See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
UNIVERSITY OF ROCHESTER

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
910 GENESEE STREET
BROOKS LANDING BUSINESS CENTER

City or town, state or country, and ZIP + 4
ROCHESTER, NY 146113847

D Employer identification number
16-0743209

E Telephone number
(585) 275-2800

G Gross receipts $ 3,176,987,434

F Name and address of principal officer
RONALD J PAPROCKI
208 WALLIS HALL
ROCHESTER, NY 14627

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

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

H(c) Group exemption number ▶

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

J Website: ▶ www rochester edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1850 | **M** State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
PROVISION OF HIGHER EDUCATION IN THE LIBERAL ARTS AND SCIENCES, MEDICINE AND DENTISTRY, NURSING AND MUSIC, AS WELL AS OPERATING AND MAINTAINING THE STRONG MEMORIAL HOSPITAL

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

Activities & Governance

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	48
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	36
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	**5**	27,058
6	Total number of volunteers (estimate if necessary)	**6**	5,441
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	-519,425
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	-4,398,748

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	83,683,702	322,819,223
9	Program service revenue (Part VIII, line 2g)	2,178,905,911	2,071,311,836
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	131,953,464	141,996,456
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	39,730,512	43,656,284
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,434,273,589	2,579,783,799
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	132,221,910	142,320,545
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,397,655,302	1,469,511,818
16a	Professional fundraising fees (Part IX, column (A), line 11e)	353,189	385,904
b	Total fundraising expenses (Part IX, column (D), line 25) ▶36,343,393		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	802,818,974	867,074,944
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,333,049,375	2,479,293,211
19	Revenue less expenses Subtract line 18 from line 12	101,224,214	100,490,588

Revenue

Expenses

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	3,657,566,545	3,966,515,688
21	Total liabilities (Part X, line 26)	1,432,817,706	1,470,084,246
22	Net assets or fund balances Subtract line 21 from line 20	2,224,748,839	2,496,431,442

Net Assets or Fund Balances

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2012-05-11

RONALD J PAPROCKI SR VP ADMIN & FINANCE, CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶☐	PTIN
Firm's name ▶ PricewaterhouseCoopers LLP				Firm's EIN ▶
Firm's address ▶ 2001 MARKET ST SUITE 1700 PHILADELPHIA, PA 19103				Phone no ▶ (267) 330-3000

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☑

1 Briefly describe the organization's mission

PROVISION OF HIGHER EDUCATION IN THE LIBERAL ARTS AND SCIENCES, MEDICINE AND DENTISTRY, NURSING AND MUSIC, AS WELL AS OPERATING AND MAINTAINING THE STRONG MEMORIAL HOSPITAL

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 549,643,450 including grants of $ 142,320,545) (Revenue $ 382,350,640)

EDUCATIONAL ACTIVITIES - THE UNIVERSITY IS COMPRISED OF SIX SCHOOLS OFFERING PROGRAMS FROM UNDERGRADUATE TO POST-DOCTORAL DEGREES THESE ARE THE SCHOOL OF ARTS AND SCIENCES, THE HAJIM SCHOOL OF ENGINEERING, THE WARNER SCHOOL OF EDUCATION AND HUMAN DEVELOPMENT, EASTMAN SCHOOL OF MUSIC, SIMON GRADUATE SCHOOL OF BUSINESS ADMINISTRATION, SCHOOL OF NURSING, AND SCHOOL OF MEDICINE AND DENTISTRY THERE ARE ALSO A NUMBER OF IMPORTANT CENTERS OF ACADEMIC EXCELLENCE, FOR EXAMPLE, THE INSTITUTE OF OPTICS, THE LABORATORY FOR LASER ENERGETICS, THE WILMOT CANCER CENTER, AND THE FLAUM EYE INSTITUTE THE FULL-TIME FACULTY OF THE SCHOOL OF MEDICINE AND DENTISTRY PROVIDE CLINICAL SERVICES AS PART OF THE ACADEMIC MEDICAL PROGRAM, THIS ACTIVITY OCCURS 100 PERCENT WITHIN THE MEDICAL SCHOOL AND IS INTERNALLY ORGANIZED AND SUPERVISED AS URMFG OR UNIVERSITY OF ROCHESTER MEDICAL FACULTY GROUP THERE ARE 1,329 FULL-TIME TENURED FACULTY MEMBERS AND 9,542 UNDERGRADUATE AND GRADUATE STUDENTS ENROLLED IN THE UNIVERSITY THE UNIVERSITY HAS ALWAYS PLACED FINANCIAL AID FOR ITS STUDENTS AMONG ITS HIGHEST PRIORITIES MORE THAN 90 PERCENT OF OUR UNDERGRADUATES RECEIVE FINANCIAL AID THE AVERAGE SCHOLARSHIP COVERS ABOUT 40 PERCENT OF THE COST OF ATTENDING THE UNIVERSITY OF ROCHESTER THE UNIVERSITY IS COMMITTED TO OFFERING THE HIGHEST QUALITY EDUCATION TO ITS STUDENTS, REGARDLESS OF THEIR ECONOMIC CIRCUMSTANCES OR BACKGROUND FOR EXAMPLE, THE UNIVERSITY HAS A PROGRAM TO EXPAND HIGHER EDUCATION OPPORTUNITIES FOR STUDENTS FROM THE ROCHESTER CITY SCHOOL DISTRICT (RCSD), A DISTRICT WITH ONE OF THE HIGHEST POVERTY AND SCHOOL DROPOUT RATES IN NEW YORK STATE THE UNIVERSITY PROVIDES $25,000 PER YEAR FOR FOUR YEARS TO EVERY GRADUATE OF THE SCHOOL DISTRICT WHO IS ADMITTED TO THE UNIVERSITY'S COLLEGE OF ARTS, SCIENCES AND ENGINEERING, THIS IS EQUIVALENT TO AN AWARD OF $100,000 FOR EACH STUDENT THROUGH THE ENDOWMENT, THE UNIVERSITY PERPETUATES AND ENHANCES ITS EDUCATIONAL, RESEARCH, CLINICAL CARE PROGRAMS AND PUBLIC SERVICE MISSIONS THIS COMMITMENT REQUIRES AN ENDOWMENT PAYOUT OF 5 8 PERCENT CALCULATED ON A ROLLING FIVE-YEAR AVERAGE OF THE ENDOWMENT'S MARKET VALUE THE UNIVERSITY'S ENDOWMENT CONSISTS LARGELY OF INDIVIDUAL FUNDS THANKS TO THE GENEROSITY OF CHARITABLE DONORS THE DONORS OF THESE GIFTS OFTEN SPECIFY AND RESTRICT THE PURPOSES FOR WHICH THE INCOME MAY BE SPENT TO ENSURE LONG-TERM BENEFITS

4b (Code) (Expenses $ 334,396,279 including grants of $) (Revenue $ 176,001,401)

SPONSORED RESEARCH ACTIVITIES - THE UNIVERSITY IS A CENTER FOR PROGRAMS OF RESEARCH MUCH OF THE RESEARCH IS FUNDED IN SUBSTANTIAL PART BY PRIVATE AND GOVERNMENTAL AGENCIES RESEARCH IS UNDERTAKEN IN THE PUBLICS' INTEREST AND ALL RESULTS ARE AVAILABLE TO THE PUBLIC DURING THE 2010-2011 FISCAL YEAR, THERE WERE 5,971 GRANTS AND CONTRACTS IN EFFECT THAT TOTALED $435,906,888 IN REVENUE

4c (Code) (Expenses $ 1,359,656,083 including grants of $) (Revenue $ 1,450,748,374)

SERVICES OF HOSPITAL AND CLINICS- THE UNIVERSITY OF ROCHESTER (THE "UNIVERSITY") TO SUPPORT THE TEACHING AND RESEARCH MISSIONS OF ITS SCHOOL OF MEDICINE AND DENTISTRY AND ITS SCHOOL OF NURSING OPERATES A TERTIARY CARE, TEACHING HOSPITAL THAT PROVIDES HEALTH CARE SERVICES THROUGH ITS INPATIENT, OUTPATIENT AND EMERGENCY FACILITIES THE MEDICAL STAFF OF THE HOSPITAL IS THE FACULTY OF THE SCHOOL OF MEDICINE AND DENTISTRY THE ACADEMIC DEPARTMENT CHAIRS ALSO FUNCTION AS THE DEPARTMENT HEADS OF THE MEDICAL SERVICES IN THE HOSPITAL THERE ARE EXTENSIVE INTERN AND RESIDENT PROGRAMS THE HOSPITAL PROVIDES CARE REGARDLESS OF THE PATIENT'S ABILITY TO PAY FOR SERVICES THERE WERE 256,053 PATIENT DAYS AND 1,332,477 EMERGENCY AND CLINICAL VISITS DURING THE 2010-2011 FISCAL YEAR IN ADDITION TO BEING A TEACHING FACILITY, THE HOSPITAL OPERATES IN A CHARITABLE MANNER CONSISTENT WITH THE REQUIREMENTS OF INTERNAL REVENUE CODE SECTION 501(C)(3) AND THE "COMMUNITY BENEFIT STANDARD" OF IRS REVENUE RULING 69-545 IN THIS REGARD, THE GOVERNING BODY OF THE ORGANIZATION IS COMPOSED OF PROMINENT CITIZENS IN THE COMMUNITY MEDICAL STAFF PRIVILEGES IN THE HOSPITAL ARE AVAILABLE TO ALL QUALIFIED PHYSICIANS IN THE AREA WHO ALSO CAN QUALIFY AS FULL OR PART-TIME FACULTY OF THE SCHOOL OF MEDICINE AND DENTISTRY, THE HOSPITAL MAINTAINS A FULL-TIME EMERGENCY ROOM OPEN TO ALL REGARDLESS OF ABILITY TO PAY, THE HOSPITAL PROVIDES CARE TO NEEDY MEMBERS OF ITS COMMUNITY WITH ITS CHARITY CARE POLICY REGARDLESS OF THEIR ABILITY TO PAY FOR SERVICES AND ADMITS AS PATIENTS THOSE ABLE TO PAY FOR CARE, EITHER THEMSELVES OR THROUGH THIRD-PARTY PAYERS SUCH AS PRIVATE HEALTH INSURANCE OR GOVERNMENT PROGRAMS SUCH AS MEDICARE AND MEDICAID THE HOSPITAL'S EXCESS FUNDS ARE GENERALLY APPLIED TO EXPANSION AND REPLACEMENT OF EXISTING FACILITIES AND EQUIPMENT, MEDICAL RESEARCH, AMORTIZATION OF INDEBTEDNESS, IMPROVEMENTS IN PATIENT CARE, COMMUNITY BENEFIT ACTIVITIES AND CHARITY CARE

4d Other program services (Describe in Schedule O)

(Expenses $ 90,228,112 including grants of $) (Revenue $ 62,211,421)

4e **Total program service expenses** ▶ $ 2,333,923,924

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a	Yes	
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	Yes	

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**		No
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	**35**	Yes	
a	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* ☑ **Yes** ☐ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . .

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	14,499		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	27,058		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .		5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		No
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		No
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O		13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	48		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	36		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . .	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			No
6	Does the organization have members or stockholders?	6			No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a			No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			No

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

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

Section C. Disclosure

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

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

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

RONALD J PAPROCKI
208 WALLIS HALL
ROCHESTER, NY 14627
(585) 275-2800

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

Check if Schedule O contains a response to any question 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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b **Sub-Total** . . . . . ▶										
c **Total from continuation sheets to Part VII, Section A** . . . . ▶										
d **Total (add lines 1b and 1c)** . . . . . ▶								14,697,094	0	1,843,459

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 2,066

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
LECHASE CONSTRUCTION SERVICES 300 TROLLEY BLVD ROCHESTER, NY 14606	CONSTRUCTION SRVCS	14,699,272
THE PIKE COMPANY INC ONE CIRCLE STREET ROCHESTER, NY 14607	CONSTRUCTION SRVCS	7,890,372
EXECUSCRIBE INC 1320 UNIVERSITY AVE ROCHESTER, NY 14607	TRANSCRIPTION SRVCS	3,866,561
DGA BUILDERS INC 333 W COMMERCIAL ST SUITE 1500 EAST ROCHESTER, NY 14445	CONSTRUCTION SRVCS	2,838,566
POSTLER AND JAECKLE CORP 615 SOUTH AVENUE ROCHESTER, NY 14620	CONSTRUCTION SRVCS	2,370,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 217

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . 1a	284,000				
	b Membership dues 1b	0				
	c Fundraising events 1c	2,210,338				
	d Related organizations . . . 1d	2,517,000				
	e Government grants (contributions) 1e	259,905,487				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	57,902,398				
	g Noncash contributions included in lines 1a-1f $	12,560,832				
	h **Total.** Add lines 1a-1f . . . . . ▶		322,819,223			
Program Service Revenue		Business Code				
	2a SERVICES OF HOSPITALS AND CLINICS	622110	1,450,748,374	1,447,445,080	0	3,303,294
	b EDUCATIONAL ACTIVITIES	611310	382,350,640	382,325,959	0	24,681
	c SPONSORED RESEARCH ACTIVITIES/CONTRACTS	900099	176,001,401	176,001,401	0	0
	d AUXILIARY ENTERPRISES	900099	62,211,421	39,542,934	0	22,668,487
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . . ▶		2,071,311,836			
	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		62,970,716			62,970,716
	4 Income from investment of tax-exempt bond proceeds . . ▶		0			
	5 Royalties . . . . . ▶		42,318,469			42,318,469
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . . ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	676,585,263				
	b Less cost or other basis and sales expenses	596,525,263				
	c Gain or (loss)	80,060,000	-1,034,260			
	d Net gain or (loss) . . . . . ▶		79,025,740		-1,034,260	80,060,000
Other Revenue	8a Gross income from fundraising events (not including $ 2,210,338 of contributions reported on line 1c) See Part IV, line 18 . . . a	1,501,352				
	b Less direct expenses . . . b	678,372				
	c Net income or (loss) from fundraising events . . ▶		822,980			822,980
	9a Gross income from gaming activities See Part IV, line 19 . a					
	b Less direct expenses . . . . . b					
	c Net income or (loss) from gaming activities . . . ▶		0			
	10a Gross sales of inventory, less returns and allowances . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶		0			
	Miscellaneous Revenue	Business Code				
	11a VIVARIUM	900099	367,961		367,961	
	b ATHLETIC FEES	900099	31,980		31,980	
	c MAG ROOM RENTAL	900099	77,585		77,585	
	d All other revenue		37,309		37,309	
	e **Total.** Add lines 11a–11d . . . . . ▶		514,835			
	12 **Total revenue.** See Instructions . . . ▶		2,579,783,799	2,045,315,374	-519,425	212,168,627

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	0		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	142,320,545	142,320,545		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	8,397,721	5,327,212	2,498,886	571,623
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	881,600	704,627	176,973	0
7 Other salaries and wages	1,133,354,674	1,084,084,068	31,036,441	18,234,165
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	69,790,848	66,866,442	1,863,943	1,060,463
9 Other employee benefits	183,711,396	176,013,442	4,906,484	2,791,470
10 Payroll taxes	73,375,579	70,300,964	1,959,683	1,114,932
a Fees for services (non-employees) Management	2,070,781	2,070,781	0	0
b Legal	3,023,160	2,846,645	152,088	24,427
c Accounting	784,394	0	784,394	0
d Lobbying	308,502	308,502	0	0
e Professional fundraising services *See Part IV, line 17*	385,904			385,904
f Investment management fees	32,427,285	0	32,427,285	0
g Other	92,563,711	88,276,633	2,399,428	1,887,650
12 Advertising and promotion	1,569,263	1,557,396	1,280	10,587
13 Office expenses	337,960,308	331,088,121	4,140,375	2,731,812
14 Information technology	13,276,191	13,063,639	91,925	120,627
15 Royalties	0	0	0	0
16 Occupancy	115,668,806	114,600,673	977,772	90,361
17 Travel	14,717,271	10,057,890	731,123	3,928,258
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	10,774,582	9,935,357	459,216	380,009
20 Interest	26,477,582	23,650,684	2,302,572	524,326
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	141,519,746	131,750,000	9,025,812	743,934
23 Insurance	13,034,939	12,311,845	723,094	0
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a PROVISION FOR DOUBTFUL ACCTS	20,872,000	20,872,000	0	0
b FOOD SERVICE PROGRAM	14,362,696	14,362,696	0	0
c NYS REVENUE ASSESSMENT PMTS	9,706,194	9,706,194	0	0
d OTHER-UBIT STATE TAX PAID	29,459	29,459	0	0
e OTHER MISC EXPENSES	15,928,074	1,818,109	12,367,120	1,742,845
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	2,479,293,211	2,333,923,924	109,025,894	36,343,393
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		221,742,564	2	283,352,340
	3	Pledges and grants receivable, net		88,556,477	3	93,850,735
	4	Accounts receivable, net		233,031,048	4	252,159,405
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net		19,648,353	7	19,523,816
	8	Inventories for sale or use		22,098,501	8	23,001,407
	9	Prepaid expenses and deferred charges		18,979,886	9	17,493,732
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 2,766,329,123			
	b	Less accumulated depreciation	10b 1,476,605,666	1,252,107,600	10c	1,289,723,457
	11	Investments—publicly traded securities		524,747,493	11	718,757,270
	12	Investments—other securities See Part IV, line 11		1,218,646,554	12	1,202,839,565
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		58,008,070	15	65,813,961
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		3,657,566,545	16	3,966,515,688
Liabilities	17	Accounts payable and accrued expenses		271,427,910	17	292,273,123
	18	Grants payable			18	
	19	Deferred revenue		26,879,986	19	27,791,541
	20	Tax-exempt bond liabilities		633,480,147	20	613,158,382
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		35,991,634	23	60,652,953
	24	Unsecured notes and loans payable to unrelated third parties		8,577,171	24	8,578,935
	25	Other liabilities Complete Part X of Schedule D		456,461,218	25	467,629,312
	26	**Total liabilities.** Add lines 17 through 25		1,432,817,706	26	1,470,084,246
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,741,054,121	27	1,654,581,172
	28	Temporarily restricted net assets		163,834,637	28	488,551,400
	29	Permanently restricted net assets		319,860,081	29	353,298,870
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		2,224,748,839	33	2,496,431,442
	34	Total liabilities and net assets/fund balances		3,657,566,545	34	3,966,515,688

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,579,783,799
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,479,293,211
3	Revenue less expenses Subtract line 2 from line 1	3	100,490,588
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,224,748,839
5	Other changes in net assets or fund balances (explain in Schedule O)	5	171,192,015
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,496,431,442

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

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

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

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

2 ☑ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

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

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

_____

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

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

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

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

9 ☐ An organization that normally receives (1) more than 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)

