)	566,718.	0.			RESEARCH- SUBCONTRACT
,			, ,				
UNIVERSITY OF MISSOURI COLUMBIA							
15 JESSE HALL							
COLUMBIA, MO 65211	43-6003859	115	566,075.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF COLORADO							
1800 N GRANT ST							
DENVER, CO 80203	84-6000555	115	566,040.	0.			RESEARCH- SUBCONTRACT

(a) Name and 11	(L) = (L)	(-) IDC ''	(al) A	(-) A	(6) 1 (-2)	(-) D : :: :	(h) D
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF DELAWARE							
83 E. MAIN ST, 3RD FL							
NEWARK, DE 19716	51-6000297	115	559,772.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ALABAMA AT							
BIRMINGHAM - 1530 3RD AVE -							
BIRMINGHAM, AL 35294	63-6005396	115	536,350.	0.			RESEARCH- SUBCONTRACT
OREGON HEALTH & SCIENCE UNIVERSITY							
FOUNDATION - 1121 SW SALMON ST -							
PORTLAND, OR 97205	23-7083114	501(C)(3)	533,078.	0.			RESEARCH- SUBCONTRACT
FOCUS ON RENEWAL							
701 CHARTIERS AVE							
MCKEES ROCKS, PA 15136	23-7181440	501(C)(3)	526,414.	0.			RESEARCH- SUBCONTRACT
,			1,				
UNIVERSITY OF TEXAS HEALTH SCIENCE							
CENTER - 7703 FLOYD CURL DR - SAN							
ANTONIO, TX 78229	74-1586031	115	512,658.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF KENTUCKY RESEARCH							
FOUNDATION - 301 PETERSON SERVICE							
BUILDING - LEXINGTON, KY 40506	61-6033693	501(C)(3)	497,452.	0.			RESEARCH- SUBCONTRACT
,			, , , ,				
VETERANS RESEARCH FOUNDATION OF							
PITTSBURGH - 7180 HIGHLAND DR -							
PITTSBURGH, PA 15206	25-1666090	501(C)(3)	495,503.	0.			RESEARCH- SUBCONTRACT
GRODGEROUN, INTERPRETARY							
GEORGETOWN UNIVERSITY							
37TH O ST NW STE 400	53-0196603	E01/G)/3)	402 205	0.			DECEMBON GIROOMERACE
WASHINGTON, DC 20057	23-0130003	DOT(C)(3)	493,285.	0.		+	RESEARCH- SUBCONTRACT
DANA-FARBER CANCER INSTITUTE							
44 BINNER ST STE BP600							
BOSTON, MA 02115	04-2263040	501(C)(3)	489,104.	0.			RESEARCH- SUBCONTRACT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	1
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INSIGHT POLICY RESEARCH INC							
1901 N MOORE ST							
ARLINGTON, VA 22209	52-2300796	N/A	479,877.	0.			RESEARCH- SUBCONTRACT
COMMUNITY HEALTH AND SOCIAL							
SERVICES CENTER INC - 5635 W FORT							
ST - DETROIT, MI 48209	38-3094394	501(C)(3)	466,251.	0.			RESEARCH- SUBCONTRACT
TEMPLE UNIVERSITY OF THE							
COMMONWEALTH SYSTEM OF HIGHER							
EDUCATION - 1805 N BROAD -							
PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	449,946.	0.			RESEARCH- SUBCONTRACT
VANDERBILT UNIVERSITY							
VU STATION B BOX 356310							
NASHVILLE, TN 37235	62-0476822	501(C)(3)	442,822.	0.			RESEARCH- SUBCONTRACT
INOVA HEALTH CARE SERVICES							
2832 JUNIPER ST STE 104							
FAIRFAX, VA 22031	54-0620889	501(C)(3)	440,922.	0.			RESEARCH- SUBCONTRACT
	31 0020003	301(0)(3)	110,322.	•			REDEFICE BODOWING
UNIVERSITY OF ARIZONA							
888 N EUCLID AVE							
TUCSON, AZ 85722-3607	74-2652689	115	429,648.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS-MD ANDERSON							
CANCER CENTER - PO BOX 4930 -							
HOUSTON, TX 77210-4390	74-6001118	115	428,425.	0.			RESEARCH- SUBCONTRACT
VIRGINIA COMMONWEALTH UNIVERSITY							
800 EAST LEHIGH ST			440.555				
RICHMOND, VA 23219	54-6001758	115	418,293.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF SOUTH CAROLINA							
1600 HAMPTON ST							
COLUMBIA, SC 29208	57-6001153	115	410,426.	0.			RESEARCH- SUBCONTRACT
	7, 0001133	<u> </u>	1 410,420.	<u> </u>	<u> </u>		RESEARCH SUBCONTRACT

Page 1 Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) KAISER FOUNDATION HOSPITALS CENTER FOR HEALTH RESEARCH - ONE KAISER PLAZA - OAKLAND, CA 94612 94-1105628 501(C)(3) 394,392 0 RESEARCH- SUBCONTRACT BOSTON UNIVERSITY 595 COMMONWEALTH AVE STE 700 BOSTON, MA 02215 04-2103547 501(C)(3) 394,133 0 RESEARCH- SUBCONTRACT UNIVERSITY OF MIAMI PO BOX 248106 CORAL GABLES, FL 33124 59-0624458 501(C)(3) 377,768 0 RESEARCH- SUBCONTRACT OREGON RESEARCH INSTITUTE 1776 MILLRACE DR EUGENE, OR 97403 93-0495655 501(C)(3) 355,086 0 RESEARCH- SUBCONTRACT DUKE UNIVERSITY 324 BLACKWELL ST DURHAM, NC 27708 RESEARCH- SUBCONTRACT 56-0532129 501(C)(3) 354,964 0 BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA NO T100 HOUSTON, TX 77030 74-1613878 501(C)(3) RESEARCH- SUBCONTRACT 348,639 0 UNIVERSITY OF LOUISVILLE 2301 S 3RD ST LOUISVILLE, KY 40208 61-1014882 501(C)(3) 341 669 0 RESEARCH- SUBCONTRACT UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DR SAN DIEGO, CA 92093 95-6006144 115 336,495 0 RESEARCH- SUBCONTRACT HOWARD UNIVERSITY 576 W ST NW WASHINGTON, DC 20059 53-0204707 501(C)(3) 333,231 RESEARCH- SUBCONTRACT 0

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON							
GERBERDING HALL G80							
SEATTLE, WA 98195	91-6001537	115	315,879.	0.			RESEARCH- SUBCONTRACT
WAKE FOREST UNIVERSITY							
1834 WAKE FOREST RD							
WINSTON-SALEM, NC 27106	56-0532138	501(C)(3)	298,774.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF VIRGINIA							
BOX 4001953							
CHARLOTTESVILLE, VA 22904	54-6001786	115	298,067.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF LOUISVILLE RESEARCH							
FOUNDATION - 2215 S BROOK ST -	64 4000606	504 (5) (2)	004.040				
LOUISVILLE, KY 40208	61-1029626	501(C)(3)	294,013.	0.			RESEARCH- SUBCONTRACT
TRUSTEES OF PRINCETON UNIVERSITY							
WASHINGTON ROAD							
PRINCETON, NJ 08544	21-0634501	501(C)(3)	285,355.	0.			RESEARCH- SUBCONTRACT
THINGEIGN, NO UUUTI	21 0031301	301(0)(3)	203,333.	•••			Madamen Bobeshimer
UNIVERSITY OF CALIFORNIA SANTA							
BARBARA - 3201 SAASB BUILDING -							
SANTA BARBARA, CA 93106	95-6006145	115	284,011.	0.			RESEARCH- SUBCONTRACT
·			·				
UNIVERSITY OF CALIFORNIA SAN							
FRANCISCO - 220 MONTGOMERY ST, 5TH							
FL - SAN FRANCISCO, CA 94104	94-6036493	115	280,537.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS MEDICAL BRANCH							
OFFICE OF SPONSORED PROGRAMS PO							
BOX 4786-750 - HOUSTON, TX							
77210-4786	74-6000949	115	269,077.	0.			RESEARCH- SUBCONTRACT
AGGRAGION GEMON							
ASCENSION SETON							
1345 PHILOMENA ST	T4 1100610	501/61/21	0.60 4.00				
AUSTIN, TX 78723	74-1109643	bot(c)(3)	268,133.	0.		1	RESEARCH- SUBCONTRACT

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					7 7		
NEED							
429 FOURTH AVE 20TH FL	05 6050001	E01/G)/2)	0.50 400	0			
PITTSBURGH, PA 15219	25-6070821	501(C)(3)	260,400.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS SOUTHWESTERN							
MEDICAL CENTER - 5323 HARRY HINES							
BLVD DALLAS, TX 75390	75-6002868	115	254,937.	0.			RESEARCH- SUBCONTRACT
·			·				
DENVER HEALTH AND HOSPITAL							
AUTHORITY - 777 BANNOCK ST -							
DENVER, CO 80204	84-1343242	115	251,531.	0.			RESEARCH- SUBCONTRACT
AMIDA TECHNOLOGY SOLUTIONS INC							
1640 RHODE ISLAND AVE. NW SE 650	4.5 0000040		050.000				
WASHINGTON, DC 20036	46-2882019	N/A	250,000.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL OF							
PHILADELPHIA - 3615 CIVIC CENTER							
BLVD - PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	241,281.	0.			RESEARCH- SUBCONTRACT
GEORGIA TECH RESEARCH CORP							
550 TENTH ST NW							
ATLANTA, GA 30332	58-0603146	501(C)(3)	236,526.	0.			RESEARCH- SUBCONTRACT
TULANE UNIVERSITY							
6823 ST CHARLES AVE							
NEW ORLEANS, LA 70118	72-0423889	501(C)(3)	228,545.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS AT AUSTIN							
PO BOX 7458							
AUSTIN, TX 78713-7458	74-6000203	115	225,262.	0.			RESEARCH- SUBCONTRACT
	74-0000203	<u> </u>	223,202.	0.			RESEARCH SUBCONTRACT
HEKTOEN INSTITUTE FOR MEDICAL							
RESEARCH LLC - 1339 S WOOD ST NO G							
- CHICAGO, IL 60608	36-2244897	501(C)(3)	224,842.	0.			RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) CITY OF HOPE 1500 E DUARTE RD DUARTE, CA 91010 95-3435919 501(C)(3) 224,766 0 RESEARCH- SUBCONTRACT HEALTH FEDERATION OF PHILADELPHIA 1211 CHESTNUT ST STE 801 PHILADELPHIA, PA 19107 23-2244355 501(C)(3) 224,473 0 RESEARCH- SUBCONTRACT BETH ISRAEL DEACONESS MEDICAL CENTER - 300 BROOKLINE AVE -BOSTON, MA 02215 04-2103881 501(C)(3) 215,614 0 RESEARCH- SUBCONTRACT TIES TEACHING INSTITUTE FOR EXCELLENCE IN STEM LLC - PO BOX 18050 - CLEVELAND HEIGHTS, OH 44118 33-1014138 213,548 0 RESEARCH- SUBCONTRACT N/A WEST VIRGINIA UNIVERSITY PO BOX 6005 55-6000842 0 RESEARCH- SUBCONTRACT MORGANTOWN, WV 26506 115 213,351 EAST CAROLINA UNIVERSITY 209 E 5TH ST GREENVILLE, NC 27858 56-6000403 RESEARCH- SUBCONTRACT 115 210,799 0 CHRISTIANA CARE HEALTH SERVICES PO BOX 2653 WILMINGTON, DE 19805 51-0103684 501(C)(3) 204,413 0 RESEARCH- SUBCONTRACT SAN FRANCISCO STATE UNIVERSITY 1600 HOLLOWAY AVE ADM 471 SAN FRANCISCO, CA 94132 93-1137247 115 200,337. 0 RESEARCH- SUBCONTRACT NATIONAL MARROW DONOR PROGRAM 500 N 5TH ST MINNEAPOLIS, MN 55401 84-0865803 501(C)(3) 199,885 0 RESEARCH- SUBCONTRACT