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 IV)						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization	Employer identification number
UNIVERSITY OF ROCHESTER	16-0743209

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

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

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

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

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

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

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

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

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

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

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

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

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

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

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

A Check ☐ if the filing organization belongs to an affiliated group
B Check ☐ if the filing organization checked box A and "limited control" provisions apply

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

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	0
d	Mailings to members, legislators, or the public?	Yes		2,834
e	Publications, or published or broadcast statements?		No	0
f	Grants to other organizations for lobbying purposes?		No	0
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		452,126
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	0
i	Other activities? If "Yes," describe in Part IV	Yes		7,092
j	Total lines 1c through 1i			462,052
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
DETAIL OF LOBBYING ACTIVITIES	SCHEDULE C, PART II-B	THE UNIVERSITY ADVANCES ITS MISSIONS (EDUCATION, RESEARCH, HEALTH CARE AND COMMUNITY HEALTH) AMONG NATIONAL, STATE AND LOCAL ELECTED OFFICIALS, THEIR STAFF, OUR SURROUNDING COMMUNITY, AND WITH GOVERNMENT AGENCIES AT ALL LEVELS THE UNIVERSITY INTERACTS WITH PEER INSTITUTIONS, D C -AND ALBANY-BASED HIGHER EDUCATION AND MEDICAL ASSOCIATIONS, SCIENTIFIC COALITIONS AND SOCIETIES, AND CONSULTANTS TO ADVANCE ITS INTERESTS THROUGH POLICY AND LEGISLATION
DETAIL OF OTHER LOBBYING ACTIIVTIES	SCHEDULE C, PART II-B, LINE 1i	AMOUNT REPORTED IS A TOTAL OF MEMBERSHIP DUES PAID TO ASSOCIATIONS AND ORGANIZATIONS WHO LOBBY ON BEHALF OF ALL MEMBERS, INCLUDING THE UNIVERSITY OF ROCHESTER
REVOCATION OF 501(H) ELECTION		THE UNIVERSITY REVOKED ITS ELECTION UNDER SECTION 501(H), EFFECTIVE FOR ITS TAX YEAR ENDING JUNE 30, 2011

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	13	0
2	Aggregate contributions to (during year)	290,348	0
3	Aggregate grants from (during year)	1,205,350	0
4	Aggregate value at end of year	4,081,800	0

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ 105,700

(ii) Assets included in Form 990, Part X ▶ $ 30,430,922

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ 0

b Assets included in Form 990, Part X ▶ $ 0

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

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

- a ☑ Public exhibition
- b ☑ Scholarly research
- c ☑ Preservation for future generations
- d ☑ Loan or exchange programs
- e ☐ Other

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

		(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a	Beginning of year balance	1,308,342,000	1,226,281,000	1,629,458,000		
b	Contributions	20,773,000	15,354,000	13,510,000		
c	Investment earnings or losses	252,741,000	148,151,000	-330,619,000		
d	Grants or scholarships	11,153,000	10,875,000	9,699,000		
e	Other expenditures for facilities and programs	53,118,000	70,569,000	76,369,000		
f	Administrative expenses					
g	End of year balance	1,517,585,000	1,308,342,000	1,226,281,000		

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 55 260 %
- b Permanent endowment ▶ 44 660 %
- c Term endowment ▶ 0 080 %

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

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

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,424,928		4,424,928
b Buildings		1,727,607,991	876,170,585	851,437,406
c Leasehold improvements		7,312,747	2,724,441	4,588,306
d Equipment		679,044,710	465,164,052	213,880,658
e Other		347,938,747	132,546,588	215,392,159
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				1,289,723,457

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) OPERATING INVESTMENTS	202,874,109	F
(B) CASH & CASH EQUIVALENTS	136,434,497	F
(C) INTERESTS	831,900,744	F
(D) OTHER INVESTMENTS	31,630,215	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	1,202,839,565	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
THIRD PARTY SETTLEMENTS	82,291,000
RETIREMENT & POST EMPLOYMEN	256,705,295
ASSET RETIREMENT OBLIGATION	17,729,257
FOR STUDENT LOANS	16,003,766
SECURITIES LENDING LIABILITIES	69,282,242
SPONSORED RESEARCH	25,617,752
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	467,629,312

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

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

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				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	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**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SUPPLEMENTAL DISCLOSURES		DESCRIPTION OF DONOR ADVISED FUNDS SCHEDULE D, PART I, LINE 1 THE UNIVERSITY OF ROCHESTER ("THE UNIVERSITY") OFFERS ITS DONORS THE OPPORTUNITY TO USE CONTRIBUTIONS TO CREATE DONOR-ADVISED FUNDS A DONOR GENERALLY MAY ESTABLISH A DONOR-ADVISED FUND WITH THE UNIVERSITY BY SIGNING THE AGREEMENT AND THEN MAKING CONTRIBUTIONS TO THE FUND THE DONOR IS ALLOWED TO RECOMMEND THE INVESTMENT OF THE FUND INTO EITHER A MONEY MARKET FUND OR THE UNIVERSITY'S GENERAL ENDOWMENT THE DONOR MAY SERVE, OR MAY DESIGNATE ANOTHER PERSON TO SERVE, AS THE FUND ADVISOR, WHO MAKES GRANT RECOMMENDATIONS TO THE UNIVERSITY THE GRANT RECOMMENDATIONS ARE NOT BINDING AND WILL BE SUBJECT TO THE UNIVERSITY'S DILIGENT REVIEW ---------- DESCRIPTION OF THE ORGANIZATION'S COLLECTIONS SCHEDULE D, PART III, LINE 4 THE UNIVERSITY'S GALLERY MAINTAINS BROAD COLLECTIONS, COMPRISING NEARLY 11,000 OBJECTS SPANNING 5,000 YEARS OF ART HISTORY, THAT PROVIDES THE FOUNDATION FOR OUR ROLE AS A SIGNIFICANT EDUCATIONAL CENTER COMMITTED TO BROADENING PEOPLES' UNDERSTANDING OF WORLD CULTURES, ART AND HISTORY ---------- INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS FORM 990, SCHEDULE D, PART V, LINE 4 THE UNIVERSITY'S ENDOWMENT FUNDS ARE UTILIZED IN FURTHERANCE OF THE ORGANIZATION'S EXEMPT PURPOSES, INCLUDING THE PROVISION OF PERPETUAL ANNUAL SUPPORT FOR STUDENT FINANCIAL AID AND FACULTY SALARIES, AS WELL AS FOR CERTAIN FACILITIES AND ACADEMIC PROGRAMS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I

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

Part II Supplemental Information

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

Identifier	Return Reference	Explanation
NONDISCRIMINATION POLICY STATEMENT	SCHEDULE E, LINE 3	ALL PUBLISHED UNIVERSITY OF ROCHESTER OPPORTUNITY ADVERTISEMENTS INCLUDE THE FOLLOWING STATEMENT "THE UNIVERSITY OF ROCHESTER IS AN EQUAL OPPORTUNITY EMPLOYER" IN ADDITION, THE UNIVERSITY OF ROCHESTER'S NONDISCRIMINATION POLICY IS ADVERTISED TO PROSPECTIVE STUDENTS AND OTHERS IN THE COMMUNITY SERVED BY THE UNIVERSITY OF ROCHESTER THROUGH AN EQUAL OPPORTUNITY STATEMENT USED IN A WIDE VARIETY OF UNIVERSITY PROSPECTUS (FOR UNIVERSITY UNDERGRADUATES), UNDERGRADUATE BULLETINS AND GRADUATE BULLETINS THE STATEMENT, WHICH ALSO APPEARS ON THE UNIVERSITY WEBSITE ON DIVERSITY, READS AS FOLLOWS "THE UNIVERSITY OF ROCHESTER VALUES DIVERSITY AND IS COMMITTED TO EQUAL OPPORTUNITY FOR PERSONS REGARDLESS OF AGE, COLOR, DISABILITY, ETHNICITY, GENDER IDENTITY OR EXPRESSION, GENETIC INFORMATION, MARITAL STATUS, MILITARY/VETERAN STATUS, NATIONAL ORIGIN, RACE, RELIGION/CREED, SEX, SEXUAL ORIENTATION OR ANY OTHER STATUS PROTECTED BY LAW FURTHER, THE UNIVERSITY COMPLIES WITH ALL APPLICABLE NON-DISCRIMINATION LAWS IN THE ADMINISTRATION OF ITS POLICIES, ADMISSIONS, EMPLOYMENT, AND ACCESS TO AND TREATMENT IN UNIVERSITY PROGRAMS AND ACTIVITIES QUESTIONS ON COMPLIANCE SHOULD BE DIRECTED TO THE PARTICULAR SCHOOL OR DEPARTMENT AND/OR TO THE UNIVERSITY'S INTERCESSOR, UNIVERSITY OF ROCHESTER, P O BOX 270039, ROCHESTER, NY 14627-0039 PHONE (585) 275-9125 THE UNIVERSITY OF ROCHESTER ALSO POSTS A "STATEMENT OF EDUCATIONAL PHILOSOPHY" WHICH IS AMPLIFICATION OF THE NONDISCRIMINATION STATEMENT SEE HTTP://WWW ROCHESTER EDU/DIVERSITY/PHILOSOPHY HTML
FINANCIAL AID/ASSISTANCE FROM A GOVERNMENTAL AGENCY	SCHEDULE E, LINE 6a	THE UNIVERSITY OF ROCHESTER RECEIVES FINANCIAL ASSISTANCE FUNDS FOR STUDENTS, AS PROVIDED BY HHS PROGRAMS, AND HAS GOVERNMENT RESEARCH CONTRACTS AND GRANTS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

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

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

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	See Add'l Data					
3a	Sub-total	1	51			4,176,413
b	Total from continuation sheets to Part I					486,099,311
c	**Totals** (add lines 3a and 3b)	1	51			490,275,724

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . ▶ ☐
Use Part V 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 of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

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

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

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

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☑ Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☑ Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☑ Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☑ Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
SUBAWARDS ISSUED TO FOREIGN ENTITIES	SCHEDULE F, PART I, LINE 3 (c)	IN FURTHERANCE OF ITS RESEARCH ACTIVITIES, THE UNIVERSITY OF ROCHESTER MAKES SUB-AWARDS TO OTHER FOREIGN ORGANIZATIONS THAT PERFORM RESEARCH IN CONNECTION WITH RESEARCH GRANTS AWARDED TO THE UNIVERSITY THE UNIVERSITY DOES NOT CATEGORIZE THESE SUB-AWARDS AS "FOREIGN ACTIVITIES OR GRANTS" FOR FORM 990, SCHEDULE F REPORTING, SINCE THE FOREIGN RECIPIENT ORGANIZATIONS PERFORM RESEARCH SERVICES FOR THE UNIVERSITY AND ARE CONSIDERED INDEPENDENT CONTRACTORS WHICH SERVE THE DIRECT NEEDS OF THE UNIVERSITY

Additional Data

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	CLINICAL TRIALS	975
Europe (Including Iceland and Greenland)			Program Services	CLINICAL TRIALS	4,225
Central America and the Caribbean		1	Program Services	CONDUCTED RESEARCH	191,783
East Asia and the Pacific		9	Program Services	CONDUCTED RESEARCH	316,252
Europe (Including Iceland and Greenland)	1	16	Program Services	CONDUCTED RESEARCH	1,538,168
Middle East and North Africa			Program Services	CONDUCTED RESEARCH	20,532
North America		22	Program Services	CONDUCTED RESEARCH	485,210
South America			Program Services	CONDUCTED RESEARCH	35,767
South Asia			Program Services	CONDUCTED RESEARCH	14,307
Sub-Saharan Africa		3	Program Services	CONDUCTED RESEARCH	965,810
East Asia and the Pacific			Fundraising		16,483
Europe (Including Iceland and Greenland)			Fundraising		23,406
South Asia			Fundraising		2,410
Central America and the Caribbean			Program Services	PRESENTATION AT CONFER	4,108
East Asia and the Pacific			Program Services	PRESENTATION AT CONFER	152,109
Europe (Including Iceland and Greenland)			Program Services	PRESENTATION AT CONFER	376,051
Middle East and North Africa			Program Services	PRESENTATION AT CONFER	28,817
North America			Program Services	PRESENTATION AT CONFER	116,996
Russia and the Newly Independent States			Program Services	PRESENTATION AT CONFER	5,659
South America			Program Services	PRESENTATION AT CONFER	33,498
South Asia			Program Services	PRESENTATION AT CONFER	29,893
Central America and the Caribbean			Program Services	STUDY ABROAD	3,990
East Asia and the Pacific			Program Services	STUDY ABROAD	26,820
Europe (Including Iceland and Greenland)			Program Services	STUDY ABROAD	139,790
North America			Program Services	STUDY ABROAD	995
South Asia			Program Services	STUDY ABROAD	2,284
Sub-Saharan Africa			Program Services	STUDY ABROAD	2,901
East Asia and the Pacific			Program Services	TEACHING SERVICES	39,853
Europe (Including Iceland and Greenland)			Program Services	TEACHING SERVICES	31,850
Middle East and North Africa			Program Services	TEACHING SERVICES	7,803
North America			Program Services	TEACHING SERVICES	10,308
South America			Program Services	TEACHING SERVICES	5,430
South Asia			Program Services	TEACHING SERVICES	13,994
Central America and the Caribbean			Investments		450,394,049
Sub-Saharan Africa			Investments		29,772,532
South America			Investments		5,460,666

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

- **a** ☑ Mail solicitations
- **b** ☑ Internet and e-mail solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☑ Solicitation of government grants
- **g** ☑ Special fundraising events

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

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
RUFFALO CODY	PHONE SOLIC		No	1,026,079	385,904	640,175
Total . . . . . ▶				1,026,079	385,904	640,175

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

NY

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 GCH GALA (event type)	(b) Event #2 WINE AUCTION (event type)	(c) Other Events 5 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	880,174	988,331	1,843,185	3,711,690
	2 Less Charitable contributions	428,030	303,890	1,478,418	2,210,338
	3 Gross income (line 1 minus line 2)	452,144	684,441	364,767	1,501,352
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Non-cash prizes	0	0	59,858	59,858
	6 Rent/facility costs	3,600	0	7,820	11,420
	7 Food and beverages	59,174	0	134,280	193,454
	8 Entertainment	11,200	0	56,123	67,323
	9 Other direct expenses	49,216	123,355	173,746	346,317
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				678,372
	11 Net income summary Combine lines 3 and 10 in column (d) ▶				822,980

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

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

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

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

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

13 Indicate the percentage of gaming activity operated in

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

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

Name ▶ ----------

Address ▶ ----------

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

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

c If "Yes," enter name and address

Name ▶ ----------

Address ▶ ----------

16 Gaming manager information

Name ▶ ----------

Gaming manager compensation ▶ $ ----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE H (Form 990)

Department of the Treasury
Internal Revenue Service

Hospitals

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 20.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I Financial Assistance and Certain Other Community Benefits at Cost

			Yes	No
1a	Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a	1a	Yes	
b	If "Yes," is it a written policy?	1b	Yes	
2	If the organization has multiple hospitals, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year			
	☐ Applied uniformly to all hospitals ☐ Applied uniformly to most hospitals ☐ Generally tailored to individual hospitals			
3	Answer the following based on the the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year			
a	Does the organization use Federal Poverty Guidelines (FPG) to determine eligibility for providing *free* care to low income individuals? If "Yes," indicate which of the following is the FPG family income limit for eligibility for free care	3a	Yes	
	☐ 100% ☐ 150% ☑ 200% ☐ Other ____ %			
b	Does the organization use FPG to determine eligibility for providing *discounted* care to low income individuals? If "Yes," indicate which of the following is the family income limit for eligibility for discounted care	3b	Yes	
	☐ 200% ☐ 250% ☐ 300% ☐ 350% ☑ 400% ☐ Other ____ %			
c	If the organization does not use FPG to determine eligibility, describe in Part VI the income based criteria for determining eligibility for free or discounted care Include in the description whether the organization uses an asset test or other threshold, regardless of income, to determine eligibility for free or discounted care			
4	Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	4	Yes	
5a	Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	5a	Yes	
b	If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	5b	Yes	
c	If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligibile for free or discounted care?	5c		No
6a	Does the organization prepare a community benefit report during the tax year?	6a	Yes	
6b	If "Yes," did the organization make it available to the public?	6b	Yes	
	Complete the following table using the worksheets provided in the Schedule H instructions Do not submit these worksheets with the Schedule H			

7 Financial Assistance and Certain Other Community Benefits at Cost

Financial Assistance and Means-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
a Financial Assistance at cost (from Worksheets 1 and 2)			15,389,108	4,936,497	10,452,611	0 430 %
b Unreimbursed Medicaid (from Worksheet 3, column a)			239,028,163	182,764,018	56,264,145	2 290 %
c Unreimbursed costs—other means-tested government programs (from Worksheet 3, column b)			4,308,859	3,282,390	1,026,469	0 040 %
d **Total** Financial Assistance and Means-Tested Government Programs			258,726,130	190,982,905	67,743,225	2 760 %
Other Benefits						
e Community health improvement services and community benefit operations (from (Worksheet 4)			1,604,053	1,525	1,602,528	0 070 %
f Health professions education (from Worksheet 5)			95,731,718	10,916,905	84,814,813	3 450 %
g Subsidized health services (from Worksheet 6)			90,578,851	71,774,897	18,803,954	0 760 %
h Research (from Worksheet 7)			375,775,971	0	375,775,971	15 290 %
i Cash and in-kind contributions to community groups (from Worksheet 8)			392,125	0	392,125	0 020 %
j **Total** Other Benefits			564,082,718	82,693,327	481,389,391	19 590 %
k **Total.** Add lines 7d and 7j			822,808,848	273,676,232	549,132,616	22 350 %

Part II Community Building Activities during the tax year, and describe in Part VI how its community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

		(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1	Physical improvements and housing						
2	Economic development						
3	Community support			4,171	441	3,730	0 %
4	Environmental improvements						
5	Leadership development and training for community members						
6	Coalition building			65,712	0	65,712	0 %
7	Community health improvement advocacy			465,509	0	465,509	0 020 %
8	Workforce development						
9	Other						
10	**Total**			535,392	441	534,951	0 020 %

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

				Yes	No
1	Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No 15?	1	Yes		
2	Enter the amount of the organization's bad debt expense (at cost)	2	10,075,758		
3	Enter the estimated amount of the organization's bad debt expense (at cost) attributable to patients eligible under the organization's financial assistance policy	3	7,053,031		
4	Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense In addition, describe the costing methodology used in determining the amounts reported on lines 2 and 3, and rationale for including a portion of bad debt amounts as community benefit				

Section B. Medicare

5	Enter total revenue received from Medicare (including DSH and IME)	5	161,251,356
6	Enter Medicare allowable costs of care relating to payments on line 5	6	170,738,310
7	Subtract line 6 from line 5 This is the surplus or (shortfall)	7	-9,486,954
8	Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6 Check the box that describes the method used		

☑ Cost accounting system ☐ Cost to charge ratio ☐ Other

Section C. Collection Practices

9a	Does the organization have a written debt collection policy?	9a	Yes		
b	If "Yes," does the organization's collection policy contain provisions on the collection practices to be followed for patients who are known to qualify for charity care or financial assistance? Describe in Part VI	9b	Yes		

Part IV Management Companies and Joint Ventures

	(a) Name of entity	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership%	(e) Physicians' profit % or stock ownership %
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, measured by total revenue per facility, from largest to smallest)

How many hospital facilities did the organization operate during the tax year? 1

	Name and address	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (Describe)
1	STRONG MEMORIAL HOSPITAL 601 ELMWOOD AVENUE ROCHESTER,NY 14642	X	X	X	X		X	X		OUTPATIENT MED CLIN OUTPATIENT MENTAL HE METHADONE MAINTENANC

Section C. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility
(list in order of size, measured by total revenue per facility, from largest to smallest)

How many non-hospital facilities did the organization operate during the tax year? **23**

	Name and address	Type of Facility (Describe)
1	See Additional Data Table	
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Part VI Supplemental Information

Complete this part to provide the following information

1 **Required descriptions.** Provide the description required for Part I, lines 3c, 6a, and 7, Part II, Part III, lines 4, 8, and 9b, and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21

2 **Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any needs assessments reported in Part V, Section B

3 **Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy

4 **Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves

5 **Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e g , open medical staff, community board, use of surplus funds, etc)

6 **Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served

7 **State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report

Identifier	ReturnReference	Explanation
PART 1, LINE 7g		COSTS ATTRIBUTABLE TO A PHYSICIAN CLINIC WERE INCLUDED ON PART I, LINE 7g, SUBSIDIZED HEALTH SERVICES, AND INCLUDED TOTAL COMMUNITY BENEFIT EXPENSE OF $34,506,477, DIRECT OFFSETTING REVENUE OF $26,661,063, NET COMMUNITY BENEFIT EXPENSE OF $7,845,414

Identifier	ReturnReference	Explanation
PART 1, LINE 7, COLUMN (f)		THE AMOUNT OF BAD DEBT EXPENSE INCLUDED ON FORM 990 PART IX, LINE 25M COLUMN (A) BUT SUBTRACTED FOR PURPOSES OF CALCULATING THE PERCENTAGE REPORTED ON LINE 7, COLUMN(f) WAS $20,872,000

Identifier	ReturnReference	Explanation
PART I, LINE 7 (COSTING METHODOLOGY USED)		THE COSTING METHODOLOGY USED IN CALCULATING THE AMOUNTS REPORTED ON THE LINE 7 TABLE ARE BASED ON A COST TO CHARGE RATIO THE COST TO CHARGE RATIO WAS DERIVED FROM WORKSHEET 2

Identifier	ReturnReference	Explanation
PART II (COMMUNITY BUILDING ACTIVITIES)		THE COMMUNITY BUILDING PROGRAMS REPORTED IN PART II PROMOTE THE HEALTH OF THE COMMUNITY IN MANY WAYS EXAMPLES INCLUDE COMMUNITY SUPPORT THE BURN CAMP WAS STARTED IN 1994 BY THE KESSLER BURN UNIT AND STRONG MEMORIAL HOSPITAL, IN CONJUNCTION WITH CAMP GOOD DAYS AND SPECIAL TIMES INC AND THE FINGER LAKES REGIONAL BURN ASSOCIATION THE FOUR-DAY OVERNIGHT CAMP HAS SINCE BEEN HELD ANNUALLY AT THE END OF AUGUST ANY CHILD BETWEEN SEVEN AND SEVENTEEN WHO HAS BEEN TREATED FOR A BURN INJURY IN NEW YORK STATE AND ONTARIO, CANADA IS INVITED TO PARTICIPATE, AT NO COST TO THE CHILDREN OR THEIR FAMILIES THE CAMP IS STAFFED BY DEDICATED NURSES, SOCIAL WORKERS, AND OTHER HEALTHCARE PROFESSIONALS AS WELL AS FIREFIGHTERS, ADULT BURN SURVIVORS, AND EQUALLY DEDICATED VOLUNTEERS IMPROVED SELF-ESTEEM, COMPANIONSHIP, AND ACCEPTANCE ARE THE BENEFITS THAT ACCRUE TO THESE CHILDREN FACED WITH DISFIGUREMENT AND DISCOMFORT FROM BURNS COALITION BUILDING THE INJURY FREE COALITION FOR KIDS OF ROCHESTER IS A COALITION OF GROUPS, ORGANIZATIONS AND AGENCIES DEDICATED TO REDUCING PREVENTABLE INJURIES AND DEATHS AMONG CHILDREN IN THE COMMUNITY THE COALITION IS BASED OUT OF GOLISANO CHILDREN'S HOSPITAL ON AN ANNUAL BASIS, THE COALITION HOSTS A SPECIAL BIKE SAFETY EVENT CALL "BIKE RODEO" FOR LOCAL KIDS, DURING WHICH THEY RECEIVE FREE HELMET FITTINGS AND HELMETS, AS WELL AS LESSONS ON BIKE SAFETY THE COALITION'S EFFORTS ARE REDUCING THE INCIDENCE OF BIKE-RELATED EMERGENCY VISITS AND ULTIMATELY SAVING LIVES IN THIS COMMUNITY THE ROCHESTER YOUTH VIOLENCE PARTNERSHIP ENSURES THAT YOUNG VICTIMS OF VIOLENCE DO NOT LEAVE THE URMC EMERGENCY DEPARTMENT TRAUMA CENTER UNTIL A TEAM OF MEDICAL, LAW-ENFORCEMENT AND COMMUNITY PROFESSIONALS COMPLETE A COMPREHENSIVE INTERVENTION TO HELP THEM TURN THEIR LIVES AROUND AND AVOID FUTURE VIOLENCE THE RESULTS ARE PROMISING MOST SIGNIFICANTLY, THERE HAS BEEN A DECLINE IN RECIDIVISM COMMUNITY HEALTH IMPROVEMENT ADVOCACY THE "BREATH OF HOPE" - A COMMUNITY-WIDE ASTHMA INITIATIVE - IS A COMMUNITY COLLABORATIVE PROJECT TO IMPROVE THE MANAGEMENT OF ASTHMA IN CHILDREN THIS EFFORT WAS BUILT UPON A SUCCESSFUL HOSPITAL-BASED PILOT DEMONSTRATING EFFICACY OF THE USE OF COMMUNITY AND HOSPITAL-BASED EDUCATION, STANDARDIZED PRACTICE ACROSS THE COMMUNITY AND HOSPITAL, AND BEHAVIORAL PROMPTS TO IMPROVE OUTCOMES, INCLUDING DECREASED ED VISITS AND INPATIENT ADMISSIONS PEDIATRIC LINKS WITH THE COMMUNITY IS AN INNOVATIVE PARTNERSHIP BETWEEN THE URMC'S DEPARTMENTS OF PEDIATRICS, MEDICINE-PEDIATRICS, FAMILY MEDICINE, COMMUNITY AND PREVENTIVE MEDICINE AND PSYCHOLOGY, THE UR SCHOOL OF NURSING, AND MORE THAN 50 COMMUNITY-BASED AGENCIES THAT SERVE CHILDREN AND THEIR FAMILIES THE PROGRAM'S MISSION IS TO DEVELOP A MODEL OF COMMUNITY PEDIATRICS IN WHICH PEDIATRICIANS COLLABORATE WITH COMMUNITY-BASED ORGANIZATIONS, WORK TO ASSURE THE HEALTH OF ALL CHILDREN IN THEIR COMMUNITY, AND ADVOCATE FOR THEIR COMMUNITY TO BE MORE CHILD-RESPONSIVE AND CHILD-ORIENTED THE COLLABORATION HAS ENHANCED MORE THAN 525 RESIDENTS', FELLOWS' AND MEDICAL STUDENTS' KNOWLEDGE ABOUT COMMUNITY-ORIENTED AND COMMUNITY-BASED HEALTH CARE, INSPIRING FUTURE HEALTH CARE PROFESSIONALS TO IMPROVE THE HEALTH OF CHILDREN IN THEIR COMMUNITIES A community wide bladder educational awareness program was sponsored by URMC Urology The evening presentation focused on prevention, early detection, and treatment of bladder cancer The program also included several guest lectures

Identifier	ReturnReference	Explanation
PART III, SECTION A, LINE 4 (BAD DEBT EXPENSE, COSTING METHODOLOGY USED)		STRONG MEMORIAL HOSPITAL (THE "HOSPITAL") provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue or patient accounts receivable THE HOSPITAL GRANTS CREDIT WITHOUT COLLATERAL TO PATIENTS, MOST OF WHOM ARE LOCAL RESIDENTS AND ARE INSURED UNDER THIRD-PARTY ARRANGEMENTS ADDITIONS TO THE ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS ARE MADE BY MEANS OF THE PROVISION FOR BAD DEBTS ACCOUNTS WRITTEN OFF AS UNCOLLECTIBLE ARE DEDUCTED FROM THE ALLOWANCE AND SUBSEQUENT RECOVERIES ARE ADDED THE AMOUNT OF THE PROVISION FOR BAD DEBTS IS BASED UPON MANAGEMENT'S ASSESSMENT OF HISTORICAL AND EXPECTED NET COLLECTIONS, BUSINESS AND ECONOMIC CONDITIONS, TRENDS IN FEDERAL AND STATE GOVERNMENTAL HEALTHCARE COVERAGE AND OTHER COLLECTION INDICATORS THE COSTING METHODOLOGY FOR DETERMINING BAD DEBT EXPENSE (AT COST) WAS TO APPLY AN OVERALL HOSPITAL RATIO OF TOTAL COSTS TO TOTAL CHARGES AND APPLY TO CHARGES WRITTEN OFF AS BAD DEBTS

Identifier	ReturnReference	Explanation
PART III, SECTION B, LINE 8 (COSTING METHODOLOGY, MEDICARE SHORTFALL)		THE COSTING METHODOLOGY USED IN DETERMINING THE AMOUNT REPORTED ON LINE 6 IS BASED ON REPORTS PRODUCED FROM THE HOSPITAL'S DECISION SUPPORT SYSTEM FOR THE YEAR CONSISTENT WITH THE CHARITABLE HEALTHCARE MISSION OF THE HOSPITAL AND THE COMMUNITY BENEFIT STANDARD SET FORTH IN IRS REVENUE RULING 69-545, THE HOSPITAL PROVIDES CARE FOR ALL PATIENTS COVERED BY MEDICARE SEEKING MEDICAL CARE SUCH CARE IS PROVIDED REGARDLESS OF WHETHER THE REIMBURSEMENT PROVIDED FOR SUCH SERVICES MEETS OR EXCEEDS THE COSTS INCURRED BY THE HOSPITAL TO PROVIDE SUCH SERVICES AS A RESULT, THE HOSPITAL VIEWS ANY SHORTFALL REPORTED IN LINE 7 AS AN ADDITIONAL ITEM OF COMMUNITY BENEFIT PROVIDED BY THE ORGANIZATION

Identifier	ReturnReference	Explanation
PART III, SECTION C, LINE 9b (COLLECTION PRACTICES)		CHARITY CARE POLICY MISSION/PURPOSE/PREAMBLE STRONG MEMORIAL HOSPITAL IMPROVES HEALTH THR OUGH CARING, DISCOVERY, TEACHING AND LEARNING WE PROVIDE EXCELLENT AND COMPASSIONATE CARE AND RESPONSIVE SERVICE AS WE SEEK TO UNDERSTAND AND FULLY MEET OUR PATIENTS' CURRENT AND FUTURE NEEDS AND EXPECTATIONS, WE RECOGNIZE OUR RESPONSIBILITY TO PRUDENTLY USE THE SCARC E RESOURCES ENTRUSTED TO US LAWS, REGULATIONS, CATASTROPHIC ILLNESSES AND THE RISING COST S OF NEW TECHNOLOGY HAVE CREATED A CATEGORY OF PATIENTS WHO ARE EITHER UNINSURED OR UNDERI NSURED THIS CHARITY CARE PROGRAM HAS BEEN DEVELOPED TO HELP THE HOSPITAL MEET THE NEEDS O F THESE PATIENTS AND, CONCURRENTLY, MAINTAIN THE FINANCIAL VIABILITY OF THE HOSPITAL FOR F UTURE GENERATIONS THIS CHARITY CARE POLICY EXPLAINS HOW THE HOSPITAL ASSISTS PATIENTS WHO CANNOT PAY FOR PART OR ALL OF THE ESSENTIAL MEDICAL CARE THEY RECEIVE PRINCIPLES STRONG MEMORIAL HOSPITAL PROACTIVELY CONVEYS INFORMATION ABOUT THIS CHARITY CARE POLICY TO PATIE NTS AND THEIR FAMILIES - WE BELIEVE THAT FEAR OF A HOSPITAL BILL SHOULD NEVER GET IN THE WAY OF ESSENTIAL HEALTH SERVICES THE PROVISION OF URGENT OR EMERGENT HEALTHCARE IS NEVER DELAYED PENDING A FINANCIAL ASSISTANCE DETERMINATION SIGNS ANNOUNCING THE CHARITY CARE PR OGRAM ARE POSTED IN THE HOSPITAL (E G EMERGENCY DEPARTMENT, ADMITTING OFFICE) TO PROACTIV ELY CONVEY THIS MESSAGE TO PROSPECTIVE PATIENTS AND THE PUBLIC IN GENERAL - WE MAINTAIN F INANCIAL AID POLICIES THAT ARE CONSISTENT WITH THE MISSION, VALUES AND CAPACITY OF THE HOS PITAL AND THAT TAKE INTO ACCOUNT EACH INDIVIDUAL'S ABILITY TO CONTRIBUTE TO THE COST OF HI S OR HER CARE - WE COMMUNICATE THE AVAILABILITY OF FINANCIAL AID IN A MANNER THAT IS CLEA R, UNDERSTANDABLE, SENSITIVE TO THE PATIENT'S DIGNITY, AND IN MULTIPLE LANGUAGES A NOTICE IS AVAILABLE AT REGISTRATION SITES THAT INFORMS PATIENTS OF THIS PROGRAM AND PROVIDES THE PHONE NUMBER TO CALL TO OBTAIN MORE INFORMATION AND TO APPLY FOR THIS PROGRAM DESIGNATED STAFF ARE PROVIDED DETAILED TRAINING SO THAT THEY CAN PROVIDE INFORMATION AND ANSWER QUES TIONS ABOUT THE CHARITY CARE PROGRAM INFORMATION IS GENERALLY AVAILABLE IN BOTH ENGLISH A ND SPANISH WHEN REQUESTED, IT WILL ALSO BE MADE AVAILABLE IN OTHER LANGUAGES - INFORMATI ON REGARDING OUR CHARITY CARE PROGRAM IS ALSO AVAILABLE ON THE URMC WEBSITE - WE IMPLEMEN T FINANCIAL AID PROCEDURES THAT ARE CONSUMER-FRIENDLY, RESPECTFUL, AND CONFIDENTIAL, AS WE LL AS DEBT COLLECTION POLICIES THAT REFLECT THE MISSION AND VALUES OF THIS HOSPITAL - WE WORK WITH GOVERNMENT, PAYERS, BUSINESS, CONSUMER GROUPS AND OTHERS TO ADDRESS THE UNDERLYI NG PROBLEM THAT TOO MANY NEW YORKERS LACK HEALTH INSURANCE GENERAL GUIDELINES AS PART OF FINANCIAL PLANNING ASSISTANCE, WE PROVIDE PATIENTS, AND/OR THEIR LEGAL REPRESENTATIVE, WI TH INFORMATION ABOUT THE CRITERIA THAT MUST BE MET IN ORDER TO OBTAIN MEDICAID, MEDICARE, OR OTHER HEALTH INSURANCES PATIENTS ARE ASSISTED IN MAKING APPLICATIONS FOR ANY OF THESE INSURANCES OR DISCOUNTED FEE PLANS PATIENTS ARE EXPECTED TO PARTICIPATE FULLY IN ALL EFFO RTS TO OBTAIN ANY INSURANCE FOR WHICH THEY MAY QUALIFY UNDER CERTAIN CIRCUMSTANCES, AS DE TERMINED BY THE FINANCIAL CASE MANAGERS OR OTHER HOSPITAL SENIOR ADMINISTRATORS APPLICATI ONS FOR MEDICAID, MEDICARE OR OTHER INSURANCE PROGRAMS MAY BE WAIVED WHEN DEEMED UNNECESSA RY IF AVAILABLE INSURANCE BENEFITS ARE NOT SUFFICIENT TO COVER THE COST OF THEIR CARE, PA TIENTS MAY THEN APPLY FOR ASSISTANCE FROM THE CHARITY CARE PROGRAM CHARITY CARE APPLICATI ONS MUST BE COMPLETED AND RETURNED TO THE HOSPITAL WITH THE REQUESTED INCOME DOCUMENTATION PATIENTS WILL NOT RECEIVE CHARITY CARE ASSISTANCE IF THEY (A) DO NOT COMPLETE THE APPLIC ATION PROCESS FOR MEDICAID OR OTHER INSURANCE FOR WHICH THEY MAY QUALIFY, (B) ELECT NOT TO MAKE APPLICATION FOR CHARITY CARE, OR (C) HAVE ADEQUATE RESOURCES OR INCOME TO PAY PRIVAT ELY FOR THEIR CARE IN THESE SITUATIONS, THEY WILL REMAIN FINANCIALLY RESPONSIBLE FOR FULL PAYMENT OF THEIR HOSPITAL BILLS CHARITY CARE ASSISTANCE IS AVAILABLE FOR PATIENTS WHO RE SIDE IN NEW YORK STATE AND RECEIVE EMERGENCY HOSPITAL SERVICES, INCLUDING EMERGENCY TRANSF ERS, AND TO PATIENTS WHO RESIDE IN STRONG MEMORIAL HOSPITAL'S PRIMARY SERVICE AREA IN NEW YORK STATE WHO RECEIVE SERVICES IN DESIGNATED STRONG MEMORIAL HOSPITAL PROGRAMS, INCLUDING MOST INPATIENT AND OUTPATIENT SERVICES IN ADDITION, THE HOSPITAL MAY, IN ITS DISCRETION, GRANT CHARITY CARE TO INDIVIDUALS WHO RESIDE OUTSIDE OF NEW YORK STATE CHARITY CARE ASSI STANCE DOES NOT COVER MEDICALLY UNNECESSARY CARE, COSMETIC ALTERATION, TELEPHONE, TELEVISI ON AND PRIVATE ROOM CHARGES IT DOES NOT COVER SERVICES GENERATED BY AN INSURED PATIENT WH O CHOOSES TO RECEIVE CARE AT AN OUT-OF-NETWORK HOSPITAL, OR WHO FAILS TO COMPLY WITH INSUR ANCE POLICY REQUIREMENTS (E G UNAUTHORIZED SERVICES) NOR DOES IT APPLY TO NON-RESIDENT AL IENS (UNLESS APPROVED IN ADVANCE OF CARE BEING PROVIDED), TO DRUGS NOT ADMINISTERED IN THE HOSPITAL, TO TRANSPORTATION FURNISHED BY THIRD PA