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Schedule I (Form 990) UNIVERSITY OF Part II Continuation of Grants and Other		mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990) Da		o-0965591 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCRIPPS RESEARCH INSTITUTE 10550 N TORREY PINES RD LA JOLLA, CA 92037	33-0435954	501(C)(3)	197,747.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000642	115	186,458.	0.			RESEARCH- SUBCONTRACT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVE NE 49-3131 - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	181,845.	0.			RESEARCH- SUBCONTRACT
RAYTHEON TECHNOLOGIES RESEARCH CENTER - 10 FARM SPRINGS RD - FARMINGTON, CT 06032	06-0570975	N/A	179,668.	0.			RESEARCH- SUBCONTRACT
WAKE FOREST UNIVERSITY SCHOOL OF MEDICINE - MEDICAL CENTER BLVD - WINSTON-SALEM, NC 27157	22-3849199	501(C)(3)	179,103.	0.			RESEARCH- SUBCONTRACT
GEISINGER CLINIC N ACADEMY AVE DANVILLE, PA 17822	23-6291113	501(C)(3)	177,292.	0.			RESEARCH- SUBCONTRACT
WESTERN INSTITUTE FOR BIOMEDICAL RESEARCH - PO BOX 58719 - SALT LAKE CITY, UT 84158	87-0470748	501(C)(3)	175,489.	0.			RESEARCH- SUBCONTRACT
DARTMOUTH COLLEGE 6066 DEVELOPMENT OFFICE HANOVER, NH 03755	02-0222111	501(C)(3)	172,664.	0.			RESEARCH- SUBCONTRACT
THOMAS JEFFERSON UNIVERSITY 1101 MARKET ST PHILADELPHIA, PA 19107	23-1352651	115	169,328.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990) UNIVERSITY OF		maatia Organizatian	a and Damastic O	avaramanta (C-b	adula I (Farm 000) Da		5-0965591 Page
Part II Continuation of Grants and Other							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS TECH UNIVERSITY HEALTH							
SCIENCES CENTER - BOX 41023 -							
LUBBOCK, TX 79409-1023	75-6002622	115	153,099.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL LOS ANGELES							
4650 SUNSET BLVD							
LOS ANGELES, CA 90027	95-1690977	501(C)(3)	152,558.	0.			RESEARCH- SUBCONTRACT
GEORGE MASON UNIVERSITY							
4400 UNIVERSITY DR							
FAIRFAX, VA 22030	54-0836354	115	145,723.	0.			RESEARCH- SUBCONTRACT
NATIONWIDE CHILDRENS HOSPITAL							
700 CHILDRENS DR							
COLUMBUS, OH 43205	31-4379441	501(C)(3)	141,016.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF							
CALIFORNIA MERCED - 5200 N LAKE RD							
- MERCED, CA 95343	27-0093858	115	138,083.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NEVADA, RENO							
2601 ENTERPRISE RD							
RENO, NV 89512	88-6000024	115	137,448.	0.			RESEARCH- SUBCONTRACT
MICHIGAN STATE UNIVERSITY							
301 ADMIN BLDG.							
EAST LANSING, MI 48824	38-6005984	501(C)(3)	134,174.	0.			RESEARCH- SUBCONTRACT
THE GOG FOUNDATION INC							
3168 BRAVERTON ST STE 280	02 0466252	E01/G)/3)	121 (11	_			DEGENDAL GUDGONMDAGM
EDGEWATER, MD 21037	03-0466352	DOT(C)(3)	131,611.	0.			RESEARCH- SUBCONTRACT
ST LOUIS UNIVERSITY							
ONE NORTH GRAND BLVD							
ST LOUIS, MO 63103	43-0654872	р01(C)(3)	130,207.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990) UNIVERSITY OF PITTSBURGH 25-0965591 Page 1

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHELL GAMES LLC							
220 W STATION SQ DR							
PITTSBURGH, PA 15219	84-1616744	N/A	130,000.	0.			RESEARCH- SUBCONTRACT
SALK INSTITUTE							
10010 N TORREY PINES RD							
LA JOLLA, CA 92037-1099	95-2160097	501(C)(3)	129,236.	0.			RESEARCH- SUBCONTRACT
SHARP MEMORIAL HOSPITAL							
8695 SPECTRUM CENTER BLVD							
SAN DIEGO, CA 92123	95-3782169	501(C)(3)	127,335.	0.			RESEARCH- SUBCONTRACT
ARISTOSYS LLC							
208 FOX RUN DR							
VENETIA, PA 15367	82-0893712	N/A	124,197.	0.			RESEARCH- SUBCONTRACT
REGENTS OF THE UNIVERSITY OF							
MINNESOTA - 2221 UNIVERSITY AVE SE							
- MINNEAPOLIS, MN 55414	41-6007513	115	120,373.	0.			RESEARCH- SUBCONTRACT
,							
PALO ALTO VETERANS INSTITUTE FOR							
RESEARCH - 3801 MIRANDA AVE - PALO							
ALTO, CA 94304	77-0207331	501(C)(3)	120,324.	0.			RESEARCH- SUBCONTRACT
BON MIJEDADEUMIOG ING							
ECM THERAPEUTICS INC 118 MARSHALL DR							
WARRENDALE, PA 15089	83-3490187	N/A	114,654.	0.			RESEARCH- SUBCONTRACT
MARKEMUADE, FA 13003	03-343010/	N/A	114,654.	0.			NESEARCH- SUBCONTRACT
DREXEL UNIVERSITY							
3201 ARCH ST NO. 420							
PHILADELPHIA, PA 19104-2875	23-1352630	501(C)(3)	114,252.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF IOWA							
201 GILMORE HALL	40 602.225	504 (5) (2)	4.5.5.5	_			
IOWA CITY, IA 52242	42-6004813	P01(C)(3)	113,042.	0.			RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) MICHAEL BAKER INTERNATIONAL INC 500 GRANT ST STE 5400 PITTSBURGH, PA 15219 25-1228638 105,660 0 RESEARCH- SUBCONTRACT N/A NORTH CAROLINA STATE UNIVERSITY CAMPUS BOX 7214 RALEIGH, NC 27695 56-6000756 115 104,866 0 RESEARCH- SUBCONTRACT UNIVERSITY OF ROCHESTER PO BOX 278893 ROCHESTER, NY 14627 16-0743209 501(C)(3) 103,875 0 RESEARCH- SUBCONTRACT WAYNE STATE UNIVERSITY 5700 CASS AVE DETROIT, MI 48202 38-3555142 501(C)(3) 103,570 0 RESEARCH- SUBCONTRACT COLD SPRING HARBOR LABORATORY 1 BUNGTOWN RD 0 RESEARCH- SUBCONTRACT COLD SPRING HARBOR, NY 11724 11-2013303 501(C)(3) 102,403 LEHIGH UNIVERSITY 306 S NEW ST STE 451 BETHLEHEM, PA 18015 24-0795445 501(C)(3) RESEARCH- SUBCONTRACT 99,677 0 VAN ANDEL RESEARCH INSTITUTE 333 BOSTWICK AVE NE 52-2000823 GRAND RAPIDS, MI 49503 501(C)(3) 98 832 0 RESEARCH- SUBCONTRACT CORNELL UNIVERSITY 341 PINE ST ITHACA, NY 14850 15-0532082 501(C)(3) 98,124 0 RESEARCH- SUBCONTRACT ADVENTIST HEALTH SYSTEM-SUNBELT INC - 601 E ROLLINS ST - ORLANDO FL 32803 59-0724459 501(C)(3) 97,037 0 RESEARCH- SUBCONTRACT

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UNIVERSITY OF PITTSBURGH

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	T
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BIOQUEST CURRICULUM CONSORTIUM							
PO BOX 45032							
MADISON, WI 53744	45-3644991	501(C)(3)	96,138.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S HOSPITAL MEDICAL CENTER							
3333 BURNET AVE							
CINCINNATI, OH 45229	31-0833936	501(C)(3)	95,485.	0.			RESEARCH- SUBCONTRACT
CURATORS OF THE UNIVERSITY OF							
MISSOURI - 118 UNIVERSITY HALL -							
COLUMBIA, MO 65211	26-6440629	501(C)(3)	93,661.	0.			RESEARCH- SUBCONTRACT
CHILDREN'S MERCY HOSPITAL							
2401 GILLHAM RD							
KANSAS CITY, MO 64108	44-0605373	501(C)(3)	92,846.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF CALIFORNIA IRVINE							
120 THEORY STE 200							
IRVINE, CA 92617	95-2226406	115	92,531.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TENNESSEE							
201 ANDY HOLT TOWER							
KNOXVILLE, TN 37996	62-6001636	115	87,744.	0.			RESEARCH- SUBCONTRACT
			,				
INTERNATIONAL AIDS VACCINE							
INITATIVE - 125 BROAD STREET NO							
9TH FL - NEW YORK, NY 10004	13-3870223	501(C)(3)	87,644.	0.			RESEARCH- SUBCONTRACT
BROWN UNIVERSITY							
164 ANGELL ST							
PROVIDENCE, RI 02912	05-0258809	501(C)(3)	85,191.	0.			RESEARCH- SUBCONTRACT
,			<u> </u>				
UNIVERSITY OF TOLEDO							
2801 W BANCROFT ST							
TOLEDO, OH 43606	34-6401483	115	85,068.	0.			RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) OREGON STATE UNIVERSITY 104 KERR ADMIN BLDG CORVALLIS, OR 97331 61-1730890 115 85,067 0 RESEARCH- SUBCONTRACT RESEARCH FOUNDATION FOR STATE UNIVERSITY OF NEW YORK - PO BOX 9 - ALBANY, NY 12201 14-1368361 501(C)(3) 84,921 0 RESEARCH- SUBCONTRACT DUOUESNE UNIVERSITY OF THE HOLY SPIRIT - 600 FORBES AVE -PITTSBURGH, PA 15219 25-1035663 501(C)(3) 82,308 0 RESEARCH- SUBCONTRACT BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVE BOSTON, MA 02115 04-2774441 115 81,061 0 RESEARCH- SUBCONTRACT J CRAIG VENTER INSTITUTE INC 4120 CAPRICORN LN LA JOLLA, CA 92037 52-1842938 RESEARCH- SUBCONTRACT 501(C)(3) 79,432 0 BIRMINGHAM AIDS OUTREACH INC PO BOX 550070 BIRMINGHAM, AL 35255 63-0948495 501(C)(3) RESEARCH- SUBCONTRACT 78,051 0 ALBANY MEDICAL COLLEGE 47 NEW SCOTLAND AVE ALBANY, NY 12208 14-1338310 501(C)(3) 76 876 0 RESEARCH- SUBCONTRACT BROAD INSTITUTE INC 415 MAIN ST CAMBRIDGE, MA 02142 26-3428781 501(C)(3) 76,468 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NOTRE DAME DU LAC 724 GRACE HALL NOTRE DAME, IN 46556 35-0868188 501(C)(3) 76,303 RESEARCH- SUBCONTRACT 0

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(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(2, 2	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
CLEVELAND STATE UNIVERSITY							
2121 EUCLID AVE							
CLEVELAND, OH 44115	34-0966056	115	73,361.	0.			RESEARCH- SUBCONTRACT
BOSTON MEDICAL CENTER							
1 BOSTON MEDICAL CENTER PL							
BOSTON, MA 02118	04-3314093	501(C)(3)	72,469.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF ARKANSAS SYSTEM							
1125 W MAPLE ST							
FAYETTEVILLE, AR 72701	71-6003252	115	71,855.	0.			RESEARCH- SUBCONTRACT
THE GENEVA FOUNDATION							
917 PACIFIC AVE							
TAACOMA, WA 98402	91-1593913	501(C)(3)	70,790.	0.			RESEARCH- SUBCONTRACT
UPMC WESTERN BEHAVIORAL HEALTH AT							
SAFE HARBOR - 600 GRANT ST FL 56 -							
PITTSBURGH, PA 15219	25-1317492	501(C)(3)	70,562.	0.			RESEARCH- SUBCONTRACT
			,				
BUCK INSTITUTE FOR RESEARCH ON							
AGING - 8001 REDWOOD BLVD							
NOVATO, CA 94945	94-3030609	501(C)(3)	70,489.	0.			RESEARCH- SUBCONTRACT
OKLAHOMA MEDICAL RESEARCH							
FOUNDATION - 825 NE 13TH ST -							
OKLAHOMA CITY, OK 73104	73-0580274	501(C)(3)	69,521.	0.			RESEARCH- SUBCONTRACT
MEDICAL COLLEGE OF WISCONSIN							
8701 WATERTOWN PLANK RD	30 000000	E01/G)/3)	60 560	_			DEGENDOU GUDGONES CE
MILWAUKEE, WI 53226	39-0806261	DUI(C)(3)	68,562.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF GEORGIA RESEARCH							
FOUNDATION - 310 E CAMPUS RD -							
ATHENS, GA 30602	58-6001998	115	68,023.	0.			RESEARCH- SUBCONTRACT