Identifier	ReturnReference	Explanation
PART III, SECTION C, LINE 9b (COLLECTION PRACTICES)		RTY VENDORS, OR TO CARE, SERVICES, DRUGS OR SUPPLIES FOR THE PURPOSE OF GENDER CHANGE PROC EDURE SPECIFIC QUESTIONS ABOUT SERVICES THAT ARE NOT COVERED SHOULD BE DIRECTED TO THE PA TIENT ACCOUNTS MANAGER OR THEIR DELEGATE FINANCIAL GUIDELINES FINANCIAL AID IS INTENDED TO ASSIST THOSE INDIVIDUALS WHO CANNOT AFFORD TO PAY IN PART OR IN FULL FOR THEIR CARE IT SHOULD TAKE INTO ACCOUNT EACH INDIVIDUAL'S ABILITY TO CONTRIBUTE TO THE COST OF HIS OR HE R CARE HOSPITAL FINANCIAL AID SHOULD NOT BE VIEWED AS A SUBSTITUTE FOR EMPLOYER-SPONSORED OR INDIVIDUALLY PURCHASED INSURANCE PATIENTS WITHOUT INSURANCE AND WITH INCOME THAT WOUL D QUALIFY THEM FOR THE CHARITY CARE PROGRAM BUT ALSO HAVE SUBSTANTIAL RESOURCES (OTHER THA N TAX-DEFERRED OR COMPARABLE RETIREMENT SAVINGS OR COLLEGE SAVINGS ACCOUNTS) MAY BE EXPECT ED TO PAY PART OF THEIR BILLS(S) CHARITY CARE ASSISTANCE IS GENERALLY AVAILABLE TO INDIVI DUALS WHOSE INCOME IS LESS THAN OR EQUAL TO 400% OF THE FEDERAL POVERTY LEVEL HOWEVER, PA TIENTS WHO HAVE EXHAUSTED THEIR INSURANCE BENEFITS, EXCEEDED FINANCIAL ELIGIBILITY CRITERI A, FACE EXTRAORDINARY MEDICAL COSTS, OR WHO HAVE OTHER UNIQUE CIRCUMSTANCES MAY BE CONSIDE RED FOR CHARITY CARE APPROVAL IN THE HOSPITAL'S SOLE DISCRETION WHILE APPLICATION FOR MED ICAID OR OTHER INSURANCE IS USUALLY REQUIRED, THE HOSPITAL MAY, AT ITS SOLE DISCRETION, IN APPROPRIATE CASES, ALSO CONSIDER PATIENTS FOR CHARITY CARE WHEN THEY MEET THE FINANCIAL C RITERIA OF THIS PROGRAM, BUT HAVE NOT SATISFACTORILY COMPLETED ALL THE REQUIREMENTS OF THE CHARITY CARE APPLICATION PROCESS THIS MAY INCLUDE PATIENTS WHO HAVE BEEN SANCTIONED BY M EDICAID, HAVE FILED BANKRUPTCY OR APPEAR TO BE ELIGIBLE FOR CHARITY CARE ASSISTANCE BASED ON AVAILABLE INFORMATION ELIGIBILITY DETERMINATIONS IN COMPLEX CASE CIRCUMSTANCES WILL BE MADE AFTER CONSIDERATION BY THE CHARITY CARE REVIEW TEAM THAT INCLUDES THE CHARITY CARE O FFICER, FINANCIAL CASE MANAGER AND/OR THEIR MANAGERS, OR MAY BE MADE BY SENIOR HOSPITAL AD MINISTRATORS THE AMOUNT OF THE DISCOUNT AFFORDED TO QUALIFIED CHARITY CARE PATIENTS WILL BE DETERMINED THROUGH ASSESSMENT OF THE RESPONSIBLE PARTY'S ANNUAL HOUSEHOLD INCOME AND TH E NUMBER OF PEOPLE IN THE HOME, AS A PERCENTAGE OF THE FEDERAL POVERTY GUIDELINE AMOUNTS F OR SAME SIZE HOUSEHOLDS THE FINANCIAL GUIDELINES WILL BE UPDATED ANNUALLY IN CONJUNCTION WITH THE FEDERAL POVERTY UPDATES PUBLISHED BY CMS PATIENTS MAY RECEIVE FULL OR PARTIAL DI SCOUNT FROM THE COST OF CARE, DEPENDING ON THE PERCENTAGE OF THE GUIDELINES MATCHED BY THE PATIENT'S HOUSEHOLD INCOME ANY BILL AMOUNT REMAINING AFTER APPLICATION OF A PARTIAL CHAR ITY CARE DISCOUNT IS THE RESPONSIBILITY OF THE PATIENT THE AMOUNT AN APPROVED CHARITY CAR E PATIENT WILL GENERALLY BE EXPECTED TO PAY FOR SERVICES COVERED BY THE POLICY WILL BE LIM ITED TO THE LOWER OF THE AMOUNT THAT THE HOSPITAL WOULD HAVE RECEIVED FOR THE SAME SERVICE UNDER MEDICARE PARTS A AND B, (INCLUDING COINSURANCE, CO-PAYMENTS AND DEDUCTIBLES) OR THE USUAL AND CUSTOMARY CHARGES THE PATIENT WILL BE ASSISTED BY THE HOSPITAL IN MAKING ARRAN GEMENTS TO SATISFY ANY BALANCE REMAINING ON THE ACCOUNT(S) AFTER THE APPLICATION OF THE AP PROPRIATE CHARITY CARE DISCOUNT BY USE OF A PAYMENT PLAN THE MONTHLY PAYMENTS UNDER SUCH PLANS SHALL NOT EXCEED TEN PERCENT (10%) OF THE ELIGIBLE PATIENT'S GROSS MONTHLY INCOME T HE RATE OF INTEREST ON UNPAID BALANCES SHALL NOT EXCEED THE US TREASURY RATE FOR 90 DAY SE CURITIES PLUS 0 5% HOSPITAL PATIENT FINANCIAL AID STATUTE DISCOUNTING REQUIREMENTS DISCOU NT / GROSS INCOME AS % OF FEDERAL POVERTY LEVEL 100% / UP TO 200% 80 / BETWEEN 201-250% 60 % / BETWEEN 251-300% 40% / BETWEEN 301-350% 20% / BETWEEN 351-400% 0% / OVER 401% PROCESS APPLICATIONS WILL BE ACCEPTED IMMEDIATELY BEFORE, DURING OR AFTER CARE IS PROVIDED THE H OSPITAL WILL STRIVE TO ASSIST PATIENTS RECEIVING HIGH-COST SERVICES AS THEY OCCUR PATIENT S MAY BE APPROVED FOR CHARITY CARE ON AN ACCOUNT-BY-ACCOUNT BASIS OR FOR A PERIOD OF TIME (FOR A COURSE OF TREATMENT) FULLY COMPL

Identifier	ReturnReference	Explanation
PART VI, LINE 2 (NEEDS ASSESSMENT)		MONROE COUNTY ASSESSES THE HEALTH NEEDS OF THE COMMUNITY THROUGH HEALTH ACTION, A ROBUST COMMUNITY-WIDE PROCESS ESTABLISHED 16 YEARS AGO THAT IS LED BY THE COUNTY HEALTH DEPARTMENT IT INVOLVES ALL FOUR LOCAL HEALTH SYSTEMS, LOCAL INSURERS, AND OTHER KEY COMMUNITY STAKEHOLDERS THROUGH THIS PROCESS, COMMUNITY PRIORITIES, GOALS, AND INTERVENTIONS ARE IDENTIFIED AND IMPLEMENTED THESE PRIORITIES ALIGN WITH THE HEALTH PRIORITIES AND INDICATORS AS PUBLISHED BY NEW YORK STATE'S DOH AND INCLUDE ACCESS TO QUALITY HEALTH CARE, TOBACCO USE, HEALTHY MOTHERS/HEALTHY BABIES/HEALTHY CHILDREN, PHYSICAL ACTIVITY/NUTRITION, UNINTENTIONAL INJURY, HEALTHY ENVIRONMENTS, CHRONIC DISEASE, AND MENTAL HEALTH/SUBSTANCE ABUSE FIVE HEALTH STATUS "REPORT CARDS" IN SPECIFIC AGE GROUPS AND CATEGORIES ARE USED TO MEASURE PROGRESS TOWARDS HEALTH STATUS IMPROVEMENT THEY INCLUDE MATERNAL AND CHILD HEALTH, ADOLESCENT HEALTH, ADULT HEALTH, OLDER ADULT HEALTH AND ENVIRONMENTAL HEALTH, EACH OF WHICH CONTAIN GOALS FOR IMPROVING HEALTH PRIORITIES FOR EACH AREA ARE SELECTED BASED ON INPUT FROM FOCUS GROUPS WITH RESIDENTS, AND HEALTH AND SOCIAL SERVICE PROFESSIONALS UPDATED REPORT CARDS ARE PRODUCED AND DISTRIBUTED EVERY 6-8 YEARS FOR EACH SPECIFIC AGE GROUP THESE PRIORITIES SERVE AS A FOUNDATION FOR COMMUNITY HEALTH IMPROVEMENT AND COMMUNITY BUILDING EFFORTS AND HELP TO ENSURE COLLABORATIVE AND COORDINATED USE OF HEALTH SYSTEM RESOURCES TO ADDRESS THE MOST PRESSING NEEDS THE PRIORITY SETTING PROCESS IS A SIX-STEP PROCESS THAT INCLUDES 1) ASSESS HEALTH STATUS DATA DETAILING HEALTH STATUS, ACCESS TO HEALTH CARE AND HEALTH BEHAVIORS ARE COMPILED AND ANALYZED TO IDENTIFY TRENDS AND DISPARITIES AND TO COMPARE OUR COUNTY TO OTHER COMMUNITIES THE HEALTH SYSTEM PARTNERS WITH THE COUNTY TO CONDUCT PERIODIC HEALTH ASSESSMENTS 2) CHOOSE PRIORITY GOALS THE ADVISORY COMMITTEE, CO-FOUNDED BY THE MEDICAL CENTER, HOSTS COMMUNITY FORUMS TO ADDRESS HEALTH IMPROVEMENT PRIORITIES THE ADVISORY COMMITTEE MAKES RECOMMENDATIONS TO THE BOARD OF HEALTH ON PRIORITIES 3) DEFINE THE LEADERSHIP PARTNERS ARE IDENTIFIED TO SUPPORT THE PRIORITIES FOR ACTION THE MEDICAL CENTER PROVIDES SALARY SUPPORT FOR FACULTY AND STAFF TO CONTRIBUTE THEIR ACADEMIC AND CLINICAL EXPERTISE TO HELP IDENTIFY AND IMPLEMENT THE MOST EFFECTIVE INTERVENTIONS ON THE HEALTH PRIORITIES 4) DEVELOP IMPROVEMENT PLANS EACH PARTNERSHIP DEVELOPS IMPROVEMENT PLANS TO ADDRESS HEALTH GOALS 5) PERFORM INTERVENTIONS EACH PARTNERSHIP, ALONG WITH THE STEERING COMMITTEE, WHICH INCLUDES THE MEDICAL CENTER, OVERSEES THE IMPLEMENTATION OF INTERVENTIONS IN VARIOUS VENUES THAT INCLUDE SCHOOLS, DAY CARE CENTERS, PLACES OF WORSHIP, COMMUNITY BASED ORGANIZATIONS AND WITHIN THE HEALTH SYSTEMS 6) MEASURE THE IMPACT EACH PARTNERSHIP EVALUATES THE INTERVENTION

Identifier	ReturnReference	Explanation
PART VI, LINE 3 (PATIENT EDUCATION OF ELIGIBILITY FOR ASSISTANCE)		INFORMATION ABOUT THE AVAILABILITY OF FINANCIAL ASSISTANCE IS POSTED IN ALL AREAS OF THE FACILITY AND ITS OFF-SITE LOCATIONS CHARITY CARE INFORMATION IS POSTED IN INPATIENT AND OUTPATIENT REGISTRATION AREAS, THE EMERGENCY DEPARTMENT, ADMITTING, AND ALL PRIMARY CARE SITES THE HOSPITAL PROVIDES A COPY OF THE CHARITY CARE POLICY AND FINANCIAL ASSISTANCE CONTACTS TO PATIENTS AS PART OF ITS ADMITTING PROCESS PRINTED INFORMATION ABOUT CHARITY CARE ASSISTANCE IS ALSO PROVIDED WITH DISCHARGE MATERIALS WHEN IT HAS BEEN DETERMINED THAT A PATIENT IS IN FINANCIAL NEED OUR CHARITY CARE POLICY IS ON-LINE AS WELL, ON THE HOSPITAL WEBSITE AS PART OF FINANCIAL PLANNING ASSISTANCE, WE PROVIDE PATIENTS, OR THEIR LEGAL REPRESENTATIVE, WITH INFORMATION ABOUT THE CRITERIA THAT MUST BE MET IN ORDER TO OBTAIN MEDICAID, MEDICARE, OR OTHER HEALTH INSURANCES PATIENTS ARE ASSISTED IN MAKING APPLICATIONS FOR ANY OF THESE INSURANCES OR DISCOUNTED FEE PLANS PATIENTS ARE EXPECTED TO PARTICIPATE FULLY IN ALL EFFORTS TO OBTAIN ANY INSURANCE FOR WHICH THEY MAY QUALIFY UNDER CERTAIN CIRCUMSTANCES, AS DETERMINED BY THE FINANCIAL CASE MANAGERS OR OTHER HOSPITAL SENIOR ADMINISTRATORS, APPLICATIONS FOR MEDICAID, MEDICARE OR OTHER INSURANCE PROGRAMS MAY BE WAIVED WHEN DEEMED UNNECESSARY IF AVAILABLE INSURANCE BENEFITS ARE NOT SUFFICIENT TO COVER THE COST OF THEIR CARE, PATIENTS MAY THEN APPLY FOR ASSISTANCE FROM THE CHARITY CARE PROGRAM

Identifier	ReturnReference	Explanation
PART VI, LINE 4 (COMMUNITY INFORMATION)		STRONG MEMORIAL HOSPITAL IS LOCATED IN THE CITY OF ROCHESTER, COUNTY OF MONROE (POPULATION APPROXIMATELY 744,394) IN THE FINGER LAKES REGION OF NEW YORK STATE THE FINGER LAKES REGION EXTENDS APPROXIMATELY 100 MILES NORTH TO SOUTH AND 100 MILES EAST TO WEST THE REGION ENCOMPASSES URBAN, SUBURBAN AND RURAL COMMUNITIES WITHIN NEW YORK STATE THE REGION (INCLUDING MONROE COUNTY) HAS A POPULATION OF MORE THAN 1,703,000 STRONG MEMORIAL HOSPITAL'S PRIMARY SERVICE AREA (PSA) IS MONROE COUNTY AND THE SECONDARY SERVICE AREA (SSA) ENCOMPASSES THE 15 COUNTIES SURROUNDING MONROE INCLUDING ALLEGANY, CATTARAUGUS, CAYUGA, CHEMUNG, GENESEE, LIVINGSTON, ONTARIO, ORLEANS, SCHUYLER, SENECA, STEUBEN, TOMPKINS, WAYNE, WYOMING, AND YATES THERE ARE FIFTEEN FEDERALLY DESIGNATED MEDICALLY UNDERSERVED AREAS OR POPULATIONS WITHIN THIS 16 COUNTY REGION THE PRIMARY SERVICE AREA IS HOME TO THREE MULTI-HOSPITAL SYSTEMS EACH WITH SEVERAL LONG-TERM CARE, HOME CARE AND OTHER TYPES OF AFFILIATES THE UNIVERSITY OF ROCHESTER MEDICAL CENTER'S HOSPITALS ARE STRONG MEMORIAL HOSPITAL, AND ITS AFFILIATE, HIGHLAND HOSPITAL OF ROCHESTER ROCHESTER GENERAL HEALTH SYSTEM CONSISTS OF ROCHESTER GENERAL HOSPITAL AND NEWARK WAYNE COMMUNITY HOSPITAL AND UNITY HEALTH CONSISTS OF PARK RIDGE HOSPITAL AND ST MARY'S HOSPITAL THERE ARE ROUGHLY TWENTY SMALLER COMMUNITY HOSPITALS THAT OPERATE IN THE FIFTEEN COUNTIES SURROUNDING MONROE COUNTY WITH BED CAPACITY RANGING FROM AS FEW AS 25 BEDS TO AS MANY AS 224 BEDS OVER 50 RESIDENTIAL HEALTH CARE FACILITIES, MANY PUBLIC AND PRIVATE AGENCIES PROVIDING COMMUNITY AND HOME HEALTH SERVICES, SEVERAL STATE AND FEDERAL FACILITIES, AND A FULL RANGE OF HEALTH CARE PROFESSIONALS, INCLUDING THOUSANDS OF PHYSICIANS, DENTISTS, NURSES, TECHNICIANS, ADMINISTRATORS, EDUCATORS, AND SUPPORT PERSONNEL PROVIDE SERVICES WITHIN THE SIXTEEN COUNTY SERVICE AREA HISTORICALLY UNDER REPRESENTED ETHNIC GROUPS INCLUDING BLACK NON-HISPANIC, HISPANIC AND OTHER POPULATIONS COMPRISE ROUGHLY 25% OF THE POPULATION OF MONROE COUNTY ACCORDING TO U S CENSUS DATA ROUGHLY 11 7% OF THE POPULATION OF MONROE COUNTY IS NON-ENGLISH SPEAKING AVERAGE HOUSEHOLD INCOME FOR THE PRIMARY SERVICE AREA IS $68,117 VERSUS THE NATIONAL AVERAGE OF $71,071 ACCORDING TO THE US CENSUS, 13 7% OF INDIVIDUALS IN MONROE COUNTY WERE CONSIDERED BELOW THE POVERTY LEVEL THE PERCENTAGE OF THE MONROE COUNTY POPULATION AGE 65 AND OLDER WAS 13 9% IN 2010 AND IS ANTICIPATED TO GROW TO 15 9% BY 2015 THE POPULATION OF INDIVIDUALS 18 YEARS AND YOUNGER IS ANTICIPATED TO DECLINE FROM 22 4% (2010) TO 21 1% IN 2015 THE RATE OF UNINSURED ADULTS (AGES 19 TO 64) IN MONROE COUNTY IS 10 4 PERCENT, COMPARED TO THE NEW YORK STATE RATE OF 17 2 PERCENT (2007 CENSUS BUREAU ESTIMATES) ACCORDING TO THE NEW YORK STATE DEPARTMENT OF HEALTH, ROUGHLY 18% OF THE POPULATION OF MONROE COUNTY IS ENROLLED IN MEDICAID WHILE ABOUT 12% OF THE SURROUNDING FIFTEEN COUNTY POPULATIONS ARE ENROLLED IN MEDICAID MONROE COUNTY'S POPULATION OF SENIORS OUTPACES THE NATIONAL AVERAGE OF 13 2% AT THE SAME TIME, THE POPULATION OF RESIDENTS 18 AND YOUNGER IS ANTICIPATED TO DECLINE OVER THE NEXT SEVERAL YEARS FROM 22 4% IN 2010 TO 21 1% IN 2015 UNDER REPRESENTED ETHNIC GROUPS COMPRISE ROUGHLY 9 4% OF THE POPULATION IN THE FIFTEEN COUNTIES SURROUNDING MONROE COUNTY AVERAGE HOUSEHOLD INCOME FOR THE FIFTEEN COUNTY SERVICE AREA WAS $59,462 VERSUS THE US AVERAGE OF $71,071

Identifier	ReturnReference	Explanation
PART VI, LINE 5 (PROMOTION OF COMMUNITY HEALTH)		STRONG MEMORIAL HOSPITAL IS OVERSEEN BY A 50 MEMBER BOARD THAT REPORTS TO THE UNIVERSITY B OARD OF TRUSTEES THE HOSPITAL BOARD IS LED BY AND COMPRISED OF A DIVERSE GROUP OF COMMUNI TY AND INDUSTRY LEADERS AND ADVOCATES - PEOPLE WHO LIVE AND WORK IN THIS COMMUNITY AND CAR E DEEPLY ABOUT THE HEALTH AND WELFARE OF ITS CITIZENS THE BOARD INCLUDES NON-UR MEDICAL C ENTER-EMPLOYED PRIVATE COMMUNITY PHYSICIANS, MEMBERS OF THE BUSINESS COMMUNITY, LOCAL PHIL ANTHROPISTS WITH AN INTEREST IN ADVOCATING FOR HEALTH CARE, AND OTHER LOCAL REPRESENTATIVE S AS A DEDICATED BOARD, EACH MEMBER HAS VOWED TO UPHOLD THE FOLLOWING DUTIES A DUTY OF O BEDIENCE TO THE CHARITABLE PURPOSE OF THE ORGANIZATION, A DUTY OF LOYALTY, TO ACT BASED ON BEST INTERESTS OF THE ORGANIZATION AND THE WIDER COMMUNITY IT SERVES, AND A DUTY OF CARE, TO BE DILIGENT IN CARRYING OUT THE WORK OF THE BOARD ADMINISTRATIVELY, UR MEDICAL CENTER LEADERSHIP HAS INITIATED A COMPREHENSIVE AND AMBITIOUS STRATEGIC PLANNING PROCESS ACROSS THE INSTITUTION THE GOALS OF THE 5-YEAR PLAN INCLUDE EXPANDING COMMUNITY HEALTH PROGRAMS AND RESEARCH THAT IMPROVE THE OVERALL HEALTH OF THE GREATER ROCHESTER COMMUNITY AN ANNUAL "DR DAVID SATCHER COMMUNITY HEALTH IMPROVEMENT AWARDS" PROGRAM HAS BEEN ESTABLISHED TO E NCOURAGE AND RECOGNIZE FACULTY/STAFF FOR EXEMPLARY WORK WITHIN THE COMMUNITY TO IMPROVE CO MMUNITY HEALTH STRONG MEMORIAL HOSPITAL EXTENDS MEDICAL STAFF PRIVILEGES TO EMPLOYED UR M EDICAL CENTER PHYSICIANS, UR MEDICAL CENTER FACULTY PHYSICIANS, AND ALL ELIGIBLE PRIVATE P HYSICIANS WHO PRACTICE AT AND/OR ADMIT PATIENTS TO THE STRONG MEMORIAL HOSPITAL SIMILARLY , HIGHLAND HOSPITAL EXTENDS MEDICAL STAFF PROVILEGES TO EMPLOYED PHYSICIANS, UR MEDICAL CE NTER FACULTY PHYSICIANS, AND ALL ELIGIBLE PRIVATE PHYSICIANS WHO PRACTICE AT AND/OR ADMIT PATIENTS TO HIGHLAND HOSPITAL MANY UR MEDICAL CENTER AND HIGHLAND HOSPITAL PHYSICIANS SER VE A DUAL ROLE WITH COMMUNITY AGENCIES, PROVIDING SERVICE AS A MEDICAL DIRECTOR OR ATTENDI NG PHYSICIAN FOR COMMUNITY HEALTH INITIATIVES THIS LINKAGE ENHANCES COLLABORATION, PRODUC ING A HIGHER QUALITY OF CARE AND SMOOTHER TRANSITIONS FOR PATIENTS WHO MAY NEED ANY OR ALL OF THESE SERVICES UR MEDICAL CENTER CONTINUALLY REINVESTS IN ITS FACILITIES AND PROGRAMS IN AN EFFORT TO IMPROVE THE HEALTH OF THE COMMUNITY FOR EXAMPLE, THE 85-YEAR-OLD HOSPITA L HAS IN RECENT YEARS RENOVATED ITS MEDICAL AND SURGICAL ICUS TO PROVIDE PATIENT- AND FAMI LY-CENTERED CARE IN LARGER, PRIVATE ROOMS IT ALSO UNVEILED A NEW FREESTANDING AMBULATORY SURGERY CENTER THAT INCLUDES 10 OPERATING SUITES AND THREE PROCEDURE ROOMS EQUIPPED WITH A DVANCED TECHNOLOGY, AND SPACIOUS FACILITIES FOR ENHANCED CARE AND PRIVACY FOR PATIENTS AND FAMILIES THE SURGERY CENTER WAS DEVELOPED AS AN INCREASE IN SPECIALTY CARE BEGAN PLACING MORE PRESSURE ON EXISTING OPERATING SUITES FOR URGENT, HIGH-ACUITY INPATIENT PROCEDURES STRONG MEMORIAL HOSPITAL ALSO RUNS THE REGION'S LARGEST EMERGENCY FACILITY THE RENOVATED 55,000-SQUARE-FOOT FRANK AND CAROLINE GANNETT EMERGENCY CENTER IS MORE THAN THREE TIMES LA RGER THAN STRONG'S FORMER EMERGENCY DEPARTMENT IT WAS DESIGNED TO IMPROVE EFFICIENCY, WIT H THE DIGNITY AND COMFORT OF OUR PATIENTS IN MIND, AND HAS BEEN DESIGNATED BY THE NEW YORK STATE DEPARTMENT OF HEALTH AS A LEVEL ONE REGIONAL TRAUMA CENTER THE ADULT TREATMENT ARE A WAS CONSTRUCTED WITH 25 PRIVATE PATIENT CUBICLES SURROUNDING A RAISED NURSING STATION SO THAT PATIENTS ARE READILY VISIBLE TO STAFF AND UNLIKE OTHER EMERGENCY FACILITIES IN THE REGION, IT ALSO INCLUDES A DEDICATED CHILDREN'S EMERGENCY DEPARTMENT WITH A PRIVATE WAITIN G ROOM SURPLUS FUNDS ARE ALSO DEDICATED TO SUPPORT RESEARCH WORK HAS BEEN COMPLETED ON A NEW CLINICAL AND TRANSLATIONAL RESEARCH INSTITUTE (CTSI) THAT NOW SERVES AS THE HUB OF RE SOURCES, EXPERTISE AND NETWORKS NECESSARY TO ACCELERATE THE CLINICAL APPLICATION OF BIOMED ICAL AND BEHAVIORAL RESEARCH SO EFFICACIOUS INTERVENTIONS CAN REACH INDIVIDUALS IN THE COM MUNITY MORE QUICKLY THE CTSI'S COMMUNITY ENGAGEMENT FUNCTION, WHICH IS ADMINISTERED BY TH E UR MEDICAL CENTER'S CENTER FOR COMMUNITY HEALTH, PROVIDES THE INFRASTRUCTURE TO SUPPORT THE CTSI COMMUNITY ENGAGEMENT MISSION BY FACILITATING COMMUNICATION AND PARTNERSHIPS AMONG RESEARCHERS, HEALTH CARE PROVIDERS, COMMUNITY MEMBERS AND ORGANIZATIONS IN ADDITION, SUR PLUS FUNDS ALSO SUPPORT THE UR MEDICAL CENTER'S COMMITMENT TO COMMUNITY HEALTH, WHICH DATE S BACK TO THE MEDICAL SCHOOL'S FOUNDING IN 1920, LOCAL BENEFACTOR GEORGE EASTMAN BEQUEATH ED A GIFT TO THE SCHOOL WITH THE INSTRUCTIONS THAT THE SCHOOL HELP MAKE ROCHESTER "ONE OF HEALTHIEST COMMUNITIES IN THE WORLD " THAT CHARGE HAS GIVEN RISE TO MANY PROGRAMS THAT SEE K TO ADDRESS PUBLIC HEALTH CHALLENGES, INCLUDING OBESITY, SMOKING CESSATION, HOME VISITS F OR AT-RISK MOTHERS, AND EFFORTS TO ELIMINATE DISPARITIES IN IMMUNIZATION RATES THESE EFFO RTS TAKE MANY FORMS AND RANGE FROM GRASSROOTS EFFORTS TO IMPROVE ACCESS, TO HEALTHY FOODS TO HIGH-TECH SOLUTIONS SUCH AS PROVIDING PEDIATRIC

Identifier	ReturnReference	Explanation
PART VI, LINE 5 (PROMOTION OF COMMUNITY HEALTH)		AND DENTAL TELEMEDICINE SERVICES TO SCHOOLS AND DAY CARE CENTERS A FEW EXAMPLES INCLUDE - THE MONROE COUNTY CANCER SERVICES PROVIDES CANCER SCREENING AND FOLLOW-UP ASSISTANCE TO UNINSURED/UNDER-INSURED FOR BREAST, COLON AND CERVICAL CANCER THE INITIATIVE ANNUALLY HE LPS MORE THAN 1,500 INDIVIDUALS WHO OTHERWISE MAY NOT GET SCREENED - THE HEALTHY LIVING P ROGRAM'S NATIONALLY RECOGNIZED FAITH-BASED PREVENTION PROGRAM WORKS IN THE AFRICAN-AMERICA N AND LATINO COMMUNITIES HELD IN CHURCH BASEMENTS AND COMMUNITY CENTERS, THIS CULTURALLY SENSITIVE PROGRAM TAUGHT BY CERTIFIED INSTRUCTORS HAS BENEFITED MORE THAN 1,900 PEOPLE SIN CE ITS INCEPTION IN 2002 - FOR MORE THAN TWO DECADES, OUR BABY LOVE PROGRAM HAS PROVIDED HOME VISITS TO REDUCE INFANT MORTALITY, PREMATURE BIRTHS, LOW-BIRTH WEIGHT AND FOSTER CARE PLACEMENT OF AT-RISK BABIES THIS VITAL HOME-VISIT PROGRAM CONTINUES TO MAKE A REMARKABLE DIFFERENCE IN THE LIVES OF YOUNG WOMEN AND THEIR FAMILIES IN THE MOST IMPOVERISHED NEIGHB ORHOODS WITHIN OUR INNER CITY IN 2011 ALONE, THE PROGRAM SERVED MORE THAN 355 AT-RISK PRE GNANT TEENS AND WOMEN AND THEIR NEWBORNS EACH YEAR

Identifier	ReturnReference	Explanation
PART VI, LINE 6 (AFFILIATED HEALTH CARE SYSTEM)		THE UNIVERSITY OF ROCHESTER MEDICAL CENTER IS AN INTEGRATED ACADEMIC HEALTH CENTER THAT CO MPRISES THE SCHOOL OF MEDICINE AND DENTISTRY, INCLUDING ITS FACULTY PRACTICE (UNIVERSITY O F ROCHESTER MEDICAL FACULTY GROUP), STRONG MEMORIAL HOSPITAL, GOLISANO CHILDREN'S HOSPITAL , JAMES P WILMOT CANCER CENTER, SCHOOL OF NURSING, EASTMAN INSTITUTE FOR ORAL HEALTH THE UNIVERSITY'S WHOLLY OWNED HEALTH CARE AFFILIATES ARE HIGHLAND HOSPITAL, VISITING NURSE S ERVICE, HIGHLANDS AT PITTSFORD, THE HIGHLANDS LIVING CENTER, INC AND HIGHLANDS AT BRIGHTO N UR MEDICAL CENTER AND THE AFFILIATED HEALTH CARE ENTITIES HAVE EMBRACED A COMPREHENSIVE APPROACH TO COMMUNITY HEALTH, WHICH EMPLOYS THE MULTIDISCIPLINARY SKILLS FOUND IN AN ACAD EMIC MEDICAL CENTER TO BOTH PROVIDE IMPORTANT COMMUNITY SERVICES AND CONDUCT COMMUNITY-BAS ED RESEARCH THESE ACTIVITIES HELP INFORM POLICYMAKERS AND THE COMMUNITY ABOUT LOCAL HEALT H CHALLENGES, EVALUATE THE EFFECTIVENESS OF INTERVENTIONS, AND SERVE AS A FOUNDATION FOR E VIDENCE-BASED PRACTICES TO IMPROVE HEALTH AND OVERALL QUALITY OF LIFE - THE UNIVERSITY'S HEALTH CARE DELIVERY NETWORK IS ANCHORED BY STRONG MEMORIAL HOSPITAL, A 749-BED TEACHING H OSPITAL PATIENTS BENEFIT FROM THE MEDICAL CENTER'S ROBUST TEACHING AND BIOMEDICAL RESEARC H PROGRAMS STUDENT ROSTERS INCLUDE APPROXIMATELY 400 MEDICAL STUDENTS, 550 GRADUATE STUDE NTS, AND 600 RESIDENTS AND FELLOWS WHO ARE ENGAGED IN COMMUNITY SERVICE PROJECTS THROUGHOU T THEIR EDUCATION - EASTMAN INSTITUTE FOR ORAL HEALTH PROVIDES COMMUNITY DENTAL CARE IN A NUMBER OF CLINICS, AS WELL AS CLINICAL EDUCATION TO DENTAL STUDENTS ENROLLED AT THE UNIVE RSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY IT OFFERS GENERAL DENTISTRY, PEDIATRI C AND ORTHODONTIC CLINICS, AND AN URGENT CARE DENTAL CLINIC THAT SEES APPROXIMATELY 40-50 PATIENTS A DAY IT OPERATES LOW-INCOME CLINICS AT SCHOOLS AND A DOWNTOWN LOCATION ADDITIO NALLY, FOUR SMILEMOBILES PROVIDE A DENTAL OFFICE ON WHEELS, ALLOWING THE CITY'S CHILDREN I NCREASED ACCESS TO MUCH NEEDED DENTAL CARE - THE JAMES P WILMOT CANCER CENTER IS ORGANIZ ED AROUND A MULTIDISCIPLINARY CARE MODEL, WHICH LEADING CANCER EXPERTS BELIEVE IS THE GOLD STANDARD IN CANCER CARE IN THE 21ST CENTURY ITS MODEL UNDERSCORES A COMMITMENT TO PROVID E PATIENTS IN THE ROCHESTER AREA WITH THE MOST UP-TO-DATE INFORMATION AND AVAILABLE TREATM ENTS, BASING OUR RECOMMENDATIONS ON THE BEST EVIDENCE IT IS THE ONLY CENTER IN THE ROCHES TER AND FINGER LAKES REGION OFFERING THIS TEAM APPROACH TO CARE A VARIETY OF FREE PREVENT IVE EDUCATION EVENTS ARE HELD THROUGHOUT THE YEAR, INCLUDING MEN'S HEALTH DAY, WHICH INCLU DES NUMEROUS FREE HEALTH SCREENINGS, FREE SKIN CANCER SCREENINGS, AND BREAST CANCER SCREEN INGS FOR THE UNINSURED AND UNDERINSURED - GOLISANO CHILDREN'S HOSPITAL, HOUSED IN STRONG MEMORIAL HOSPITAL, IS A 124-BED CHILDREN'S HOSPITAL THAT SERVES AS THE REFERRAL CENTER FOR UPSTATE NEW YORK, SURROUNDING STATES AND CANADA IT COMBINES AWARD-WINNING RESEARCH, INTE RNATIONALLY ACCLAIMED EDUCATION AND COMPASSIONATE CARE TO SERVE CHILDREN AND FAMILIES PED IATRIC SPECIALTIES INCLUDE ORTHOPAEDICS, NEUROLOGY/NEUROSURGERY, CANCER AND NEONATAL CARE IN ADDITION TO THESE TRADITIONAL MEDICAL SERVICES, GOLISANO CHILDREN'S HOSPITAL IS THE NA TION'S MODEL FOR "COMMUNITY PEDIATRICS," A PHILOSOPHY THAT EMBRACES THE IDEA THAT A CHILD' S COMMUNITY AND ENVIRONMENT AFFECT HIS HEALTH AND THEREFORE HE CANNOT BE TREATED SOLELY IN AN EXAM ROOM THE HOSPITAL ENCOURAGES PHYSICIANS AND STAFF TO PARTNER WITH COMMUNITY ORGA NIZATIONS TO IMPROVE VACCINATION RATES, EDUCATIONAL OPPORTUNITIES, SAFETY AT HOME AND ON P LAYGROUNDS, AND HEALTH INSURANCE AND HEALTH CARE ACCESS THE UNIVERSITY'S WHOLLY OWNED HEA LTH CARE AFFILIATES ARE - HIGHLAND HOSPITAL OF ROCHESTER (HIGHLAND)PROVIDES INPATIENT AND OUTPATIENT HEALTHCARE SERVICES WITHOUT REGARD TO A PATIENT'S ABILITY TO PAY HIGHLAND OPE RATES A 261 BED ACUTE CARE HOSPITAL, AS WELL AS 13 PRIMARY CARE SATELLITE CLINICS, AN OB/M IDWIFERY CLINIC, BREASTCARE CLINIC AND THREE RADIATION ONCOLOGY TREATMENT CENTERS HIGHLAN D IS ALSO A TEACHING AFFILIATE OF THE UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTI STRY HIGHLAND'S SERVICE AREA INCLUDES MONROE COUNTY, NEW YORK, AS WELL AS SEVERAL COUNTIE S SURROUNDING THE ROCHESTER, NEW YORK REGION - VISITING NURSE SERVICE OFFERS CERTIFIED AN D LICENSED HOME HEALTH CARE SERVICES FOR NEWBORNS TO SENIORS - THE HIGHLANDS AT PITTSFORD CAMPUS INCLUDES TWO SEPARATE CORPORATIONS WITH DIFFERENT ACTIVITIES OFFERING SKILLED NURS ING CARE AS WELL AS ASSISTED AND INDEPENDENT LIVING FOR SENIORS THE HIGHLANDS LIVING CENT ER IS A SKILLED NURSING FACILITY THAT ALSO OFFERS AN ADULT DAY CARE PROGRAM THE ASSISTED LIVING, INDEPENDENT LIVING, AND COMMUNITY EDUCATION ARE PROVIDED BY HIGHLAND COMMUNITY DEV ELOPMENT CORPORATION D/B/A THE HIGHLANDS AT PITTSFORD AND LAURELWOOD AT THE HIGHLANDS THE HIGHLANDS OFFER A COMPREHENSIVE SERIES OF COMMUNITY EDUCATION PROGRAMS ON CURRENT HEALTH TOPICS, INCLUDING HEART HEALTH, NUTRITION, ORAL HE