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
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ALLEGHENY COUNTY TREASURER							
436 GRANT ST							
PITTSBURGH, PA 15222		115	67,521.	0.			RESEARCH- SUBCONTRACT
AMERICAN DENTAL ASSOCIATION INC							
211 EAST CHICAGO AVE							
CHICAGO, IL 60611	41-1105006	501(C)(6)	65,353.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF TEXAS AT SAN ANTONIO							
SAN ANTONIO, TX 78249	74-1717115	115	65,258.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF MISSISSIPPI MEDICAL							
CENTER - 2500 N STATE ST -							
JACKSON, MS 39216	64-6008520	115	65,000.	0.			RESEARCH- SUBCONTRACT
Therefore, Mb 33210	04 0000320	113	05,000.	· ·			KIDEMICH BOBCONIMICI
AETHLON MEDICAL INC							
11555 SORRENTO VALLEY ROAD							
SAN DIEGO, CA 92121	13-3632859	N/A	64,467.	0.			RESEARCH- SUBCONTRACT
RETTEW FIELD SERVICES INC							
3020 COLUMBIA AVE							
LANCASTER, PA 17603	27-2481253	501(C)(3)	64,270.	0.			RESEARCH- SUBCONTRACT
FLORIDA INTERNATIONAL UNIVERSITY							
11200 SW 8TH ST							
MIAMI, FL 33199	65-0177616	115	64,007.	0.			RESEARCH- SUBCONTRACT
MEDICAL UNIVERSITY OF SOUTH							
CAROLINA - 17 ASHLEY AVE -							
CHARLESTON, SC 29403	57-6007222	115	63,123.	0.			RESEARCH- SUBCONTRACT
STATE OF MINNESOTA							
100 REV. DR MARTIN LUTHER KING JR							
SAINT PAUL, MN 55155	41-6007162	115	62,356.	0.			RESEARCH- SUBCONTRACT

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) UPMC CENTER FOR HIGH-VALUE HEALTHCARE - 600 GRANT ST FL 56 -PITTSBURGH, PA 15219 45-2178782 501(C)(3) 61,718 0 RESEARCH- SUBCONTRACT ST LUKES HOSPITAL OF KANSAS CITY 4401 WORNALL RD KANSAS CITY, MO 64111 44-0545297 501(C)(3) 61,684 0 RESEARCH- SUBCONTRACT SICKLE CELL 101 25 RIO ROBIES SAN JOSE, CA 95134 46-4141467 501(C)(3) 59,501 0 RESEARCH- SUBCONTRACT PURDUE UNIVERSITY 403 WEST WOOD ST WEST LAFAYETTE, IN 47907 35-6002041 501(C)(3) 56,936 0 RESEARCH- SUBCONTRACT UNIVERSITY OF TEXAS AT ARLINGTON BOX 19198 701 S NEDDERMAN DR ARLINGTON, TX 76019 75-6000121 0 RESEARCH- SUBCONTRACT 115 56,399 TJPMC: 600 GRANT ST FL 56 PITTSBURGH, PA 15219 25-1423657 501(C)(3) RESEARCH- SUBCONTRACT 56,197 0 UNIVERSITY OF CALIFORNIA SANTA CRUZ - 1156 HIGH ST - SANTA CRUZ CA 95064 94-1539563 115 55 065 0 RESEARCH- SUBCONTRACT UT SOUTHWESTERN 5323 HARRY HINES BLVD. DALLAS, TX 75390 75-2556007 501(C)(3) 53,869 0 RESEARCH- SUBCONTRACT MONTEFIORE MEDICAL CENTER 111 EAST 210TH ST BRONX, NY 10467 13-1740114 501(C)(3) 52,640 0 RESEARCH- SUBCONTRACT

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UNIVERSITY OF PITTSBURGH

Part II Continuation of Grants and Other								
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WASHINGTON DRUG & ALCOHOL								
COMMISSION INC - 90 W CHESTNUT ST								
- WASHINGTON, PA 15301	01-0671144	501(C)(3)	51,335.	0.			RESEARCH- SUBCONTRACT	
ALBERT EINSTEIN HEALTHCARE NETWORK								
5501 OLD YORK RD								
PHILADELPHIA, PA 19141	23-2290323	501(C)(3)	49,338.	0.			RESEARCH- SUBCONTRACT	
GENERAL DYNAMICS INFORMATION								
TECHNOLOGY INC - 3150 FAIRVIEW								
PARK DR - FALLS CHURCH, VA 22042	54-1194322	N/A	48,402.	0.			RESEARCH- SUBCONTRACT	
ALASKA NATIVE TRIBAL HEALTH								
CONSORTIUM - 4000 AMBASSADOR DR -								
ANCHORAGE, AK 99508	92-0162721	501(C)(3)	48,110.	0.			RESEARCH- SUBCONTRACT	
,			,					
CHILDRENS HOSPITAL MEDICAL CENTER								
OF AKRON - ONE PERKINS SQ - AKRON,								
DH 44308	34-0714357	501(C)(3)	46,062.	0.			RESEARCH- SUBCONTRACT	
COMMUNITY-CAMPUS PARTNERSHIPS FOR								
HEALTH - PO BOX 12124 - RALEIGH,								
NC 27605	94-3285533	501(C)(3)	45,577.	0.			RESEARCH- SUBCONTRACT	
MODERATION TO DESCRIPTION OF THE PROPERTY OF T								
MORGRIDGE INSTITUTE FOR RESEARCH INC - 330 N ORCHARD ST - MADISON,								
WI 53715	20-8325570	501(C)(3)	45,482.	0.			RESEARCH- SUBCONTRACT	
			,					
JACKSON LABORATORY								
PO BOX 254								
BAR HARBOR, ME 04609	01-0211513	501(C)(3)	44,812.	0.			RESEARCH- SUBCONTRACT	
OUNGSTOWN STATE UNIVERSITY								
1 UNIVERSITY PLAZA								
YOUNGSTOWN, OH 44555	34-1011998	115	44,449.	0.			RESEARCH- SUBCONTRACT	

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	
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HEALTHY START INC							
400 N LEXINGTON AVE							
PITTSBURGH, PA 15208	25-1691864	501(C)(3)	41,410.	0.			RESEARCH- SUBCONTRACT
CEDARS-SINAI MEDICAL CENTER							
8700 BEVERLY BLVD							
LOS ANGELES, CA 90048	95-1644600	501(C)(3)	41,342.	0.			RESEARCH- SUBCONTRACT
METIS FOUNDATION							
300 CONVENT ST STE 1330							
SAN ANTONIO, TX 78205	47-2219464	501(C)(3)	40,256.	0.			RESEARCH- SUBCONTRACT
RAND CORPORATION							
1776 MAIN ST							
SANTA MONICA, CA 90407	95-1958142	N/A	39,985.	0.			RESEARCH- SUBCONTRACT
MARQUETTE UNIVERSITY							
PO BOX 1881							
MILWAUKEE, WI 53201	39-0806251	501(C)(3)	38,421.	0.			RESEARCH- SUBCONTRACT
HOUSTON METHODIST RESEARCH							
INSTITUTE - 6565 FANNIN ST GB 240							
- HOUSTON, TX 77030	87-0721923	501(C)(3)	37,468.	0.			RESEARCH- SUBCONTRACT
ADE OF DEWOGDAGY I.G							
ART OF DEMOCRACY LLC							
51 ROYCROFT AVE PITTSBURGH, PA 15288	81-0775443	N/A	36,175.	0.			RESEARCH- SUBCONTRACT
FITTSBORGH, FA 15200	01-0775445	N/A	30,173.	0.			RESEARCH SUBCONTRACT
ROBERT MORRIS UNIVERSITY							
6001 UNIVERSITY BLVD							
MOON TOWNSHIP, PA 15108	25-1120678	501(C)(3)	35,718.	0.			RESEARCH- SUBCONTRACT
SUTTER BAY HOSPITALS							
2200 RIVER PLAZA DR							
SACRAMENTO, CA 95833	94-0562680	501(C)(3)	35,433.	0.			RESEARCH- SUBCONTRACT
	1	1 - 1 - 1 - 1 - 1	1 25,255.	· ·	l .	L	C

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa I	rt II.)	1
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UNIVERSITY OF KANSAS							
2385 IRVING HALL							
LAWRENCE, KS 66045	48-1124839	501(C)(3)	35,119.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF NORTH CAROLINA AT							
GREENSBORO - 1000 SPRING GARDEN ST							
- GREENSBORO, NC 27412	56-6001468	115	34,357.	0.			RESEARCH- SUBCONTRACT
AMERICAN INSTITUTES FOR RESEARCH							
1000 THOMAS JEFFERSON ST NW							
WASHINGTON, DC 20007	25-0965219	501(C)(3)	32,721.	0.			RESEARCH- SUBCONTRACT
IHC HEALTH SERVICES INC							
36 S STATE ST							
SALT LAKE CITY, UT 84111	94-2854057	501(C)(3)	30,363.	0.			RESEARCH- SUBCONTRACT
NYU GROSSMAN SCHOOL OF MEDICINE 550 1ST AVE							
NEW YORK, NY 10016	13-5562309	501(C)(3)	30,330.	0.			RESEARCH- SUBCONTRACT
,			11,555				
MAYO CLINIC ARIZONA							
200 FIRST ST SW							
ROCHESTER, MN 55905	86-0800150	501(C)(3)	30,018.	0.			RESEARCH- SUBCONTRACT
SICKLE CELL CONSORTIUM INC							
PO BOX 1195							
CUMMING, GA 30040	47-4771677	501(C)(3)	30,000.	0.			RESEARCH- SUBCONTRACT
DEGEARDIN FOUNDATION FOR MENTAL							
RESEARCH FOUNDATION FOR MENTAL HYGIENE - 150 BROADWAY NO 301 -							
MENANDS, NY 12204	14-1410842	501(C)(3)	29,811.	0.			RESEARCH- SUBCONTRACT
			25,311.			1	Depointment Depointment
DIGITAL PROMISE GLOBAL							
1929 E WASHINGTON ST							
NEW CASTLE, PA 16101	46-5460594	501(C)(3)	29,673.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990) UNIVERSITY	OF PITTSBURGH					2	5-0965591 Page 1
Part II Continuation of Grants and Oth	er Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	urt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEMSON UNIVERSITY							
201 SIKES HALL							
CLEMSON, SC 29634	57-6000254	115	29,164.	0.			RESEARCH- SUBCONTRACT
SHENANDOAH UNIVERSITY							
1460 UNIVERSITY DR							
WINCHESTER, VA 22601	54-0525605	501(C)(3)	29,051.	0.			RESEARCH- SUBCONTRACT
FAMILY HEALTH INTERNATIONAL							
359 BLACKWELL ST	23-7413005	501(C)(3)	28,574.	0.			RESEARCH- SUBCONTRACT
DURHAM, NC 27701	23-7413005	501(C)(3)	20,574.	0.			RESEARCH SUBCONTRACT
BRIGHAM YOUNG UNIVERSITY							
PO BOX 21128							
PROVO, UT 84602	87-0217280	501(C)(3)	28,170.	0.			RESEARCH- SUBCONTRACT
UNIVERSITY OF OREGON							
PO BOX 3237	93-6001786	115	26 272	0.			RESEARCH- SUBCONTRACT
EUGENE, OR 97403	33-0001780	113	26,272.	0.			RESEARCH SUBCONTRACT
SWARTHMORE COLLEGE							
500 COLLEGE AVE							
SWARTHMORE, PA 19081	23-1352683	501(C)(3)	26,082.	0.			RESEARCH- SUBCONTRACT
HOMEWOOD CHILDREN'S VILLAGE							
801 N HOMEWOOD AVE	27 1005502	E01/G)/2)	26 010	0			DECEARCH CURCONMRACM
PITTSBURGH, PA 15208	27-1885583	501(C)(3)	26,019.	0.			RESEARCH- SUBCONTRACT
GEORGE WASHINGTON UNIVERSITY							
45155 RESEARCH PL 260							
ASHBURN, VA 20147	53-0196584	501(C)(3)	25,812.	0.			RESEARCH- SUBCONTRACT
PARTIER MATTER COMM							
RADFORD UNIVERSITY PO BOX 6901							
RADFORD, VA 24142	54-6001789	501(C)(3)	25,629.	0.			RESEARCH- SUBCONTRACT
	1 31 3331703	P(0/(0/	1 23,323.	<u> </u>			reserved bobcontinuer