Identifier	ReturnReference	Explanation
PART VI, LINE 6 (AFFILIATED HEALTH CARE SYSTEM)		ALTH, AND DIABETES PREVENTION, TO NAME A FEW - THE HIGHLANDS AT BRIGHTON IS A SKILLED NUR SING FACILITY THAT SPECIALIZES IN CARE FOR THE MOST MEDICALLY COMPLEX CASES

Identifier	ReturnReference	Explanation
STATE FILING OF COMMUNITY BENEFIT REPORT	990 SCHEDULE H, PART VI	NY,

Additional Data

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

Form 990 Schedule H, Part V Section C. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility

Section C. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility (list in order of size, measured by total revenue per facility, from largest to smallest) How many non-hospital facilities did the organization operate during the tax year? **23** Name and address	Type of Facility (Describe)
URMC AMBULATORY CENTER 180 SAWGRASS DRIVE ROCHESTER,NY 14620	AMBULATORY SURGERY OUTPATIENT MEDICAL CLINIC
MUSCULOSKELETAL BLDG 4901 LAC DE VILLE BLVD ROCHESTER,NY 14618	OUTPATIENT MEDCLINIC OUTPATIENT REHAB CLINIC
EASTMAN DENTAL CENTER 625 ELMWOOD AVENUE ROCHESTER,NY 14620	OUTPATIENT DENTAL CLINICS
STRONG TIES 2613 W HENRIETTA ROAD ROCHESTER,NY 14623	OUTPATIENT MEDICAL CLINIC, OUTPATIENT MENTAL HEALTH CLINIC
UNIV OTOLARYNGOLOGY ASSOC & AUDIOLOGY 2365 SOUTH CLINTON AVENUE ROCHESTER,NY 14618	OUTPATIENT MEDICAL CLINIC
SLEEP DISORDERPULMONARY FUNCTION TESTIN 2337 SOUTH CLINTON AVENUE ROCHESTER,NY 14618	OUTPATIENT MEDICAL CLINIC
PERINATOLOGY EXTENSION CLINIC 500 RED CREEK DRIVE ROCHESTER,NY 14623	OUTPATIENT MEDICAL CLINIC,OUTPATIENT MENTAL HEALTH CLINIC
STRONG HEALTH CARDIAC REHAB PROGRAM 2425 SOUTH CLINTON AVENUE ROCHESTER,NY 14618	OUTPATIENT MEDICAL CLINIC
STRONG PSYCH CENTER OP SERVICES 2180 SOUTH CLINTON AVENUE ROCHESTER,NY 14618	OUTPATIENT MEDICAL CLINIC,OUTPATIENT MENTAL HEALTH CLINIC
STRONG MEMORIAL HOSPITAL EC 919 WESTFALL ROAD ROCHESTER,NY 14618	OUTPATIENT MEDICAL CLINIC
CLINTON CROSSING NUCLEAR CARDIOLOGY 2400 SOUTH CLINTON AVENUE ROCHESTER,NY 14618	OUTPATIENT MEDICAL CLINIC
MARY M PARKES CENTER 400 RED CREEK DRIVE ROCHESTER,NY 14623	OUTPATIENT MEDICAL CLINIC
EASTMAN DENTAL-DOWNTOWN CLINIC 228 EAST MAIN STREET ROCHESTER,NY 14604	OUTPATIENT DENTAL CLINIC
ENRICO FERMI DENTAL CLINICAL SCHOOL #17 158 ORCHARD STREET ROCHESTER,NY 14611	OUTPATIENT DENTAL CLINIC
WESTSIDE SPORTS MEDICINE 10 SOUTH POINT LANDING ROCHESTER,NY 14606	OUTPATIENT MEDICAL CLINIC
EDC SMILEMOBILE VANS 1-4 625 ELMWOOD AVENUE ROCHESTER,NY 14620	OUTPATIENT DENTAL CLINIC
EAST HIGH SCHOOL 1801 EAST MAIN STREET ROCHESTER,NY 14609	OUTPATIENT MEDICAL CLINIC OUTPATIENT MENTAL HEALTH CLINIC
PEDIATRIC REACH CLINIC BIVONA CHILD CT 375 LAKE AVENUE ROCHESTER,NY 14608	OUTPATIENT MEDICAL CLINIC
STRONG HEALTH-LAZOS FUERTES CLINIC 817 EAST MAIN STREET ROCHESTER,NY 14605	OUTPATIENT MEDICAL CLINIC OUTPATIENT MENTAL HEALTH CLINIC
STRONG HEALTH-SPORT & HAND REHAB-GREECE 120 ERIE CANAL DRIVE GREECE,NY 14626	OUTPATIENT MEDICAL CLINIC
EDC-MONROE COMMUNITY HOSPITAL CLINIC 435 E HENRIETTA ROAD ROCHESTER,NY 14620	OUTPATIENT DENTAL CLINIC
EDC-HILLSIDE CHILDRENS CENTER CLINIC 1183 MONROE AVE ROCHESTER,NY 14620	OUTPATIENT DENTAL CLINIC
METRO YMCA 444 EAST MAIN STREET ROCHESTER,NY 14604	OUTPATIENT MEDICAL CLINIC

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . . ▶ ☐

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

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3 Enter total number of other organizations . . . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) SCHOLARSHIPS AND FELLOWSHIPS TO STUDENTS	9200	142,320,545	0	N/A	N/A

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
STUDENT SCHOLARSHIP, FELLOWSHIPS AND STUDENT LOANS	SCHEDULE I, PART IV	STUDENTS WHO RECEIVE SCHOLARSHIPS, FELLOWSHIPS AND STUDENT LOANS FROM THE UNIVERSITY OF ROCHESTER ARE SELECTED AND THE AMOUNT OF GRANTS OR LOANS DETERMINED BY OBJECTIVE AND NON-DISCRIMINATORY PROCESSES APPLIED TO ALL SIMILARLY SITUATED INDIVIDUALS THE DECISIONS ARE MADE ON A CASE BY CASE BASIS THROUGH EVALUATING THE ACADEMIC ACHIEVEMENT AND FINANCIAL NEED OF THE APPLICANT IN LIGHT OF THE FUNDS AVAILABLE FOR THIS PURPOSE
SUBAWARDS	SCHEDULE I, PART II	IN FURTHERANCE OF ITS RESEARCH ACTIVITIES, THE UNIVERSITY OF ROCHESTER MAKES SUB-AWARDS TO OTHER ORGANIZATIONS THAT PERFORM RESEARCH IN CONNECTION WITH RESEARCH GRANTS AWARDED TO THE UNIVERSITY THE UNIVERSITY DOES NOT CATEGORIZE THESE SUB-AWARDS AS "GRANTS" FOR FORM 990, SCHEDULE I REPORTING, SINCE THE RECIPIENT ORGANIZATIONS PERFORM RESEARCH SERVICES FOR THE UNIVERSITY AND ARE CONSIDERED INDEPENDENT CONTRACTORS WHICH SERVE THE DIRECT NEEDS OF THE UNIVERSITY

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I Questions Regarding Compensation

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

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
COMPENSATION INFORMATION		DETAIL REGARDING BENEFITS PROVIDED SCHEDULE J, PART I, LINE 1A FIRST CLASS OR CHARTER TRAVEL IN CERTAIN CIRCUMSTANCES, THE PRESIDENT OF THE UNIVERSITY OF ROCHESTER (THE "UNIVERSITY") MAY TRAVEL FIRST CLASS IF CERTAIN TIME/DISTANCE REQUIREMENTS ARE MET AND A VALID UNIVERSITY-RELATED BUSINESS PURPOSE FOR THE TRAVEL EXISTS TRAVEL FOR COMPANIONS IN CERTAIN CIRCUMSTANCES, THE SPOUSE OF THE PRESIDENT OR OTHER KEY EMPLOYEE MAY TRAVEL FOR UNIVERSITY PURPOSES EXAMPLES OF SUCH TRAVEL INCLUDE ATTENDANCE AT FUNDRAISING OR ALUMNI EVENTS IN ACCORDANCE WITH APPLICABLE LEGAL STANDARDS, THE UNIVERSITY WILL PAY FOR SPOUSAL TRAVEL AS A REGULAR BUSINESS EXPENSE ONLY IF THE SPOUSAL TRAVEL SERVES A "BONA FIDE BUSINESS PURPOSE" OF THE UNIVERSITY TAX INDEMNIFICATION AND GROSS-UP PAYMENTS THE UNIVERSITY MAY PROVIDE TAX GROSS-UP PAYMENTS UNDER CERTAIN CIRCUMSTANCES AS APPROVED BY THE BOARD THE UNIVERSITY DOES NOT GENERALLY PROVIDE TAX INDEMNIFICATIONS HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE/SOCIAL CLUB DUES/PERSONAL SERVICES AS A CONDITION OF EMPLOYMENT, THE PRESIDENT AND PROVOST ARE REQUIRED TO LIVE IN A HOME ON THE UNIVERSITY'S CAMPUS WHICH IS FURNISHED AND MAINTAINED AT THE UNIVERSITY'S EXPENSE THE UNIVERSITY ALSO PROVIDES A SOCIAL CLUB MEMBERSHIP, TO BE USED BY THE PROVOST IN CONNECTION WITH HIS DUTIES THE PRESIDENT AND PROVOST ARE RESPONSIBLE FOR ANY PERSONAL USE OF THE CLUB MEMBERSHIP, HOUSEHOLD STAFF OR OTHER PERSONAL EXPENSES INCURRED ---------- SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN PARTICIPATION SCHEDULE J, PART I, LINE 4B THE FOLLOWING INDIVIDUALS PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN AND RECEIVED EMPLOYER PAID AMOUNTS THAT ARE INCLUDED IN DEFERRED COMPENSATION BRADFORD C BERK SERP $112,000 MARK B TAUBMAN SERP $ 75,000 RICHARD FISHER SERP $ 25,750 RAYMOND J MAYEWSKI SERP $ 89,010 STEVEN GOLDSTEIN SERP $135,000 JEFFREY PETERS SERP $ 17,500 JOEL S SELIGMAN 457(F) $ 50,000 MICHAEL MALONEY 457(F) $240,000 DOUGLAS PHILLIPS 457(F) $240,000 ---------- PROVISION OF NON-FIXED PAYMENTS SCHEDULE J, LINE 7 THE UNIVERSITY OF ROCHESTER MEDICAL SCHOOL COMPENSATION PLAN ALLOWS COMPENSATION TO BE CALCULATED, IN PART, BY MEDICAL SERVICES RENDERED THE UNIVERSITY OF ROCHESTER DOES NOT PROVIDE DISCRETIONARY BONUS AND/OR INCENTIVE COMPENSATION PAYMENTS MADE TO ANY DISQUALIFIED PERSON IS APPROVED BY THE BOARD THROUGH THE PROCESS DESCRIBED IN FORM 990, PART VI, SECTION B, LINE 15

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOEL SELIGMAN	(I)	665,902	0	16,500	73,596	13,416	769,414	0
	(II)	0	0	0	0	0	0	0
PAUL J BURGETT	(I)	222,709	0	16,500	22,117	7,525	268,851	0
	(II)	0	0	0	0	0	0	0
BRADFORD C BERK	(I)	849,260	0	19,467	135,596	17,436	1,021,759	0
	(II)	0	0	0	0	0	0	0
RALPH W KUNCL	(I)	492,164	0	33,363	23,597	50,082	599,206	0
	(II)	0	0	0	0	0	0	0
PETER LENNIE	(I)	388,933	0	16,500	24,515	14,127	444,075	0
	(II)	0	0	0	0	0	0	0
WILLIAM M MURPHY	(I)	202,488	0	16,500	21,531	10,644	251,163	0
	(II)	0	0	0	0	0	0	0
RONALD J PAPROCKI	(I)	485,664	0	18,031	23,597	23,682	550,974	0
	(II)	0	0	0	0	0	0	0
DOUGLAS W PHILLIPS	(I)	242,713	0	42,138	263,596	18,744	567,191	0
	(II)	0	0	0	0	0	0	0
SUE S STEWART	(I)	387,046	0	16,500	24,227	9,569	437,342	0
	(II)	0	0	0	0	0	0	0
MARK B TAUBMAN	(I)	711,010	0	861	98,596	18,632	829,099	0
	(II)	0	0	0	0	0	0	0
JAMES D THOMPSON	(I)	448,567	0	37,896	24,305	18,794	529,562	0
	(II)	0	0	0	0	0	0	0
RICHARD FISHER	(I)	596,903	0	18,367	49,346	17,496	682,112	0
	(II)	0	0	0	0	0	0	0
STEVEN GOLDSTEIN	(I)	831,072	0	42,110	158,596	3,959	1,035,737	0
	(II)	0	0	0	0	0	0	0
RAYMOND J MAYEWSKI	(I)	477,012	0	31,985	112,606	3,221	624,824	0
	(II)	0	0	0	0	0	0	0
ELIZABETH MCANARNEY	(I)	173,957	0	16,500	5,747	7,269	203,473	0
	(II)	0	0	0	0	0	0	0
THOMAS H JACKSON	(I)	352,937	0	19,820	23,688	18,366	414,811	0
	(II)	0	0	0	0	0	0	0
CHARLES MCCOLLISTER EVARTS	(I)	298,052	0	16,500	16,752	19,024	350,328	0
	(II)	0	0	0	0	0	0	0
MICHAEL D MALONEY MD	(I)	490,970	523,725	0	263,596	16,449	1,294,740	0
	(II)	0	0	0	0	0	0	0
MARC D BROWN MD	(I)	543,938	1,126,612	16,500	23,597	12,293	1,722,940	0
	(II)	0	0	0	0	0	0	0
JEFFREY H PETERS MD	(I)	914,278	232,682	54,990	41,096	17,397	1,260,443	0
	(II)	0	0	0	0	0	0	0
BRENT DUBESHTER MD	(I)	919,706	324,531	0	23,597	21,999	1,289,833	0
	(II)	0	0	0	0	0	0	0
JASON HAITAO HUANG MD	(I)	462,568	864,167	16,500	29,634	19,807	1,392,676	0
	(II)	0	0	0	0	0	0	0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	64983UP20	11-06-2003	164,425,000	2003 A,B,C- CAPITAL PROJECTS		X		X		X
B	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	64983TC50	08-26-2004	45,602,797	2004 A- CO-GENERATION FACILITY		X		X		X
C	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	64983QWB1	03-16-2006	111,180,000	2006 A-1 & B-1- BOND REFINANCING		X		X		X
D	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	649903BH3	02-21-2007	180,959,178	2007 A-1, A-2 & B- CAPITAL PROJECT		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	49,520,000	19,319,959	0	3,871,156
2	Amount of bonds legally defeased	0	0	0	0
3	Total proceeds of issue	165,914,139	46,665,022	111,180,000	186,719,732
4	Gross proceeds in reserve funds	0	0	0	0
5	Capitalized interest from proceeds	0	2,520,693	0	1,501,163
6	Proceeds in refunding escrow	0	0	0	0
7	Issuance costs from proceeds	3,122,743	839,083	2,170,437	3,175,140
8	Credit enhancement from proceeds	2,349,000	0	1,213,000	0
9	Working capital expenditures from proceeds	383,179	0	0	1,440,200
10	Capital expenditures from proceeds	70,315,051	43,305,246	0	167,058,363
11	Other spent proceeds	89,744,166	0	107,796,563	0
12	Other unspent proceeds	0	0	0	13,544,866
13	Year of substantial completion	2009	2008	2000	2010

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

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X					
b Are there any research agreements that may result in private business use of bond-financed property?	X		X					
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X					
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	.5000 %		.2900 %		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	.1700 %		.0500 %		%		%	
6 Total of lines 4 and 5	.6700 %		.3400 %		%		%	
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X					

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X				
2 Is the bond issue a variable rate issue?		X		X				
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		X		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?								
5 Were any gross proceeds invested beyond an available temporary period?		X		X				
6 Did the bond issue qualify for an exception to rebate?		X		X				

Part V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Part III Private Business Use *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?	X		X		X		X	
b	Are there any research agreements that may result in private business use of bond-financed property?	X		X		X		X	
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X		X		X	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 010 %		0 310 %		0 120 %		0 500 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 010 %		0 170 %		0 030 %		0 170 %	
6	Total of lines 4 and 5	0 020 %		0 480 %		0 150 %		0 670 %	
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X	

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
2	Is the bond issue a variable rate issue?	X			X	X			X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X			X	X			X
b	Name of provider	WELLSFARGOCITIGROUP				BANK OF AMERICA			
c	Term of hedge	30				21 3			
d	Was the hedge superintegrated?		X				X		
e	Was a hedge terminated?		X				X		
4a	Were gross proceeds invested in a GIC?		X		X		X		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?								
5	Were any gross proceeds invested beyond an available temporary period?	X			X		X	X	
6	Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
BOND ISSUE 2003 A,B,C	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2003 A,B,C BOND ISSUE INCLUDES $1,489,139 IN INVESTMENT EARNINGS
BOND ISSUE 2004A	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2004A BOND ISSUE INCLUDES $1,062,225 IN INVESTMENT EARNINGS
BOND ISSUE 2007 A-1, A-2, B	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2007 A-1, A-2, B BOND ISSUE INCLUDES $5,760,554 IN INVESTMENT EARNINGS
BOND ISSUE 2009 A,B,C,D,E	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2009 A,B,C,D,E BOND ISSUE INCLUDES $175,956 IN INVESTMENT EARNINGS
ADDITIONAL BOND CUSIP INFORMATION	PART I, ROW D, COLUMN C	BOND ISSUE 2007 A-2 CUSIP #649903CK5, BOND ISSUE 2007 B CUSIP #649903CG4
See Additional Data Table		

SCHEDULE K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

UNIVERSITY OF ROCHESTER

Employer identification number

16-0743209

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled Financing	
							Yes	No	Yes	No	Yes	No
A	D FFIIT F, SUTH FITA F THE TTE F NEW , FI	14-[illegible]	[illegible]	[illegible]	[illegible]	[illegible] - E ND EFININ IN						
B	D FFIIT F, SUTH FITA F THE TTE F NEW , FI	14-[illegible]	[illegible]	[illegible]	1[illegible]	[illegible] E D E EFITL EF TE T						
C												
D												

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	0.	14,218,840.		
2	Amount of bonds legally defeased	0.	0.		
3	Total proceeds of issue	63,115,512.	120,917,535.		
4	Gross proceeds in reserve funds	0.	0.		
5	Capitalized interest from proceeds		0.		
6	Proceeds in refunding escrows	0.	0.		
7	Issuance costs from proceeds	965,109.	1,169,973.		
8	Credit enhancement from proceeds	499,130.	0.		
9	Working capital expenditures from proceeds	0.	426,187.		
10	Capital expenditures from proceeds	0.	50,387,837.		
11	Other spent proceeds	61,651,273.	41,159,364.		
12	Other unspent proceeds	0.	27,774,174.		
13	Year of substantial completion	2008	2010		

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

Part III Private Business Use

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

Part V Supplemental Information

Identifier	Return Reference	Explanation
BOND ISSUE 2003 A,B,C	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2003 A,B,C BOND ISSUE INCLUDES $1,489,139 IN INVESTMENT EARNINGS
BOND ISSUE 2004A	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2004A BOND ISSUE INCLUDES $1,062,225 IN INVESTMENT EARNINGS
BOND ISSUE 2007 A-1, A-2, B	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2007 A-1, A-2, B BOND ISSUE INCLUDES $5,760,554 IN INVESTMENT EARNINGS
BOND ISSUE 2009 A,B,C,D,E	PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED FOR THE 2009 A,B,C,D,E BOND ISSUE INCLUDES $175,956 IN INVESTMENT EARNINGS
ADDITIONAL BOND CUSIP INFORMATION	PART I, ROW D, COLUMN C	BOND ISSUE 2007 A-2 CUSIP #649903CK5, BOND ISSUE 2007 B CUSIP #649903CG4

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

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

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	(c) Corrected? No

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

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

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	(b) From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) No	(f) Approved by board or committee? Yes	(f) No	(g) Written agreement? Yes	(g) No
Total . . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV **Business Transactions Involving Interested Persons.**

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

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

Part V **Supplemental Information**

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

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction $	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
SUSAN FISHER	FAMILY MEMBER OF KEY EMPL	293,692	PAYMENT OF COMPENSATION		No
MARY BERK	FAMILY MEMBER OF OFFICER	26,379	PAYMENT OF COMPENSATION		No
LAMAR MURPHY	FAMILY MEMBER OF OFFICER	176,973	PAYMENT OF COMPENSATION		No
BONNIE GOLDSTEIN	FAMILY MEMBER OF KEY EMPL	83,899	PAYMENT OF COMPENSATION		No
THOMAS W WITMER	FAMILY MEMBER OF TRUSTEE	198,438	PAYMENT OF COMPENSATION		No
KAREN BERK	FAMILY MEMBER OF OFFICER	50,074	PAYMENT OF COMPENSATION		No
DENNIS KESSLER	FAMILY MEMBER OF TRUSTEE	37,184	PAYMENT OF COMPENSATION		No
XEROX	COMMON TRUSTEE/OFFICER	4,460,627	PURCHASE OF BUSINESS SERVICES		No
PAETEC	COMMON TRUSTEE/OFFICER	135,589	PURCHASE OF COMMUN SERVICE		No
WESTFALL PARK ASSOC LLC	COMMON TRUSTEE/OWNER	336,854	RENTAL OF REAL PROPERTY		No
CLINTON WOODS ASSOC LLC	COMMON TRUSTEE/OWNER	495,981	RENTAL OF REAL PROPERTY		No
LECHASE CONSTRUCTION	COMMON TRUSTEE/OFFICER	14,699,272	PURCHASE CONSTRUCTION SVCS		No

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

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of transaction $	**(d)** Description of transaction	**(e)** Sharing of organization's revenues?	
				Yes	**No**
BECTON DICKINSON AND COMPANY	COMMON TRUSTEE/OFFICER	734,577	PURCHASE PRODUCTS EQ/SVC CONTR		No
WEGMANS	COMMON TRUSTEE/OWNER	210,295	PURCHASE OF PRESCRIPTION MEDS		No
JP MORGAN CHASE BANK	COMMON TRUSTEE/OFFICER	1,013,412	BANKING SERVICES		No
COCA COLA	COMMON TRUSTEE/OFFICER	787,260	PRODUCT PURCHASES		No
INDIA EQUITY PARTNERS	FAMILY MEMBER OF TRUSTEE	562,374	INVESTMENT ADVICE		No

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art	X	18	69,593	FAIR MARKET VALUE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		693	FAIR MARKET VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	212	10,274,249	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial	X	3	823,800	FAIR MARKET VALUE
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies	X	34	787,074	FAIR MARKET VALUE
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )		See Add'l Data		
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 | 1

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

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF THE NUMBER OF CONTRIBUTIONS	FORM 990, SCHEDULE M, PART I, COLUMN (B)	THE UNIVERSITY OF ROCHESTER REPORTS ALL NON-CASH CONTRIBUTIONS RECEIVED, OTHER THAN SECURITIES, BASED ON THE NUMBER OF NON-CASH ITEMS RECEIVED

Additional Data

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

Form 990 Schedule M, Part I - Types of Property

Property Type	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
Other ► (COMPUTER EQUIPMENT)	X	78	36,351	FAIR MARKET VALUE
Other ► (GIFT-IN-KIND)	X	29	161,375	FAIR MARKET VALUE
Other ► (PERSONAL PROPERTY)	X	160	85,586	FAIR MARKET VALUE
Other ► (MISCELLANEOUS EQUIPMENT)	X	34	288,911	FAIR MARKET VALUE
Other ► (MUSICAL INSTRUMENTS)	X	4	33,200	FAIR MARKET VALUE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493136069712

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

Identifier	Return Reference	Explanation
DETAIL OF OTHER PROGRAM SERVICES	FORM 990, PART III, LINE 4d	AUXILIARY ENTERPRISES- THE UNIVERSITY OPERATES EITHER DIRECTLY OR THROUGH THIRD PARTY CONTRACTORS FOOD SERVICES WHICH SERVED 4,895 UNDERGRADUATES 2,782,926 MEALS IN FIVE DINING SERVICES THE UNIVERSITY HAS 837 UNITS USED FOR STUDENT HOUSING

Identifier	Return Reference	Explanation
DETAIL OF FAMILY OR BUSINESS RELATIONSHIPS	FORM 990, PART VI, SECTION A, LINE 2	RICHARD T AAB AND ARUNAS A CHESONIS - BUSINESS RELATIONSHIP RICHARD T AAB AND DAVID FLAUM - BUSINESS RELATIONSHIP THOMAS S RICHARDS AND SUE S STEWART - BUSINESS RELATIONSHIP LAURENCE H BLOCH AND MICHAEL S ROSEN - BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
DESCRIPTION OF FORM 990 REVIEW PROCESS	FORM 990, PART VI, SECTION B, LINE 11b	THE FORM 990 OF UNIVERSITY OF ROCHESTER IS PREPARED BY FINANCE STAFF AND PROVIDED TO PRICEWATERHOUSECOOPERS LLP AND SENIOR MANAGEMENT FOR REVIEW PRIOR TO FILING THE FORM 990 WAS ALSO PROVIDED TO THE UNIVERSITY'S AUDIT AND RISK ASSESSMENT COMMITTEE PRIOR TO FILING THE COMMITTEE'S QUESTIONS AND COMMENTS WERE ADDRESSED AT A COMMITTEE MEETING PRIOR TO FILING THE FORM 990 WAS ALSO PROVIDED TO THE ENTIRE BOARD OF TRUSTEES PRIOR TO FILING

Identifier	Return Reference	Explanation
DESCRIPTION OF PROCESS TO MONITOR CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12C	DIRECTORS, COMMITTEE MEMBERS, OFFICERS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE A CONFLICT OF INTEREST A) PRIOR TO VOTING ON OR OTHERWISE DISCHARGING THEIR DUTIES WITH RESPECT TO ANY MATTER INVOLVING THE CONFLICT WHICH COMES BEFORE THE BOARD OR ANY COMMITTEE, B) PRIOR TO ENTERING INTO ANY CONTRACT OR TRANSACTION INVOLVING THE CONFLICT, C) AS SOON AS POSSIBLE AFTER THE DIRECTOR, COMMITTEE MEMBER OR OFFICER LEARNS OF THE CONFLICT, AND D) ON AN ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM THE FORM IS DISTRIBUTED ANNUALLY AND REQUIRES DISCLOSURE OF ALL CONFLICTS OF INTEREST, INCLUDING SPECIFIC INFORMATION CONCERNING THE TERMS OF ANY CONTRACT OR TRANSACTION WITH THE UNIVERSITY THAT INVOLVES A POTENTIAL CONFLICT OF INTEREST FOR THE INDIVIDUAL THE FORMS ARE REVIEWED BY LEGAL COUNSEL, AND CONFLICTS DISCLOSED ON THE FORMS OR ON AN AD-HOC BASIS ARE REVIEWED BY AN INDEPENDENT BOARD COMMITTEE THE COMMITTEE CONSIDERS THE MATERIAL FACTS CONCERNING ANY PROPOSED CONTRACT OR TRANSACTION, INCLUDING THE PROCESS BY WHICH THE DECISION WAS MADE TO APPROVE OR RECOMMEND ENTERING INTO THE ARRANGEMENT ON THE TERMS PROPOSED, AND APPROVES SUCH CONTRACTS OR TRANSACTIONS ONLY IF THE TERMS ARE FAIR AND REASONABLE TO THE UNIVERSITY AND THE ARRANGEMENTS ARE CONSISTENT WITH THE BEST INTERESTS OF THE UNIVERSITY

Identifier	Return Reference	Explanation
DESCRIPTION OF PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, SECTION B, LINES 15A AND 15B	WRITTEN SELF-EVALUATIONS AND PERFORMANCE EVALUATIONS FOR THE UNIVERSITY'S OFFICERS AND KEY EMPLOYEES ARE REVIEWED ANNUALLY BY THE UNIVERSITY'S COMMITTEE ON COMPLIANCE AND COMPENSATION THE COMMITTEE REVIEWS AND APPROVES TOTAL COMPENSATION FOR OFFICERS AND KEY EMPLOYEES AND CONSIDERS, IN ADDITION TO THE PERFORMANCE EVALUATIONS, THE SCOPE OF THE INDIVIDUAL'S JOB RESPONSIBILITIES, PREVIOUS COMPENSATION AND COMPARABLE COMPENSATION PAID TO PEOPLE WITH SIMILAR RESPONSIBILITIES AT COMPARABLE INSTITUTIONS THE COMPARABLE INFORMATION IS PROVIDED BY AN INDEPENDENT CONSULTANT AND BY REFERENCE TO LOCAL, REGIONAL AND NATIONAL COMPENSATION SURVEYS

Identifier	Return Reference	Explanation
DESCRIPTION FOR MAKING DOCUMENTS PUBLIC	FORM 990, PART VI, SECTION C, LINES 18 AND 19	THE UNIVERSITY OF ROCHESTER'S FORM 1023 AND FORM 990 ARE AVAILABLE UPON REQUEST THE UNIVERSITY OF ROCHESTER'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE NOT ROUTINELY MADE AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
DETAIL OF INDEPENDENT CONTRACTOR PAYMENTS	FORM 990, PART VII, SECTION B	THE PAYMENT AMOUNTS LISTED FOR LECHASE CONSTRUCTION SERVICES, THE PIKE COMPANY, INC , DGA BUILDERS, INC , AND POSTLER AND JAECKLE CORP REPRESENT THE ESTIMATED SERVICE COMPONENT OF THE TOTAL PAYMENTS MADE TO THESE VENDORS FOR CONSTRUCTION SERVICES

Identifier	Return Reference	Explanation
STATES WHERE A COPY OF THE FORM 990 IS FILED	FORM 990, PART VI, SECTION C, LINE 17	ALTHOUGH THE UNIVERSITY OF ROCHESTER IS LOCATED IN THE STATE OF NEW YORK, A COPY OF ITS FORM 990 IS NOT REQUIRED TO BE FILED WITH THE STATE, SINCE EDUCATIONAL INSTITUTIONS INCORPORATED UNDER THE NEW YORK STATE EDUCATION LAW ARE EXEMPT FROM FILING IN THE STATE OF NEW YORK

Identifier	Return Reference	Explanation
DETAIL OF OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 5	OTHER CHANGES IN NET ASSETS IS COMPRISED OF THE FOLLOWING ITEMS - NET UNREALIZED APPRECIATION $172,997,419 - CHANGE IN VALUATION OF ANNUITIES (3,504,922) - TRANSFERS TO AFFILIATES (1,352,973) - OTHER CHANGES 3,052,492 ---------- TOTAL $171,192,015

Identifier	Return Reference	Explanation
GOVERNMENT GRANTS (CONTRIBUTIONS)	FORM 990, PART III, LINE 4b & PART VIII, LINES 1e AND 2c	THE UNIVERSITY HAS HISTORICALLY REPORTED GRANT REVENUES AS A COMPONENT OF PROGRAM SERVICE REVENUE. HOWEVER, IN ACCORDANCE WITH IRS INSTRUCTIONS, SUCH GRANT REVENUE HAS BEEN RECLASSIFIED AND REPORTED AS A COMPONENT OF CONTRIBUTIONS ON THE 2010 FORM 990

Identifier	Return Reference	Explanation
DELEGATION OF AUTHORITY	PART VI, SECTION A, LINE 1a	THE BY-LAWS OF THE UNIVERSITY PROVIDE FOR AN EXECUTIVE COMMITTEE THAT MAY EXERCISE ALL THE POWERS OF THE BOARD IN INTERVALS BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, EXCEPT THAT THE EXECUTIVE COMMITTEE DOES NOT HAVE POWER (1) TO GRANT DEGREES, (2) TO REMOVE A TRUSTEE OR OFFICER, (3) TO ELECT TRUSTEES, THE CHAIR OF THE BOARD OR THE PRESIDENT, OR (4) TO AMEND, ALTER OR REPEAL THE BY-LAWS THE MEMBERS OF THE EXECUTIVE COMMITTEE ARE ALL TRUSTEES THE EXECUTIVE COMMITTEE CONSISTS OF THE CHAIR OF THE BOARD, THE PRESIDENT, THE CHAIRS OF THE BOARD COMMITTEES OF INVESTMENT, NOMINATIONS AND BOARD PRACTICES, FACILITIES, AUDIT AND RISK ASSESSMENT, PERSONNEL, HEALTH AFFAIRS, ACADEMIC AFFAIRS, RESEARCH AND INNOVATION, FINANCIAL PLANNING, STUDENT AFFAIRS, COMPLIANCE AND COMPENSATION, AND DEVELOPMENT PLUS SUCH OTHER TRUSTEES AS THE BOARD OF TRUSTEES MAY ELECT TO SERVE FOR TERMS NOT TO EXCEED FIVE YEARS

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME RONALD J PAPROCKI TITLE SR VP ADMIN & FINANCE, CFO HOURS

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME STEVEN GOLDSTEIN TITLE VICE PRESIDENT- URMC HOURS 12

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME RAYMOND J MAYEWSKI TITLE VP, URMC OFC SR VP FOR HEALTH HOURS 9

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493136069712

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
UNIVERSITY OF ROCHESTER

Employer identification number
16-0743209

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) UNIVERSITY OF ROCHESTER INVESTMENT LLC 266 WALLIS HALL ROCHESTER, NY 14627 16-0743209	INVESTING	DE	2,509,752	5,778,371	UNIV OF ROCH
(2) EXTENSIBLE CATALOG ORGANIZATION LLC 263 WALLIS HALL ROCHESTER, NY 14627 16-0743209	TECH DEVELOP	NY	204,985	120,105	UNIV OF ROCH

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
See Additional Data Table							

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) MEDICAL ADMINISTRATIVE ASSOCIATES INC 777 SOUTH CLINTON AVENUE ROCHESTER, NY14620 16-1354319	RETAIL PHARMA	NY	HIGHLAND HOSP	C CORP			
(2) UR EQUITY HOLDINGS INC 110 OFFICE PARK WAY PITTSFORD, NY14534 27-3040889	HOLDING CO	NY	UNIV OF ROCH	C CORP	0	1	100 000 %
(3) CHARITABLE REMAINDER TRUSTS (25)	N/A	NY	NA	TRUST			
(4) POOLED INCOME FUNDS (3)	N/A	NY	NA	TRUST			