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ALLEGHENY-SINGER RESEARCH INSTITUTE - TWO ALLEGHENY CENTER PITTSBURGH, PA 15212 25-1320493 501(C)(3) 25,502 0 RESEARCH- SUBCONTRACT URBAN LEAGUE OF GREATER PITTSBURGH 610 WOOD ST PITTSBURGH, PA 15222 25-0965592 501(C)(3) 25,080 0 RESEARCH- SUBCONTRACT PITTSBURGH REGIONAL HEALTHCARE INITIATIVE - 625 LIBERTY AVE NO 2500 - PITTSBURGH, PA 15222 01-0752319 501(C)(3) 25,000 0 RESEARCH- SUBCONTRACT UNIVERSITY OF HAWAII 1408 LOWER CAMPUS RD HONOLULU, HI 96822 99-6000354 115 24,593 0 RESEARCH- SUBCONTRACT METROPOLITAN AREA NEIGHBORHOOD NUTRITION ALLIANCE - 420 N 20TH ST - PHILADELPHIA, PA 19130 23-2586142 RESEARCH- SUBCONTRACT 501(C)(3) 24,220 0 ARIZONA STATE UNIVERSITY BOX 873503 TEMPE, AZ 85287 86-0196696 RESEARCH- SUBCONTRACT 115 23,708 0 CHATHAM UNIVERSITY WOODLAND ROAD PITTSBURGH, PA 15232 25-0717890 501(C)(3) 23 606 0 RESEARCH- SUBCONTRACT US GEOLOGICAL SURVEY USGS 12201 SUNRISE VALLEY DR RESTON, VA 20192 53-0196958 115 23,332, 0 RESEARCH- SUBCONTRACT PLANETARY SCIENCE INSTITUTE 1700 E FT LOWELL RD TUCSON, AZ 85719 33-0175263 501(C)(3) 22,415 RESEARCH- SUBCONTRACT 0

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) ACADEMYHEALTH 1666 K ST NW STE 1100 WASHINGTON, DC 20006 52-1260918 501(C)(3) 21,452 0 RESEARCH- SUBCONTRACT UNIVERSITY OF NEBRASKA-LINCOLN 1400 R ST LINCOLN, NE 68588 47-0491233 115 21,348 0 RESEARCH- SUBCONTRACT FEINSTEIN INSTITUTE FOR MEDICAL RESEARCH - 972 BRUSH HOLLOW RD FL 5 - WESTBURY, NY 11590 11-2673595 501(C)(3) 20,395 0 RESEARCH- SUBCONTRACT PROMUNDO-US 1367 CONNECTICUT AVE NW STE 310 WASHINGTON, DC 20036 26-1931968 501(C)(3) 20,049 0 RESEARCH- SUBCONTRACT TUFTS UNIVERSITY 169 HOLLAND ST 04-2103634 SOMERVILLE, MA 02144 501(C)(3) 0 RESEARCH- SUBCONTRACT 19,946 SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE, WA 98145 91-0564748 501(C)(3) RESEARCH- SUBCONTRACT 19,891 0 NATIONAL JEWISH HEALTH 1400 JACKSON ST 74-2044647 DENVER CO 80206 501(C)(3) 18 287 0 RESEARCH- SUBCONTRACT HEALTHPARTNERS INSTITUTE PO BOX 1309 MINNEAPOLIS, MN 55440 41-1670163 501(C)(3) 18,033 0 RESEARCH- SUBCONTRACT PROVIDENCE PORTLAND MEDICAL CENTER PO BOX 13993 PORTLAND, OR 97213 93-0386906 N/A 17,975 0 RESEARCH- SUBCONTRACT

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UNIVERSITY OF PITTSBURGH

Schedule I (Form 990) UNIVERSITY OF			a and Damastic C	Announce and a (Cala	- dula I (Faura 200) Da		5-0965591 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLEGHENY COUNTY HEALTH DEPARTMENT 542 FOURTH AVE PITTSBURGH, PA 15219		115	17,774.	0.			RESEARCH- SUBCONTRACT
BAYLOR SCOTT & WHITE RESEARCH INSTITUTE - 301 N WASHINGTON AVE - DALLAS, TX 75246	75-1921898	501(C)(3)	16,821.	0.			RESEARCH- SUBCONTRACT
METHODIST HEALTHCARE FOUNDATION 1211 UNION AVE STE 450 MEMPHIS, TN 38104	23-7320638	501(C)(3)	16,345.	0.			RESEARCH- SUBCONTRACT
CLEVELAND CLINIC PO BOX 931517 CLEVELAND, OH 44193	34-0714585	501(C)(3)	15,975.	0.			RESEARCH- SUBCONTRACT
ST VINCENT COLLEGE 300 FRASER PURCHASE RD LATROBE, PA 15650	25-0964126	501(C)(3)	15,036.	0.			RESEARCH- SUBCONTRACT
CYN3RGY RESEARCH 24850 SE STARK ST STE 180 GRESHAM, OR 97030	27-1043459	N/A	15,000.	0.			RESEARCH- SUBCONTRACT
WEST VIRGINIA LOCAL HEALTH INC 176 DEER RIDGE FARM RD BARBOURSVILLE, WV 25504	55-0745648	501(C)(3)	15,000.	0.			RESEARCH- SUBCONTRACT
SAMFORD UNIVERSITY LIBRARY 800 LAKESHORE DR BIRMINGHAM, AL 35229	63-0312914	501(C)(3)	15,000.	0.			RESEARCH- SUBCONTRACT
MGH INSTITUTE OF HEALTH PROFESSIONS INC - 36 1ST AVE - BOSTON, MA 02129	04-2868893	501(C)(3)	14,570.	0.			RESEARCH- SUBCONTRACT

Schedule I (Form 990) UNIVERSITY OF			Da				5-0965591 Page 1				
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
HACKENSACK MERIDIAN HEALTH, INC. 343 THORNALL ST	22 1407576	501/02/22	12.260	0							
EDISON, NJ 08837	22-1487576	501(C)(3)	13,260.	0.			RESEARCH- SUBCONTRACT				
WISS, JANNEY, ELSTNER ASSOCIATES INC - 800 VINIAL ST - PITTSBURGH, PA 15212	36-2757956	N/A	12,729.	0.			RESEARCH- SUBCONTRACT				
TEXAS A&M RESEARCH FOUNDATION 400 HARVEY MITCHELL PKWY S NO 300 COLLEGE STATION, TX 77845	74-1238434	115	12,637.	0.			RESEARCH- SUBCONTRACT				
NEIGHBORHOOD LEGAL SERVICES ASSOCIATION - 928 PENN AVE - PITTSBURGH, PA 15222	25-1157129	501(C)(3)	12,000.	0.			RESEARCH- SUBCONTRACT				
SOUTHWESTERN PENNSYLVANIA LEGAL SERVICES INC - 10 W CHERRY AVE - WASHINGTON, PA 15301	25-1192139	501(C)(3)	12,000.	0.			RESEARCH- SUBCONTRACT				
SUNRISE COMMUNITY COUNSELING CENTER - 537 S ALVARADO ST - LOS ANGELES, CA 90057	95-3128532	501(C)(3)	11,792.	0.			RESEARCH- SUBCONTRACT				
INSTITUTE FOR CANCER RESEARCH 333 COTTMAN AVE PHILADELPHIA, PA 19111	23-6296135	501(C)(3)	11,760.	0.			RESEARCH- SUBCONTRACT				
PITTSBURGH CURLING CLUB 491 MCCOY RD MCKEES ROCKS, PA 15136	76-0707291	501(C)(3)	11,668.	0.			RESEARCH- SUBCONTRACT				
UNIVERSITY OF MISSISSIPPI 306 KINARD UNIVERSITY, MS 38677	64-6001159	115	11,309.	0.			RESEARCH- SUBCONTRACT				

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) NEW YORK PRESBYTERIAN BROOKLYN METHODIST HOSPITAL - 506 6TH ST -11-1631796 501(C)(3) 10,413 0 RESEARCH- SUBCONTRACT BROOKLYN, NY 11215 LOYOLA UNIVERSITY CHICAGO 820 N MICHIGAN AVE CHICAGO, IL 60611 36-1408475 501(C)(3) 10,205 0 RESEARCH- SUBCONTRACT UNIVERSITY OF ALASKA 3211 PROVIDENCE DR ANCHORAGE, AK 99508 92-6000147 115 10,110 0 RESEARCH- SUBCONTRACT INTELOMED INC 201 SMITH DR CRANBERRY TOWNSHIP, PA 16066 20-2559866 10,000 0 RESEARCH- SUBCONTRACT N/A PPD DEVELOPMENT LP 26361 NETWORK PLACE CHICAGO, IL 60693-1263 74-2325267 RESEARCH- SUBCONTRACT N/A 9.818 0 COLORADO SCHOOL OF MINES 1500 ILLINOIS ST GOLDEN, CO 80401 84-6000551 RESEARCH- SUBCONTRACT 115 9,587 0 SEATTLE INSTITUTE FOR BIOMEDICAL AND CLINICAL RESEARCH - 1660 SOUTH COLUMBIAN WAY - SEATTLE, WA 98108 91-1452438 501(C)(3) 9 533 0 RESEARCH- SUBCONTRACT THE FOUNDATION OF THE UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE -9201 UNIVERSITY BLVD - CHARLOTTE NC 28223 56-6059417 501(C)(3) 9,497 0 RESEARCH- SUBCONTRACT USDA 1400 INDEPENDENCE AVE SW WASHINGTON, DC 20250 72-0564834 115 0 RESEARCH- SUBCONTRACT 9,366.

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) CLINTON HEALTH ACCESS INITIATIVE INC - 383 DORCHESTER AVE STE 400 BOSTON, MA 02127 27-1414646 501(C)(3) 9,209 0 RESEARCH- SUBCONTRACT CORNERSTONE CARE INC 7 GLASSWORKS RD GREENSBORO, PA 15338 25-1346194 501(C)(3) 9,108 0 RESEARCH- SUBCONTRACT JULIE FRANTSVE-HAWLEY CONSULTING LLC - 621 BRIER ST - KENILWORTH IL 60043 N/A 8.742 0 RESEARCH- SUBCONTRACT UNIVERSITY OF KANSAS CENTER FOR RESEARCH INC - 2385 IRVING HILL RD - LAWRENCE, KS 66045 48-0680117 501(C)(3) 8,312 0 RESEARCH- SUBCONTRACT UNIVERSITY OF SOUTH FLORIDA 4019 E FOWLER AVE 59-3102112 RESEARCH- SUBCONTRACT TAMPA, FL 33620 115 8,070 0 HOSPITAL FOR SPECIAL SURGERY 535 E 70TH ST NEW YORK, NY 10021 13-1624135 501(C)(3) RESEARCH- SUBCONTRACT 7.775 0 PA ASSOCIATION OF COMMUNITY HEALTH CENTERS - 1035 MUMMA RD STE 1 -WORMLEYSBURG, PA 17043 25-1395311 501(C)(3) 7 500 0 RESEARCH- SUBCONTRACT ASSOCIATION OF AMERICAN MEDICAL COLLEGES - 655 K ST NW STE 100 -WASHINGTON, DC 20001 36-2169124 501(C)(3) 7,187 0 RESEARCH- SUBCONTRACT ST JOSEPH'S HOSPITAL AND MEDICAL CENTER - 350 W THOMAS RD -PHOENIX, AZ 85013 72-1561134 501(C)(3) 7,172 RESEARCH- SUBCONTRACT 0

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Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV. assistance appraisal, other) UNIVERSITY OF CALIFORNIA AT LOS ANGELES - 7408 BOELTER HALL - LOS ANGELES, CA 90095 95-6006143 115 6,719 0 RESEARCH- SUBCONTRACT THE MIRIAM HOSPITAL 164 SUMMIT AVE PROVIDENCE, RI 02906 05-0258905 501(C)(3) 6,680 0 RESEARCH- SUBCONTRACT GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION - 58 EDGEWOOD AVE 3RD FL - ATLANTA, GA 30303 58-1845423 501(C)(3) 6,553 0 RESEARCH- SUBCONTRACT NEW YORK MEDICAL COLLEGE 40 SUNSHINE COTTAGE RD VALHALLA, NY 10595 13-1099420 501(C)(3) 6,552 0 RESEARCH- SUBCONTRACT MAGEE REHABILITATION HOSPITAL 1101 MARKET ST STE 2004 PHILADELPHIA, PA 19107 RESEARCH- SUBCONTRACT 23-1476328 501(C)(3) 6,500 0 INSTITUTE FOR COMMUNITY RESEARCH INC - TWO HARTFORD SQ W NO 100 -HARTFORD, CT 06106 06-0653116 501(C)(3) RESEARCH- SUBCONTRACT 6,399 0 THE ABLEGAMERS FOUNDATION INC PO BOX 508 CHARLES TOWN, WV 25414 30-0533750 501(C)(3) 6 250 0 RESEARCH- SUBCONTRACT DONALD GUTHRIE FOUNDATION 1 GUTHRIE SQ SAYRE, PA 18840 24-6022957 501(C)(3) 6,000 0 RESEARCH- SUBCONTRACT LOUISIANA PUBLIC HEALTH INSTITUTE 1515 POYDRAS ST NEW ORLEANS, LA 70112 72-1379921 501(C)(3) RESEARCH- SUBCONTRACT 6 000 0

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) KENNESAW STATE UNIVERSITY RESEARCH AND SERVICE FOUNDATION INC - 1000 CHASTAIN RD NW - KENNESAW, GA 30144 37-1535589 501(C)(3) 5,806 0 RESEARCH- SUBCONTRACT BALL STATE UNIVERSITY 2000 W UNIVERSITY AVE MUNCIE, IN 47306 35-6000221 115 5,488 0 RESEARCH- SUBCONTRACT ALLIES FOR HEALTH & WELLBEING 5913 PENN AVE PITTSBURGH, PA 15206 25-1537128 501(C)(3) 5,210 0 RESEARCH- SUBCONTRACT OAKLAND BUSINESS IMPROVEMENT DISTRICT - 235 ATWOOD ST -PITTSBURGH, PA 15213 25-1833743 268,000 0 SPONSORSHIP N/A ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT - 425 SIXTH AVE -PITTSBURGH, PA 15219 25-0965213 0 SPONSORSHIP 501(C)(3) 100,000 CAVE CANEM 20 JAY ST BROOKLYN, NY 11201 13-3932909 501(C)(3) SPONSORSHIP 40,000 0 WORLD TUMOR REGISTRY INC 913 SETTLERS RIDGE RD PITTSBURGH, PA 15238 87-2232768 501(C)(3) 40 000 0 SPONSORSHIP VIBRANT PITTSBURGH 213 SMITHFIELD ST STE 219 PITTSBURGH, PA 15222 20-2939474 501(C)(3) 30,000 0 SPONSORSHIP AMERICAN MIDDLE EAST INSTITUTE 5 VON LENT PL PITTSBURGH, PA 15232 26-3562819 501(C)(3) 25 000 0 SPONSORSHIP

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) INNOVATE PGH 544 MILTENBERGER ST PITTSBURGH, PA 15219 27-1727604 501(C)(3) 22,500 0 SPONSORSHIP CAPTAIN ERICK FOSTER MEMORIAL RIDE PO BOX 2145 PHILADELPHIA, PA 19103 47-3192875 501(C)(3) 20,000 0 SPONSORSHIP AMERICAN SOCIETY FOR PUBLIC ADMINISTRATION - 1730 RHODE ISLAND AVE NW - WASHINGTON, DC 20036 36-2340300 501(C)(3) 15,000 0 SPONSORSHIP PITTSBURGH PARKS CONSERVANCY 45 SOUTH 23RD ST STE 101 PITTSBURGH, PA 15203 23-2882145 501(C)(3) 15,000 0 SPONSORSHIP NASPAA 1028 VERMONT AVE NW STE 1100 WASHINGTON, DC 20005 52-1080991 0 SPONSORSHIP 501(C)(3) 12,000 GREATER PITTSBURGH CHAMBER OF COMMERCE - 11 STANWIX ST FL 17 -PITTSBURGH, PA 15222 25-0399620 501(C)(6) SPONSORSHIP 10,500 0 ALBERT SCHWEITZER FELLOWSHIP PITTSBURGH - 5614 ELGIN ST -PITTSBURGH, PA 15206 46-3414778 501(C)(3) 10 000 0 SPONSORSHIP AMERICAN HEART ASSOCIATION 7777 PENN CENTER BLVD PITTSBURGH, PA 15235 13-5613797 501(C)(3) 10,000 0 SPONSORSHIP GLENMOOR COUNTRY CLUB 191 GLENMOOR RD CANTON, OH 44718 26-1434098 501(C)(6) 10,000 0 SPONSORSHIP

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) GWEN'S GIRLS INC 711 WEST COMMONS PITTSBURGH, PA 15212 75-3114136 501(C)(3) 10,000 0 SPONSORSHIP TMANT CHRISTIAN ACADEMY 2150 EAST HILLS DR PITTSBURGH, PA 15221 25-1816131 501(C)(3) 10,000 0 SPONSORSHIP PITTSBURGH SYMPHONY ORCHESTRA 600 PENN AVE PITTSBURGH, PA 15222 25-0986052 501(C)(3) 10,000 0 SPONSORSHIP SENATOR JOHN HEINZ HISTORY CENTER 1212 SMALLMAN ST PITTSBURGH, PA 15222 25-0965391 501(C)(3) 10,000 0 SPONSORSHIP STANLEY M MARKS BLOOD CANCER RESEARCH FUND - 5150 CENTRE AVE -82-3369773 0 SPONSORSHIP PITTSBURGH, PA 15323 501(C)(3) 10,000 YWCA OF GREATER PITTSBURGH 2313 E CARSON ST PITTSBURGH, PA 15203 25-0965639 501(C)(3) SPONSORSHIP 10,000 0 GRANTMAKERS OF WESTERN PA 650 SMITHFIELD ST STE 210 PITTSBURGH, PA 15222 25-1496312 501(C)(3) 8 000 0 SPONSORSHIP NATIONAL FOOTBALL FOUNDATION & COLLEGE HALL OF FAME - 433 LAS COLINAS BLVD E STE 1130 - IRVING. TX 75039 22-1508812 501(C)(3) 8,000 0 SPONSORSHIP AFRICAN AMERICAN CHAMBER OF COMMERCE - 436 7TH AVE -PITTSBURGH, PA 15219 25-1729192 501(C)(6) 7,500 0 SPONSORSHIP

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (h) Purpose of grant (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of organization or government if applicable cash grant noncash valuation non-cash assistance or assistance (book, FMV. assistance appraisal, other) CHILDRENS MUSEUM OF PITTSBURGH 10 CHILDRENS WAY ALLEGHENY SW PITTSBURGH, PA 15212 25-1379704 501(C)(3) 7,500 0 SPONSORSHIP MACEDONIA FAMILY AND COMMUNITY ENRICHMENT CENTER - 1835 CENTRE AVE STE 285 - PITTSBURGH, PA 15219 25-1778222 501(C)(3) 7,500 0 SPONSORSHIP PITTSBURGH CULTURAL TRUST 803 LIBERTY AVE PITTSBURGH, PA 15222 25-1469002 501(C)(3) 7,500 0 SPONSORSHIP CATHOLIC CHARITIES OF THE DIOCESE OF PITTSBURGH - 212 NINTH STREET PITTSBURGH, PA 15222 25-1326213 501(C)(3) 7,041 0 SPONSORSHIP ST JUDE CHILDREN'S RESEARCH HOSPITAL - 262 DANNY THOMAS PL -MEMPHIS, TN 38105 62-0646012 7,000 0 SPONSORSHIP 501(C)(3) CARNEGIE INSTITUTE 4400 FORBES AVE PITTSBURGH, PA 15212 25-0965280 501(C)(3) SPONSORSHIP 6,500 0 AMERICAN RED CROSS 2801 LIBERTY AVE 250965231 PITTSBURGH, PA 15222 501(C)(3) 6 000 0 SPONSORSHIP

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Schedule I (Form 990) 2021 UNIVERSITY OF PITTSBURGH 25-0965591 Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INSTITUTIONAL AID TO STUDENTS	20020	250,722,623.	0.		
TUITION REMISSION	2186	28,036,485.	0.		
TUITION REMISSION- STUDENTS ATTENDING OTHER UNIVERSITIES	69	1,318,556.	0.		

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

PART I, LINE 2:

MONITORING PROCEDURES PART II: GRANTS AND ASSISTANCE TO GOVERNMENTS AND

ORGANIZATIONS IN THE UNITED STATES:

THE UNIVERSITY HAS ESTABLISHED POLICIES AND PROCEDURES FOR FINANCIAL

AFFAIRS. RESPONSIBILITY CENTER HEADS WITHIN THE UNIVERSITY ARE RESPONSIBLE

FOR MONITORING THE GENERAL USE OF UNIVERSITY FUNDS FOR APPROVED USES.

DISBURSEMENT REQUESTS FOR GRANT FUNDS MUST BE APPROVED BY THE FINANCIAL

ACCOUNTING INFORMATION SYSTEM (FAIS) ACCOUNT ADMINISTRATOR OR THE HEAD OF

Part IV | Supplemental Information THE RESPONSIBILITY CENTER. WHEN THE REQUESTOR IS ALSO THE FAIS ACCOUNT ADMINISTRATOR OR THE HEAD OF THE RESPONSIBILITY CENTER. THE GRANT FUNDING REQUEST MUST BE SIGNED BY THE NEXT HIGHER LEVEL ADMINISTRATOR. THE UNIVERSITY'S DISBURSEMENT PROCESS IDENTIFIES AND RECORDS PAYMENTS TO BOTH U.S. AND FOREIGN INDIVIDUALS/ENTITIES. THE UNIVERSITY EMPLOYS APPROPRIATE MEASURES TO REDUCE THE RISK THAT ANY GRANT FUNDING PROVIDED IS NOT USED FOR NON-CHARITABLE PURPOSES OR EXPLOITATION BY TERRORIST ORGANIZATIONS INCLUDING, BUT NOT LIMITED TO, UNIVERSITY ATTENDANCE AND/OR PARTICIPATION AT SPONSORED EVENTS AND ONGOING REVIEWS OF THE SPECIALLY DESIGNATED NATIONALS LIST PUBLISHED BY THE US DEPARTMENT OF THE TREASURY. FOR RESEARCH SUBCONTRACTS, THE INITIAL DETERMINATION OF ELIGIBILITY AND APPROPRIATENESS OF THE ENTITY LIES JOINTLY BETWEEN THE PRINCIPAL INVESTIGATOR (PI)/DEPARTMENT AND THE OFFICE OF RESEARCH. THE PI/DEPARTMENT IDENTIFIES THE ENTITY USUALLY BASED UPON THE UNIQUE NEEDS OF THE PI EVIDENCED IN THE SCOPE OF WORK. DOCUMENTATION IS OBTAINED FROM THE ENTITY WHICH IS REVIEWED. UPON SUBMISSION. THE OFFICE OF RESEARCH LOOKS FOR THIS DOCUMENTATION SO THAT IT MEETS SPONSOR AND UNIVERSITY REQUIREMENTS. IF AND WHEN THE PROJECT IS FUNDED, THE DEPARTMENT INITIATES A SUBCONTRACT REQUEST. SCHEDULE I, PART I, LINE 2: MONITORING PROCEDURES PART III GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS IN THE UNITED STATES: THE INSTITUTION DOES MAINTAIN RECORDS TO SUBSTANTIATE THE AMOUNT OF GRANTS OR ASSISTANCE. THE RECORDS, ELIGIBILITY AND SELECTION CRITERIA ARE MAINTAINED BY EITHER THE OFFICE OF ADMISSIONS AND FINANCIAL AID. THE STUDENTS' SCHOOL DEPARTMENT, THE BENEFITS SECTION OF HUMAN RESOURCES, OR

THE FACULTY RECORDS OFFICE.

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

UNIVERSITY OF PITTSBURGH

Employer identification number 25-0965591

Pa	art I Questions Regarding Compensation			
	<u> </u>		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.			
	X First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Y Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	х	
3	Indicate which, if any, of the following the 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.			
	X Compensation committee			
	X Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	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:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
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		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) PATRICK R. NARDUZZI	(i)	4,460,199.	1,100,000.	60,002.	234,800.	20,816.	5,875,817.	0.
HEAD FOOTBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) F. JEFFREY CAPEL III	(i)	3,482,203.	25,000.	45,235.	23,200.	20,352.	3,595,990.	0.
HEAD MEN'S BASKETBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) EDWARD J. GREFENSTETTE	(i)	0.	0.	0.	0.	0.	0.	0.
TRUSTEE	(ii)	743,467.	1,050,000.	201,605.	0.	31,549.	2,026,621.	1,244,555.
(4) GREGORY SCHULER	(i)	252,731.	1,203,887.	219,247.	22,154.	12,247.	1,710,266.	0.
FORMER CIO THRU 6/30/21	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ARTHUR S. LEVINE	(i)	1,420,073.	5,000.	36,587.	34,800.	18,010.	1,514,470.	0.
FMR SVC HEALTH SCIENCES THRU 6/1/20	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ANANTHA SHEKHAR	(i)	995,966.	300,000.	16,942.	123,200.	33,600.	1,469,708.	0.
SVC HEALTH SCIENCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) HEATHER R. LYKE	(i)	757,563.	10,000.	15,226.	109,800.	19,896.	912,485.	0.
DIRECTOR OF ATHLETICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) PATRICK D. GALLAGHER	(i)	663,429.	0.	16,800.	34,800.	105,644.	820,673.	0.
CHANCELLOR / CEO	(ii)	25,000.	0.	0.	0.	0.	25,000.	0.
(9) RANDY V. BATES	(i)	636,661.	56,042.	12,027.	29,665.	23,175.	757,570.	0.
ASSISTANT FOOTBALL COACH	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MICHAEL J. BECICH	(i)	641,890.	20,000.	0.	0.	22,402.	684,292.	0.
CHAIRMAN PCI	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) PAUL LAWRENCE	(i)	392,155.	108,149.	9,667.	49,134.	21,559.	580,664.	0.
TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ANN E. CUDD	(i)	472,446.	0.	17,631.	28,182.	27,201.	545,460.	0.
PROVOST/SR VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) ROBIN A. RUTENBAR	(i)	422,543.	0.	15,145.	39,000.	23,050.	499,738.	0.
SR VICE CHANCELLOR- RESEARCH	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) DAVID N. DEJONG	(i)	400,056.	0.	11,533.	58,544.	22,759.	492,892.	0.
SVC BUSINESS OPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) GEOVETTE E. WASHINGTON	(i)	426,734.	0.	12,807.	34,800.	11,257.	485,598.	0.
SVC & CHIEF LEGAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) NARAHARI SASTRY	(i)	394,359.	0.	3,150.	29,815.	21,451.	448,775.	0.
CFO/SR VICE CHANCELLOR	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

		(B) Breakdown of W	J-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(17) KATHY S. HUMPHREY	(i)	213,103.	0.	43,172.	22,470.	14,216.	292,961.	0.
SVC ENGAGEMENT- THRU 6/30/21	(ii)	0.	0.	0,	0.	0.	0.	0,
(18) ROSALYN E. JONES	(i)	223,638.	0.	17,147.	18,000.	7,486.	266,271.	0.
VC/SECRETARY OF THE BOT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

UNIVERSITY OF PITTSBURGH 25-0965591 Page 3

Schedule J (Form 990) 2021 Part III Supplemental Information Provide the information, explanation, of

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

PART I, LINE 1A:

FIRST-CLASS OR CHARTER TRAVEL:

THE UNIVERSITY USES CHARTER AIR TRAVEL PRIMARILY TO TRANSPORT THE FOOTBALL

TEAM AND THE MEN'S AND WOMEN'S BASKETBALL TEAMS TO AWAY GAME VENUES.

OCCASIONALLY, DUE TO TIME CONSTRAINTS, WEATHER CONCERNS, OR CLOSELY

SEQUENCED COMMITMENTS. SENIOR MANAGEMENT MAY USE CHARTER AIR TRAVEL TO MEET

PROFESSIONAL RESPONSIBILITIES. TRAVEL IS TREATED AS TAXABLE INCOME ON FORM

W-2 IF NOT FOR BONA FIDE BUSINESS PURPOSES.

TRAVEL FOR COMPANIONS: TRAVEL FOR COMPANIONS IS TREATED AS TAXABLE INCOME

ON FORM W-2.

TAX INDEMNIFICATION AND GROSS-UP PAYMENTS:

CERTAIN SENIOR OFFICERS AT THE UNIVERSITY ARE ELIGIBLE FOR A HEALTH CARE

PACKAGE UP TO A MAXIMUM AMOUNT OF \$5 000 PER YEAR. THE REIMBURSEMENT IS

"GROSSED-UP" FOR INCOME TAX PURPOSES.

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE:

AS A CONDITION OF EMPLOYMENT, THE CHANCELLOR IS REQUIRED TO LIVE IN A

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Schedule J (Form 990) 2021 UNIVERSITY OF PITTSBURGH 25-0965591 Page 3

Part III Supplemental Information

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

RESIDENCE PROVIDED BY THE UNIVERSITY TO MEET WITH AND ENTERTAIN DONORS

PROSPECTIVE DONORS, INSTITUTIONAL SUPPORTERS, AND BUSINESS ASSOCIATES. USE

OF THE RESIDENCE IS NOT CONSIDERED TAXABLE INCOME UNDER IRC SEC. 119(D).

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES:

BECAUSE CERTAIN OFFICERS OF THE UNIVERSITY ARE REQUIRED TO ENTERTAIN

DONORS, PROSPECTIVE DONORS, INSTITUTIONAL SUPPORTERS, AND BUSINESS

ASSOCIATES, CLUB MEMBERSHIPS ARE PROVIDED. PERSONAL USE OF CLUB MEMBERSHIPS

IS TREATED AS TAXABLE INCOME ON FORM W-2.

PERSONAL SERVICES:

FINANCIAL CONSULTING SERVICES UP TO A MAXIMUM AMOUNT OF \$5,000 PER YEAR ARE

PROVIDED TO CERTAIN SENIOR OFFICERS OF THE UNIVERSITY AND ARE TREATED AS

TAXABLE INCOME ON FORM W-2.

PART I, LINES 4A-B:

LINE 4A- SEVERANCE PAYMENT- G.SCHULER- \$213,676

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

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

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SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2021
Open to Public Inspection

Name of the organization

UNIVERSITY OF PITTSBURGH

Employer identification number
25-0965591

	UNIVERSITY OF	PITTSBURGH							Z:	0-096	5591			
Part I	Bond Issues	SEE PART VI FOR C	OLUMN (F) CONT	INUATIONS										
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ue price	(f) Description	on of purpose	(g) De	feased	(h) On	behalf	(i) Po	oled
											of is:	suer	finan	cing
									Yes	No	Yes	No	Yes	No
														l
A SEE	SCHEDULE K, PART VI	25-0965591	91335VJP2	09/18/14	96,		APITAL PROJ			Х		Х		Х
								ECTS; REFUND						l
B SEE	SCHEDULE K, PART VI	25-0965591	91335VKW5	04/15/21	210,	298,215.P	ORTION OF 2	018 PANTHERS		Х		Х		Х
C SEE	SCHEDULE K, PART VI	25-0965591	91335VKV7	12/03/19	200	000 000.C	APITAL PROJ	ECTS		x		х		Х
0 222	201122022 11, 21212 11		7 2 3 3 3 1 1 1 1	12,00,15		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
D														l
Part II	Proceeds	I							-	<u> </u>				
	_			Δ.			В	С				D		
1 Ar	mount of bonds retired													
	mount of bonds legally defeased													
	otal proceeds of issue				5,645,580.	2	10,298,215.	200,	000,000	٥.				
	ross proceeds in reserve funds													
5 Ca	apitalized interest from proceeds													
6 Pr	oceeds in refunding escrows													
7 Iss	suance costs from proceeds				557,401.		769,716.		671,501	١.				
8 Cr	redit enhancement from proceeds													
9 W	orking capital expenditures from proce	eds												
10 Ca	apital expenditures from proceeds			96	5,065,099.		24,528,499.	199,	328,499	9.				
	ther spent proceeds						85,000,000.							
	ther unspent proceeds									\perp				
13 Ye	ear of substantial completion				2015		2021		019	4				
				Yes	No	Yes	No	Yes	No	\perp	Yes	_	No	
	ere the bonds issued as part of a refun		• •											
	ssued prior to 2018, a current refundin				X	Х			Х	+				
	ere the bonds issued as part of a refun	_	•											
	issued prior to 2018, an advance refunding issue)?			X	77	X	77	Х	-		_			
				х		Х		Х		+		_		
	Does the organization maintain adequate books and records to support the							v						
tin	al allocation of proceeds?			Х		Х		Х			alula M			

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

 Schedule K (Form 990) 2021
 UNIVERSITY OF PITTSBURGH
 25-0965591
 Page 2

Par	t III Private Business Use											
			A		E	3			С)
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No		Yes	No		Yes	No		Yes	No
	which owned property financed by tax-exempt bonds?		Х			Х			Х			
2	Are there any lease arrangements that may result in private business use of											
	bond-financed property?	X			X			Х				
За	Are there any management or service contracts that may result in private											
	business use of bond-financed property?	X			Х			Х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside											
	counsel to review any management or service contracts relating to the financed property?	Х			Х			Х				
С	Are there any research agreements that may result in private business use of											
	bond-financed property?	Х			Х			Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other											
	outside counsel to review any research agreements relating to the financed property?	Х			Х			Х				
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		.23	%		.82	%		3.12	%		%
5	Enter the percentage of financed property used in a private business use as a			一								
	result of unrelated trade or business activity carried on by your organization,											
	another section 501(c)(3) organization, or a state or local government			%			%			%		%
6	Total of lines 4 and 5			%		.82	%		3.12	%		%
7	Does the bond issue meet the private security or payment test?		Х	一		Х			Х			
8a	Has there been a sale or disposition of any of the bond-financed property to a non-			一					1			
	governmental person other than a 501(c)(3) organization since the bonds were issued?		х			х			х			
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or			一								
	disposed of			%			%			%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations			Ť								
	sections 1.141-12 and 1.145-2?											
9	Has the organization established written procedures to ensure that all			一					1			
	nonqualified bonds of the issue are remediated in accordance with the											
	requirements under Regulations sections 1.141-12 and 1.145-2?	X			Х			Х				
Par	t IV Arbitrage											
			Α		E	3			C			<u> </u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No		Yes	No		Yes	No		Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х			Х			Х			
2	If "No" to line 1, did the following apply?								,-			
а	Rebate not due yet?		Х			Х			Х			
	Exception to rebate?	X			Х			Х				
	No rebate due?		Х			Х			Х			
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was		-	一								
	performed											
3	Is the bond issue a variable rate issue?	Х			Х			Х				

25-0965591 Schedule K (Form 990) 2021 UNIVERSITY OF PITTSBURGH Page 3

	A		E	3)	D	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		Х		Х		X		
b Name of provider	N/A		N/A		N/A			
c Term of hedge								
d Was the hedge superintegrated?		Х		Х		X		
e Was the hedge terminated?		Х		X		X		
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		X		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х		X		X		
7 Has the organization established written procedures to monitor the								
requirements of section 148?	х		Х		Х			
Part V Procedures To Undertake Corrective Action								

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

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

SCHEDULE K, PART I, BOND ISSUES:

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

CAPITAL PROJECTS; REFUND PORTION OF 2018 PANTHERS BOND

SCHEDULE K PART I BOND ISSUES- COLUMN (A)- ISSUER NAME

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

EDUCATION-UNIVERSITY CAPITAL PROJECT BONDS, SERIES A, B-1, B-2 (SERIES

2014)

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

EDUCATION-PITT ASSET NOTES TAX EXEMPT HIGHER EDUCATION REGISTERED

SERIES OF 2021

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

EDUCATION-PITT ASSET NOTES TAX EXEMPT HIGHER EDUCATION REGISTERED

SERIES OF 2019

D

No

Yes

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open To Public Inspection

Name of th	ne organization 								1 '		r identi	ificati	on nu	mber
Part I			F PITTSBURGH	01(-)(0)\	ion 501(a)(4) and a	4:	F01(a)(00) a vari		0965				
Parti						ion 501(c)(4), and s								
1	Complete ii the t		Relationship bet			art IV, line 25a or 25	ю, о	r FOIII 990-EZ, P	art v,	iirie 40	<i>J</i> D.	(4)	Corre	cted?
(a) Na	me of disqualified p	person	person and o			((c) D	escription of tran	sactio	on			es	No.
												 '	~	110
2 Enter	the amount of tax	incurred by the	organization ma	nagers	or disc	qualified persons du	uring	the year under						
										> \$				
3 Enter	the amount of tax,	if any, on line 2	2, above, reimbur	sed by	the or	ganization				> \$				
Part II	Loans to an	d/or From Ir	nterested Per	conc										
Partii						′, Part V, line 38a or	Far.	m 000 Dort IV lin		ar if th		ni=oti		
	•	•	owered res on 90, Part X, line 5,			., Part v, line soa or	FOII	11 990, Part IV, III	ie ∠6,	Or II ti	ie orga	ınzan	OH	
(a	a) Name of	(b) Relationshi		(d) Lo	an to or	(e) Original	1	f) Balance due	(a) In	(h) App	proved	(i) W	/ritten
	ested person	with organization			n the zation?	ne I principal amount I		ncipal amount (1) Balance due (9) 111 16					agree	ment?
				То	From						Yes	No	Yes	No
											ш			
				1			_				igsquare			
			-				_				igwdapprox igwedge			
							+				+			
				+			+				\vdash			
				+			+				\vdash			
Total						> \$								
Part III	Grants or As	sistance Be	enefiting Inte	reste	d Pe									
	Complete if the	organization an	swered "Yes" on	Form 9	990, Pa	art IV, line 27.								
(a) N	lame of interested	person	(b) Relationship	betwe	en	(c) Amount of		(d) Type	of		(e)) Purp	ose o	f
			interested per		d	assistance		assistan	ce		á	assista	ance	
			the organiz	ation										
								SCHOLARSHIP						
						12,3	330	SCHOLARSHIP						
										-+				
										-+				
								+		-+				

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

Schedule L (Form 990) 2021 UNIVERSIT	TY OF PITTSBURGH		25-0965591		Page 2
Part IV Business Transactions Involv	ing Interested Persons.				
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
				Yes	No
SEE SCH. L PART V	N/A	0.	N/A		Х
D 141 0 1 111 0 11					
Part V Supplemental Information. Provide additional information for response.	onses to questions on Schedule L (see i	nstructions).			
SCHEDULE L PART IV					
(A) NAME OF INTERESTED PERSON: NEAL BI	CKER				
(II) MAIN OF TAXABLED PARENCE. AMEN DA					
(B) RELATIONSHIP BETWEEN INTERESTED PER	RSON AND ORGANIZATION: FAMILY				
MEMBER OF ANN E. CUDD, SVC AND PROVOST					
(C) AMOUNT OF TRANSACTION: \$127,706					
(D) DESCRIPTION OF TRANSACTION: EMPLOY	ZMENIT				
(D) DESCRIPTION OF TRANSACTION: EMPLO	IMPNI				
(E) SHARING OF ORGANIZATION'S REVENUES:	? NO				
(A) NAME OF INTERESTED PERSON: ALLEGH	ENY STRATEGY PARTNERS, LLC				
(a)					
(B) RELATIONSHIP BETWEEN INTERESTED PER	RSON AND ORGANIZATION: FAMILY				
MEMBED OF DEMED WARTCHEMMT A MRHCMEE					
MEMBER OF PETER VARISCHETTI, A TRUSTEE	•				
(C) AMOUNT OF TRANSACTION: \$117,015					
(D) DESCRIPTION OF TRANSACTION: BUSINE	488				
			Schedule L	Form 99	90) 2021

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

UNIVERSITY OF PITTSBURGH

Employer identification number 25-0965591

Pai	rt I Types of Property							
	- special services	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	Method of contrib	, letermin	•	s
1	Art - Works of art	Х	2		.WRITTEN APPRAIS	AL		
2	Art - Historical treasures			,				
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	x	211	9 422 28	B.MEAN VALUE DATI	REC'	D	
10	Securities - Closely held stock		211	5,122,200	THE THE PARTY	11110		
11	Securities - Closely field stock Securities - Partnership, LLC, or							
''								
12	trust interests Securities - Miscellaneous							
	Securities - Miscellaneous Qualified conservation contribution -							
13								
44	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other			00.00	TID THIRD A DDD A TO			
18	Collectibles	Х	4	98,96	WRITTEN APPRAISA	У Г		
19	Food inventory		4	5 00:				
20	Drugs and medical supplies	X	1	6,90.	B.WRITTEN APPRAISA	ЯL		
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (LIFE INSURANC)	Х	1	· · · · · · · · · · · · · · · · · · ·	MEAN VALUE DATI	E REC		
26	Other (UPRIGHT PIANO)	Х	1	•).FMV			
27	Other (FOOTBALL TICK)	Х	2	500).FMV			
28	Other ()							
29	Number of Forms 8283 received by the organi	ization durin	g the tax year for c	ontributions				
	for which the organization completed Form 82	283, Part V, [Oonee Acknowledg	ement 29			4	
							Yes	No
30a	During the year, did the organization receive b	y contribution	on any property rep	orted in Part I, lines 1 thro	ough 28, that it			ĺ
	must hold for at least three years from the dat	e of the initia	al contribution, and	which isn't required to be	used for			
	exempt purposes for the entire holding period	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any nonstandard contri	butions?	31	Х	
32a	Does the organization hire or use third parties							
	contributions?		•	, ,		32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	column (c) fo	r a type of property	y for which column (a) is c	necked,			
-	describe in Part II.	. (-)), . levele 9, s	,	,			
LHA		the Instruc	tions for Form 99	0.	Schedule	M (Forr	n 990)	202

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE	M, PART I, COLUMN (B)
	TS REPORTED IN COLUMN (B) REPRESENTS A COMBINATION OF ITEMS
	AND TOTAL NUMBER OF CONTRIBUTIONS.
NECET VED	TOTAL NORDER OF CONTRIBUTIONS.
132142 11-17-	21 Schedule M (Form 990) 2021

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

UNIVERSITY OF PITTSBURGH	25-0965591
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
THE UNIVERSITY OF PITTSBURGH, FOUNDED IN 1787, IS ONE OF THE OLDEST	
INSTITUTIONS OF HIGHER EDUCATION IN THE UNITED STATES AND ONE OF THE	
NATION'S TOP PUBLIC RESEARCH UNIVERSITIES. FOR MORE THAN TWO	
CENTURIES, THE UNIVERSITY OF PITTSBURGH HAS SERVED THE NEEDS OF ITS	
HOME REGION, THE COMMONWEALTH OF PENNSYLVANIA, AND THE NATION AS A	
LEADER IN EDUCATION, A PIONEER IN RESEARCH AND A PARTNER IN COMMUNITY	
SERVICE.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
EXPENSES GRANTS REVENUE	
STUDENT SERVICES 236,109,979	
AUXILIARY ENTERPRISES 158,672,996 139,524,655	
LIBRARIES 51,965,094	
PUBLIC SERVICE 107,620,114 1,190,216	
EXPENSES \$ 817,609,846. INCL GRANTS OF \$ 1,190,216. REVENUE \$ 139,524,655	
FORM 990, PART VI, SECTION A, LINE 2:	
PATRICK D. GALLAGHER AND EDWARD J. GREFENSTETTE HAVE A BUSINESS	
RELATIONSHIP (ONE IS ON THE BOARD OF DIRECTORS OF THE OTHER'S EMPLOYER).	
FORM 990, PART VI, SECTION A, LINE 7A:	
YES. UNDER THE COMMONWEALTH ACT OF 1966 (THE "ACT"), TWELVE OF THE TRUSTEES	
ARE DESIGNATED AS COMMONWEALTH TRUSTEES. FOUR ARE APPOINTED BY THE	
GOVERNOR, WITH ADVICE AND CONSENT OF TWO-THIRDS OF ALL MEMBERS OF THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2021
	303aa.5 3 (1 01111 000) 202 1

132211 11-11-21

Schedule O (Form 990) 2021 Page 2

Name of the organization **Employer identification number** UNIVERSITY OF PITTSBURGH 25-0965591 SENATE. FOUR ARE APPOINTED BY THE PRESIDENT PRO TEMPORE OF THE SENATE. FOUR ARE APPOINTED BY THE SPEAKER OF THE HOUSE OF REPRESENTATIVES. FORM 990, PART VI, SECTION B, LINE 11B: PRIOR TO THE MAY 15, 2023 MEETING OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES, A COPY OF THE DRAFT IRS FORMS 990 AND 990-T FOR FISCAL YEAR 2022 WAS DISTRIBUTED TO EACH COMMITTEE MEMBER. AT THE MAY 15TH MEETING. THE CHIEF FINANCIAL OFFICER OF THE UNIVERSITY REVIEWED BOTH FORMS WITH THE AUDIT COMMITTEE. VOTING MEMBERS OF THE COMMITTEE INCLUDE OUTSIDE DIRECTORS, WHILE NONVOTING MEMBERS INCLUDE SENIOR UNIVERSITY ADMINISTRATORS AS WELL AS STUDENT, FACULTY, AND STAFF REPRESENTATIVES. THE REVIEW INCLUDED A DISCUSSION OF EACH SIGNIFICANT SECTION OF THE TWO FORMS HIGHLIGHTING RELEVANT CHANGES IN REQUIRED REPORTING AND ANY SIGNIFICANT VARIATIONS FROM PREVIOUS FILINGS. COMMITTEE MEMBERS WERE FREE TO ASK QUESTIONS AND PROVIDE FEEDBACK. SUBSEQUENT TO THE AUDIT COMMITTEE'S REVIEW, A COPY OF FORM 990 WAS MADE AVAILABLE TO EACH MEMBER OF THE ENTIRE BOARD OF TRUSTEES AND ALSO MADE AVAILABLE FOR PUBLIC INSPECTION. FORM 990, PART VI, SECTION B, LINE 12C: THE UNIVERSITY REQUIRES THAT ALL MEMBERS OF ITS BOARD OF TRUSTEES PROMPTLY DISCLOSE POTENTIAL OR ACTUAL CONFLICTS OF INTEREST AS THEY ARISE. AS WELL AS ANNUALLY COMPLETE A DISCLOSURE QUESTIONNAIRE. DISCLOSURES ARE SUBMITTED THROUGH THE UNIVERSITY'S OFFICE OF THE SECRETARY, REVIEWED BY THE UNIVERSITY'S OFFICE OF UNIVERSITY COUNSEL AND PROVIDED TO THE BOARD CHAIRPERSON AND THE CHAIRPERSON OF THE GOVERNANCE AND NOMINATING COMMITTEE FOR REVIEW AND POSSIBLE ACTION. THE GOVERNANCE AND NOMINATING COMMITTEE OF THE BOARD OF TRUSTEES OVERSEES TRUSTEE COMPLIANCE AND ADVISES, WHEN NECESSARY, ON MANAGING ANY POTENTIAL OR ACTUAL CONFLICTS. TRUSTEES

Schedule O (Form 990) 2021 Page 2

Name of the organization **Employer identification number** UNIVERSITY OF PITTSBURGH 25-0965591 GENERALLY ARE REQUIRED TO REFRAIN FROM PARTICIPATION ON MATTERS RELATED TO ANY CONFLICT. THE UNIVERSITY ALSO REQUIRES THAT EMPLOYEES, INCLUDING ITS OFFICERS DISCLOSE TRANSACTIONS AND PROPOSED TRANSACTIONS AS THEY ARISE WITH THE UNIVERSITY AS WELL AS ANNUALLY COMPLETE A CONFLICT OF INTEREST STATEMENT. ALL DISCLOSURES REQUIRED OF UNIVERSITY EMPLOYEES ARE MADE TO THE NEXT HIGHER ADMINISTRATOR IN THE EMPLOYEE'S SUPERVISORY LINE (IN THE CASE OF THE UNIVERSITY'S CHANCELLOR, SUCH DISCLOSURES ARE MADE TO THE BOARD CHAIRPERSON). THE RECIPIENT REVIEWS SUCH DISCLOSURES FOR REAL, APPARENT OR POTENTIAL CONFLICTS OF INTEREST AND THEN RECOMMENDS AND INITIATES ANY NECESSARY ACTIONS. EMPLOYEES ARE PROHIBITED FROM EXERCISING ANY UNIVERSITY DECISION-MAKING AUTHORITY OR FROM EXERTING INFLUENCE CONCERNING ANY ORGANIZATION OR TRANSACTION IN WHICH THEY OR A RELATED PARTY HAVE A PERSONAL INTEREST. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF TRUSTEES, BY RESOLUTION OF JUNE 13, 1991 (AMENDED JUNE 19, 1992), ESTABLISHED THE COMPENSATION COMMITTEE AS A STANDING COMMITTEE OF THE BOARD. THE COMPENSATION COMMITTEE IS AUTHORIZED TO DETERMINE THE CHANCELLOR'S COMPENSATION, INCLUDING FRINGE BENEFITS AND PERQUISITES. UPON THE RECOMMENDATION OF THE CHANCELLOR, THE COMPENSATION COMMITTEE ALSO DETERMINES THE COMPENSATION, INCLUDING FRINGE BENEFITS AND PERQUISITES, OF THE OFFICERS OF THE UNIVERSITY, EXCEPT ASSISTANT AND ASSOCIATE TREASURERS AND SECRETARIES. THE COMPENSATION COMMITTEE IS COMPRISED OF THE CHAIRPERSON OF THE BOARD THE CHAIR OF THE BUDGET COMMITTEE OF THE BOARD, AND OTHER TRUSTEES. NO

Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer identification number** 25-0965591 UNIVERSITY OF PITTSBURGH TRUSTEE SERVING ON THE COMPENSATION COMMITTEE HAS A CONFLICT OF INTEREST WITH RESPECT TO THE CHANCELLOR'S OR OFFICERS' COMPENSATION ARRANGEMENTS. TO ASSIST THE COMPENSATION COMMITTEE IN MEETING ITS RESPONSIBILITIES, THE SERVICES OF A GLOBAL PROFESSIONAL SERVICES FIRM ARE USED FOR COMPENSATION CONSULTING AND MARKET RESEARCH. THAT FIRM PROVIDES THE COMPENSATION COMMITTEE WITH COMPENSATION DATA FROM A GROUP OF COMPARABLE U.S. UNIVERSITIES. THE OFFICERS' COMPENSATION IS BENCHMARKED AGAINST THESE INSTITUTIONS. MINUTES OF THE COMPENSATION COMMITTEE'S MEETINGS ARE MAINTAINED IN THE OFFICE OF THE SECRETARY OF THE BOARD OF TRUSTEES. ACCESS TO MINUTES OF ALL PUBLIC MEETINGS OF THE BOARD OF TRUSTEES AND ITS COMMITTEES ARE AVAILABLE TO THE PUBLIC. FORM 990, PART VI, SECTION C, LINE 19: ALL RELEVANT DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC VIA THE UNIVERSITY'S WEB SITE AND/OR BY REQUEST. FORM 990, PART VI, SECTION B, LINE 13 AND 14 THE UNIVERSITY HAS A WHISTLEBLOWER AND DOCUMENT RETENTION AND DESTRUCTION POLICY. HOWEVER, THE POLICIES HAVE NOT BEEN ADOPTED BY THE

BOARD OF TRUSTEES.

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

NON PERIODIC CHANGES IN BENEFIT PLANS

208,932,451.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

2021

OMB No. 1545-0047

Open to Public Inspection

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

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

	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or Total income		End-of-year assets	Direct controlling
of disregarded entity		foreign country)			entity
3441 F STREET, LLC - 37-1893874					
251 LITTLE FALLS DRIVE					
WILMINGTON, DE 19808	REAL ESTATE HOLDING COMPANY	DELAWARE		2,015,036.	STONE MANSION, LLC
LIFEX LABS LLC - 83-1525466					
4200 FIFTH AVENUE					
PITTSBURGH, PA 15260	LIFE SCIENCES INCUBATOR	PENNSYLVANIA	1,492,403.	1,385,293.	LIFEX HOLDINGS, LLC
LIFEX HOLDINGS LLC - 82-3620757					
4200 FIFTH AVENUE	LIFE SCIENCES INCUBATOR				UNIVERSITY OF
PITTSBURGH, PA 15260	HOLDING COMPANY	PENNSYLVANIA	515,000.	498,167.	PITTSBURGH
STONE MANSION, LLC - 82-5055695					
4200 FIFTH AVENUE					UNIVERSITY OF
PITTSBURGH, PA 15260	REAL ESTATE HOLDING COMPANY	PENNSYLVANIA		3,757.	PITTSBURGH

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

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

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

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

Part I Continuation of Identification of Disregarded Entities

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

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

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	organiz	
UNIVERSITY OF PITTSBURGH TRUST - 25-1465279	OVERSIGHT OF CERTAIN			331(3)(3))		Yes	No
5TH AVE AND BIGELOW	UNIVERSITY AFFILIATED				UNIVERSITY OF		
PITTSBURGH PA 15260	ENTITIES AND ASSETS	PENNSYLVANIA	501(C)(3)	12C	PITTSBURGH	x	
UNIVERSITY DENTAL HEALTH SERVICES -	TO PROVIDE TEACHING AND	LENNOIDVANIA	001(0)(3)	120	I I I I I I I I I I I I I I I I I I I		<u> </u>
	PATIENT CARE IN A TEACHING				UNIVERSITY OF		
PA 15261	AND RESEARCH SETTING	PENNSYLVANIA	501(C)(3)	3	PITTSBURGH	x	
PITTSBURGH SKIN & CANCER FOUNDATION -	SUPPORT OF PROGRAMS,	PENNSILVANIA	501(C)(3)	1	PITISBURGH		
25-0965472, 190 LOTHROP STREET STE 145.	-				UNIVERSITY OF		
· · · · · · · · · · · · · · · · · · ·	RESEARCH, AND EDUCATION	DEMNIQUE VANTA	E01/G1/31	7			
PITTSBURGH, PA 15213	WITHIN DERMATOLOGY	PENNSYLVANIA	501(C)(3)	/	PITTSBURGH	X	<u> </u>
MPC CORPORATION - 25-1128244	RESEARCH ACTIVITIES TO AID						
5000 FORBES AVENUE	EDUCATIONAL AND ECONOMIC	DENNIGUE IZANTA	E01/G1/21	103			.,
PITTSBURGH, PA 15213	DEVELOPMENT IN PA	PENNSYLVANIA	501(C)(3)	12A		-	Х
UPMC - 25-1423657	SUPPORTING SUBSIDIARIES						
600 GRANT STREET 58TH FLOOR	HEALTHCARE, EDUCATION, AND		501/51/01				
PITTSBURGH, PA 15219	RESEARCH PROGRAMS	PENNSYLVANIA	501(C)(3)	12C		-	Х
DIETRICH FOUNDATION - 36-4711746	TO BENEFIT HIGHER						
600 GRANT STREET NO 5360	EDUCATION AND OTHER						
PITTSBURGH, PA 15219	CHARITABLE PURPOSES.	PENNSYLVANIA	501(C)(3)	12A			Х
LIFEX GREENHOUSE, INC 88-1083211	FACILITATE RESEARCH &						
2730 SIDNEY ST, STE 300	ECONOMIC DEVELOPMENT IN				LIFEX HOLDINGS,		
PITTSBURGH, PA 15203	THE LIFE SCIENCES INDUSTRY	PENNSYLVANIA	501(C)(3)	8	FFG	Х	
	-						

Page 2

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)	(b)	(c)	(d)	(e)	(f)	(g)	/1	h)	(i)	(j	, T	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign		Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of end-of-year assets	Disprop alloca		Code V-UBI amount in box 20 of Schedule	Gene	ral or l	Percentage
		country)		Sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
-	1											
-										\vdash		
	-											
-	1											
	1											
	-											
	1											
	1											

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec.	i) tion
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(b)(13) rolled
		country)						Yes	No
TSH CORPORATION - 25-1520417			UNIVERSITY OF						1
124 CATHEDRAL OF LEARNING			PITTSBURGH						1
PITTSBURGH, PA 15260	DORMANT	PA	TRUST	C CORP			5.00%	Х	
FORBES-SCHENLEY LAND COMPANY - EIN UNKNOWN									
5TH AVE AND BIGELOW			UNIVERSITY OF						1
PITTSBURGH, PA 15260	DORMANT	PA	PITTSBURGH	C CORP			100.00%	х	1
SCHENLEY PARK APARTMENTS COMPANY - EIN									
UNKNOWN, 5TH AVE AND BIGELOW, PITTSBURGH, PA			UNIVERSITY OF						1
15260	DORMANT	PA	PITTSBURGH	C CORP			100.00%	Х	
CARRILLO STEAM PRODUCTION ASSOCIATION, LLC -	SERVICE CORPORATION								
27-1073489, 400 EUREKA BUILDING, 3400 FORBES	TO MANAGE THE STEAM		UNIVERSITY OF						1
AVENUE, PITTSBURGH, PA 15260	PLANT	PA	PITTSBURGH	C CORP		195,313.	75.00%	Х	
VINCENT PAYMENT SOLUTIONS - 82-1101143									
2711 CENTERVILLE ROAD	PAYMENT SOLUTION		UNIVERSITY OF						1
WILMINGTON, DE 19808	PROVIDER	DE	PITTSBURGH	C CORP			50.00%		Х

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	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		tion (b)(13) rolled tity?
CHARITABLE REMAINDER TRUSTS(2)	CHARITABLE TRUST		UNIVERSITY OF PITTSBURGH					Yes	No

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d	Х	
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		х
g	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
-				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		х
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p	Х	
q	Reimbursement paid by related organization(s) for expenses	1q	Х	
•				
r	Other transfer of cash or property to related organization(s)	1r		х
	Other transfer of cash or property from related organization(s)	1s		Х
	If the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) JOHNSTOWN EDUCATIONAL FOUNDATION	С	156,553.	CASH
(2) UNIVERSITY DENTAL HEALTH SERVICES	0	1,861,639.	CASH
(3) UNIVERSITY DENTAL HEALTH SERVICES	Q	461,538.	CASH
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>	112		

Page 3

Schedule R (Form 990) 2021 UNIVERSITY OF PITTSBURGH 25-0965591 Page 4

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

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

(a)	(b)	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e)	(f)	(g)	(r	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related_unrelated	partners s	Share of	Share of	Dispro	opor- ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag	Percentag
of entity		(state or foreign country)	excluded from tax under	orgs.?	total income	end-of-year assets	allocat	ions?	of Schedule K-1	partne	ownersnip
		Country)	Sections 5 (2-5 (4)	Yes N	o income	assets	Yes	No	(F01111 1065)	Yes N	10
				\vdash						\vdash	
										\sqcup	
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	1										
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University of Pittsburgh Top 25 Highest Paid Non-Officers for the Year Ended June 30, 2022 Right-To-Know Disclosure

Ranking	Name	Total Gross					
1	Narduzzi, Patrick	\$	5,566,507.99				
2	Capel, Felton	\$	3,514,356.28				
3	Levine, Arthur	\$	1,429,080.62				
4	Lyke, Heather	\$	774,260.14				
5	Bates, Randy	\$	701,875.38				
6	Becich, Michael	\$	673,000.04				
7	White, Lance	\$	640,768.78				
8	Lima, Michael	\$	624,870.19				
9	Imbrogno, Michael	\$	629,102.49				
10	Davitt, Kristin	\$	615,768.78				
11	Costello, Bernard	\$	615,000.00				
12	Almodovar, David	\$	613,730.74				
13	James, Alton	\$	612,340.74				
14	Reis, Steven	\$	611,000.00				
15	Gronenborn, Angela	\$	570,605.00				
16	Silverstein, Jonathan	\$	565,625.00				
17	Partridge, Charles	\$	541,667.04				
18	Shlomchik, Mark	\$	532,499.96				
19	Strick, Peter	\$	530,250.00				
20	Fisher, Daniel	\$	521,833.41				
21	Vesterlund, Lise	\$	525,500.00				
22	Denis, David	\$	500,999.96				
23	Freeman, Bruce	\$	479,750.00				
24	Bell, Michael	\$	474,422.82				
25	Whipple, Mark	\$	467,391.68				