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

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

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

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

Form 990, Schedule R, Part II - 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	(g) Section 512(b)(13) controlled organization	
						Yes	No
HIGHLAND HOSPITAL OF ROCHESTER INC 1000 SOUTH AVENUE ROCHESTER, NY14620 16-0743037	HOSPITAL	NY	501(C)(3)	3	SPHS	Yes	
THE HIGHLAND FOUNDATION INC 1000 SOUTH AVENUE ROCHESTER, NY14620 23-7310662	FUNDRAISING	NY	501(C)(3)	7	HIGHLD HOSP	Yes	
HIGHLAND FACILITIES DEVELOPMENT CORP 1000 SOUTH AVENUE ROCHESTER, NY14620 22-3039077	MEDICAL BLDG	NY	501(C)(3)	9	HIGHLD HOSP	Yes	
HIGHLAND COMMUNITY DEVELOPMENT CORP 100 HAHNEMANN TRAIL PITTSFORD, NY14534 22-3154715	ELDER CARE	NY	501(C)(3)	9	SPHS	Yes	
THE HIGHLANDS LIVING CENTER INC 500 HAHNEMANN TRAIL PITTSFORD, NY14534 22-3240227	HEALTHCARE	NY	501(C)(3)	9	SPHS	Yes	
THE MEADOWS AT WESTFALL INC 5901 LAC DE VILLE BLVD ROCHESTER, NY14618 16-1502303	HEALTHCARE	NY	501(C)(3)	9	SPHS	Yes	
STRONG PARTNERS HEALTH SYSTEM INC 1000 SOUTH AVENUE ROCHESTER, NY14620 16-1499099	SUPPORT ORG	NY	501(C)(3)	11A,1	UNIV OF ROCH	Yes	
STRONG HOME CARE GROUP 2180 EMPIRE BOULEVARD WEBSTER, NY14580 22-2577664	FUNDRAISING	NY	501(C)(3)	7	UNIV OF ROCH	Yes	
VISITING NURSE SRVC OF ROCHESTER & MONRO 2180 EMPIRE BOULEVARD WEBSTER, NY14580 16-0743215	HEALTHCARE	NY	501(C)(3)	9	SHCG	Yes	
COMMUNITY CARE OF ROCHESTER 2180 EMPIRE BOULEVARD WEBSTER, NY14580 16-1561691	HEALTHCARE	NY	501(C)(3)	9	SHCG	Yes	
EXCELL PARTNERS INC 5450 CAMPUS DRIVE CANANDAIGUA, NY14424 20-1862628	ECONOMIC DEV	NY	501(C)(4)	N/A	UNIV OF ROCH	Yes	
ROCHESTER BIOVENTURE CENTER INC 601 ELMWOOD AVENUE ROCHESTER, NY14642 20-2485999	BIOTECH INCUB	NY	501(C)(3)	11A,1	UNIV OF ROCH	Yes	

Form 990, Schedule R, Part II - 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	(g) Section 512(b)(13) controlled organization	
						Yes	No
HIGH TECH ROCHESTER INC 150 LUCIUS GORDON DRIVE SUITE 100 WEST HENRIETTA, NY14586 16-1195028	BUSINESS INCU	NY	501(C)(3)	7	UNIV OF ROCH	Yes	
EASTMAN DENTAL CENTER FOUNDATION INC 625 ELMWOOD AVENUE ROCHESTER, NY14620 16-1529555	SUPPORT ORG	NY	501(C)(3)	11A, 1	NA		No
THE JAMES P WILMOT FOUNDATION INC 387 E MAIN STREET ROCHESTER, NY14604 22-2341413	SUPPORT ORG	NY	501(C)(3)	11D,III-OTH	NA		No
UR UA HELEN W RIVAS CO BANK OF AMERICA C/O BANK OF AMERICA TRUSTEE PO BOX PROVIDENCE, RI02901 16-6022853	SUPPORT ORG	NY	4947(A)(1)	PF	NA		No
CRITTENDEN BOULEVARD HOUSING CO INC 249 NORTON VILLAGE LANE ROCHESTER, NY14609 23-7035414	SUPPORT ORG	NY	501(C)(3)	11B, II	UNIV OF ROCH	Yes	
UNIVERSITY OF ROCHESTER EMPLOYEE BEN TRS 910 GENESEE STREET SUITE 200 ROCHESTER, NY14611 16-1600112	EMPL BEN TRST	NY	501(C)(9)	N/A	UNIV OF ROCH	Yes	
JAMES P O'CONNOR CHARITABLE TRUST B CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6304252	SUPPORT ORG	NY	501(C)(3)	PF	NA		No
JOHN O'CONNOR TRUST FBO UNIV OF ROCESTER CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6024304	SUPPORT ORG	NY	501(C)(3)	PF	NA		No
WILHELMINA C O'CONNOR TRUST CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6024303	SUPPORT ORG	NY	501(C)(3)	11D,III-OTH	NA		No
UR RIVAS CLINIC UA HELEN W RIVAS CO BANK OF AMERICA TRUSTEE PO BOX PROVIDENCE, RI02901 16-6022850	SUPPORT ORG	NY	501(C)(3)	11D,III-OTH	NA		No
WINFIELD SCOTT CHARITABLE TRUST CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6260266	SUPPORT ORG	NY	501(C)(3)	11D,111-OTH	NA		No
WINIFRED SPERRY TW EASTMAN CO KEY BANK TRUSTEE 4900 TIEDMAN BROOKLYN, OH44144 14-6080065	SUPPORT ORG	NY	4947(A)(1)	PF	NA		No

Form 990, Schedule R, Part II - 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	(g) Section 512(b)(13) controlled organization	
						Yes	No
ANNA J ALLEN TRUST CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6015938	SUPPORT ORG	WI	501(C)(3)	11D,111-OTH	NA		No
TW ETTA BASCOM FBO SMH CANCER UNIT CO JO MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6055197	SUPPORT ORG	NY	4947(A)(1)	11D,III-OTH	NA		No
VIOLA DEREU FB UR & CAMP GOOD DAYS CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6356625	SUPPORT ORG	NY	501(C)(3)	PF	NA		No
ROBERT P GIDDINGS TRUST CO TAYLOR GANSON PERRIN 160 FEDERAL ST20T BOSTON, MA02110 04-6660588	SUPPORT ORG	MA	501(C)(3)	11A,1	NA		No
TRUST UW CECIL M HAYES SCHOLARSHIP FUND CO ALLIANCE BANK 160 MAIN STREET ONEIDA, NY13421 16-6152521	SUPPORT ORG	NY	501(C)(3)	PF	NA		No
AUGUSTA LANEY HOENIG TRUST CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6096268	SUPPORT ORG	NY	501(C)(3)	11D,111-OTH	NA		No
FREDERICK F O'CONNOR TRUST CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6016373	SUPPORT ORG	NY	501(C)(3)	11D,III-OTH	NA		No
JP O'CONNOR MEMORIAL TRUST CO JP MORGAN CHASE TRUSTEE PO BOX MILWAUKEE, WI53201 16-6024306	SUPPORT ORG	NY	501(C)(3)	PF	NA		No
U OF R BROADCASTING CORPORATION 201 WILSON COMMONS ROCHESTER, NY14627 16-0743209	BROADCAST LIC	NY	501(C)(4)	N/A	UNIV OF ROCH	Yes	
UR REAL ESTATE CORPORATION 263 WALLIS HALL ROCHESTER, NY14627 27-1140014	SUPPORT ORG	NY	501(C)(3)	11D,III-OTH	UNIV OF ROCH	Yes	
FRAMEMED FOUNDATION INC 263 WALLIS HALL ROCHESTER, NY14627 16-1490497	SUPPORT ORG	NY	501(C)(3)	7	UNIV OF ROCH	Yes	
MELIORA REAL ESTATE CORPORATION 263 WALLIS HALL ROCHESTER, NY14627 45-2464788	SUPPORT ORG	NY	501(C)(3)	11A,1	UNIV OF ROCH	Yes	

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved ($)	(d) Method of determining amount involved
(1)	HIGHLAND HOSPITAL OF ROCHESTER INC	J	449,258	RENTAL COST
(2)	HIGHLAND HOSPITAL OF ROCHESTER INC	L	5,911,405	SERVICE COST
(3)	ROCHESTER BIOVENTURE CENTER INC	B	290,000	FMV GIFT
(4)	ROCHESTER BIOVENTURE CENTER INC	J	1,008,503	RENTAL COST
(5)	THE MEADOWS AT WESTFALL INC	B	1,352,000	FMV GIFT
(6)	THE HIGHLAND FOUNDATION INC	B	100,952	FMV GIFT
(7)	HIGHLAND HOSPITAL OF ROCHESTER INC	K	59,833,341	SERVICE COST
(8)	HIGHLAND HOSPITAL OF ROCHESTER INC	P	433,428	NET EXPENSES
(9)	EXCELL PARTNERS INC	K	289,920	SERVICE COST
(10)	VISITING NURSE SERVICE OF ROCHESTER & MC INC	K	770,879	SERVICE COST
(11)	VISITING NURSE SERVICE OF ROCHESTER & MC INC	P	114,473	NET EXPENSES
(12)	VISITING NURSE SERVICE OF ROCHESTER & MC INC	A	6,654	INTEREST COST
(13)	VISITING NURSE SERVICE OF ROCHESTER & MC INC	R	465,102	PRINCIPAL COST
(14)	ROCHESTER BIOVENTURE CENTER INC	P	56,293	NET EXPENSES
(15)	THE HIGHLANDS LIVING CENTER INC	K	134,127	SERVICE COST
(16)	THE MEADOWS AT WESTFALL INC	K	1,202,022	SERVICE COST
(17)	CRITTENDEN BOULEVARD HOUSING COMPANY INC	P	461,074	NET EXPENSES
(18)	CRITTENDEN BOULEVARD HOUSING COMPANY INC	J	83,782	RENTAL COST
(19)	UR REAL ESTATE CORPORATION	A	271,359	INTEREST COST

UNIVERSITY OF ROCHESTER AND RELATED ENTITIES

Consolidated Financial Statements

June 30, 2011 and 2010

UNIVERSITY OF ROCHESTER
AND RELATED ENTITIES

Consolidated Financial Statements

June 30, 2011 and 2010

Table of Contents

Report of Independent Auditors	1
Consolidated Financial Statements	2
Notes to Consolidated Financial Statements	6

pwc

Report of Independent Auditors

To the Board of Trustees
University of Rochester

In our opinion, the accompanying consolidated balance sheets and the related consolidated statements of activities and of cash flows present fairly, in all material respects, the financial position of the University of Rochester (the "University") at June 30, 2011 and 2010, and the changes in their net assets and their cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of the University's management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As discussed in Note 1(i) to the consolidated financial statements, the University changed the manner in which it classifies accumulated total investment returns within net assets as a result of the adoption of ASC 958, Not-for-Profit Entities (formerly FASB Staff Position No. 117-1).

PricewaterhouseCoopers LLP

October 20, 2011

PricewaterhouseCoopers LLP, 1100 Bausch & Lomb Place, Rochester, NY 14604
T: (585) 232-4000, F: (585) 454-6594, www.pwc.com/us

UNIVERSITY OF ROCHESTER
AND RELATED ENTITIES
Consolidated Balance Sheet
As of June 30
(dollars in thousands)

Assets	2011	2010
Cash and cash equivalents	$ 285,203	$ 236,244
Operating investments, at market	209,393	213,121
Collateral held for securities lending	69,282	79,283
Accounts receivable, net	292,506	307,833
Inventories, prepaid expenses, and deferred charges	48,957	49,999
Contributions receivable, net	51,556	46,666
Notes receivable, net	48,006	48,163
Other assets	15,536	12,748
Investments held for long-term purposes	1,783,019	1,564,018
Property, plant, and equipment, net	1,453,775	1,401,038
Interest in net assets of foundation	13,743	12,370
Investments in perpetual trusts held by others	49,780	43,119
Total assets	$ 4,320,756	$ 4,014,602
Liabilities and Net Assets		
Liabilities:		
Accounts payable and accrued expenses	$ 305,494	$ 295,987
Advanced receipt of sponsored research revenues	25,618	23,129
Deferred revenue	52,069	51,507
Third-party settlements payable, net	96,386	92,567
Securities lending liabilities	69,282	79,283
Accrued pension, post-retirement, and post-employment	308,073	283,562
Long-term debt	745,913	772,951
Asset retirement obligation	18,057	17,907
Refundable U.S. Government grants for student loans	16,004	15,942
Total liabilities	1,636,896	1,632,835
Net Assets:		
Unrestricted	1,818,709	1,877,267
Temporarily restricted	506,216	179,572
Permanently restricted	358,935	324,928
Total net assets	2,683,860	2,381,767
Total liabilities and net assets	$ 4,320,756	$ 4,014,602

See accompanying notes to consolidated financial statements.

UNIVERSITY OF ROCHESTER
AND RELATED ENTITIES
Consolidated Statement of Activities
Year Ended June 30, 2011
(dollars in thousands)

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Operating revenues				
Tuition and fees	$ 343,537	$ -	$ -	$ 343,537
Less scholarships and fellowships	(142,321)	-	-	(142,321)
Net tuition and fees	201,216	-	-	201,216
State and local appropriations	1,875	-	-	1,875
Grants and contracts	438,022	-	-	438,022
Gifts and pledges	19,618	17,781	24,455	61,854
Hospital and faculty practice patient care activities	1,783,587	-	-	1,783,587
Auxiliary enterprises	79,653	-	-	79,653
Interest income and appreciation of operating investments	13,538	-	-	13,538
Educational activities	29,894	-	-	29,894
Royalty income	42,318	-	-	42,318
Other sources	13,758	(28)	-	13,730
Long-term investment income and gains allocated to operations	87,717	-	-	87,717
Net assets released from restriction	47,659	(47,659)	-	-
Total operating revenues	2,758,855	(29,906)	24,455	2,753,404
Operating expenses				
Salaries and wages	1,306,985	-	-	1,306,985
Fringe benefits	367,618	-	-	367,618
Total compensation	1,674,603	-	-	1,674,603
Supplies	344,487	-	-	344,487
Business and professional	195,798	-	-	195,798
Utilities	53,918	-	-	53,918
Maintenance and facilities costs	112,914	-	-	112,914
Depreciation	158,441	-	-	158,441
Interest	29,344	-	-	29,344
Other	81,732	-	-	81,732
Total operating expenses	2,651,237	-	-	2,651,237
Change in net assets from operating activities	107,618	(29,906)	24,455	102,167
Non-operating activities				
Long-term investment activities				
Investment income	12,775	4,611	(126)	17,260
Net appreciation	140,635	115,119	7,273	263,027
Total long-term investment activities	153,410	119,730	7,147	280,287
Long-term investment income and gains allocated for operations	(87,717)	-	-	(87,717)
Other changes, net	7,909	(205)	3,157	10,861
Change in valuation of annuities	-	(2,753)	(752)	(3,505)
Change in net assets from non-operating activities	73,602	116,772	9,552	199,926
Change in net assets before cumulative effect of change in accounting principle	181,220	86,866	34,007	302,093
Cumulative effect of change in accounting principle	(239,778)	239,778	-	-
Change in net assets	(58,558)	326,644	34,007	302,093
Beginning net assets	1,877,267	179,572	324,928	2,381,767
Ending net assets	$ 1,818,709	$ 506,216	$ 358,935	$ 2,683,860

See accompanying notes to consolidated financial statements

UNIVERSITY OF ROCHESTER
AND RELATED ENTITIES
Consolidated Statement of Activities
Year Ended June 30, 2010
(dollars in thousands)

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Operating revenues:				
Tuition and fees	$ 321,252	$ -	$ -	$ 321,252
Less: scholarships and fellowships	(132,222)	-	-	(132,222)
Net tuition and fees	189,030	-	-	189,030
State and local appropriations	1,737	-	-	1,737
Grants and contracts	419,643	-	-	419,643
Gifts and pledges	17,917	15,076	14,969	47,962
Hospital and faculty practice patient care activities	1,708,304	-	-	1,708,304
Auxiliary enterprises	77,248	-	-	77,248
Interest income and appreciation of operating investments	13,361	-	-	13,361
Educational activities	29,571	-	-	29,571
Royalty income	38,978	-	-	38,978
Other sources	13,876	28	-	13,904
Long-term investment income and gains allocated to operations	86,349	-	-	86,349
Net assets released from restriction	40,158	(40,158)	-	-
Total operating revenues	2,636,172	(25,054)	14,969	2,626,087
Operating expenses:				
Salaries and wages	1,241,914	-	-	1,241,914
Fringe benefits	353,387	-	-	353,387
Total compensation	1,595,301	-	-	1,595,301
Supplies	336,317	-	-	336,317
Business and professional	193,573	-	-	193,573
Utilities	52,075	-	-	52,075
Maintenance and facilities costs	105,186	-	-	105,186
Depreciation	141,957	-	-	141,957
Interest	28,053	-	-	28,053
Other	65,661	-	-	65,661
Total operating expenses	2,518,123	-	-	2,518,123
Change in net assets from operating activities	118,049	(25,054)	14,969	107,964
Non-operating activities:				
Long-term investment activities:				
Investment income	12,471	83	(76)	12,478
Net appreciation	114,127	28,387	149	142,663
Total long-term investment activities	126,598	28,470	73	155,141
Long-term investment income and gains allocated for operations	(86,349)	-	-	(86,349)
Loss on extinguishment of debt	(2,014)	-	-	(2,014)
Other changes, net	(3,378)	122	1,709	(1,547)
Change in valuation of annuities	-	(2,632)	(34)	(2,666)
Change in net assets from non-operating activities	34,857	25,960	1,748	62,565
Change in net assets	152,906	906	16,717	170,529
Beginning net assets	1,724,361	178,666	308,211	2,211,238
Ending net assets	$ 1,877,267	$ 179,572	$ 324,928	$ 2,381,767

See accompanying notes to consolidated financial statements

UNIVERSITY OF ROCHESTER
AND RELATED ENTITIES
Consolidated Statement of Cash Flows
Years Ended June 30
(dollars in thousands)

Cash flows from operating activities:	**2011**	**2010**
Change in net assets	$ 302,093	$ 170,529
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation expense	158,441	141,957
Net appreciation on long-term investment activities	(263,027)	(142,663)
Gifts of property, plant, equipment and other	(1,308)	(989)
Bond discount amortization	(762)	(732)
Loss on the extinguishment of debt	-	2,014
Provision for bad debts	25,718	25,369
Contributed securities	(10,504)	(7,687)
Loss on disposals of property, plant, and equipment	2,389	3,411
(Increases) / decreases in		
Operating investments	(7,840)	(26,855)
Accounts receivable, net	(10,391)	(56,294)
Inventories, prepaid expenses, and deferred charges	259	(3,253)
Contributions receivable, net	(5,376)	8,507
Other assets	(2,788)	(1,267)
Increases / (decreases) in		
Accounts payable and accrued expenses	7,531	30,125
Advanced receipt of sponsored research revenues	2,489	(3,061)
Deferred revenues	562	201
Third-party settlements payable, net	3,819	30,386
Accrued pension, post-retirement, and post-employment	24,511	25,549
Contributions for long-term investments, net	(24,636)	(32,061)
Net cash provided by operating activities	201,180	163,186
Cash flows from investing activities:		
Purchases of property, plant, and equipment	(206,424)	(186,776)
Purchases of investments	(621,295)	(728,662)
Proceeds from the sale of investments	676,585	731,206
(Increase) in investments in perpetual trusts held by others	(95)	(87)
(Increase) / decrease in notes receivable, net	157	(28,597)
Net cash used in investing activities	(151,072)	(212,916)
Cash flows from financing activities:		
Net borrowings / (repayments) on lines-of-credit	772	(6,534)
Principal repayments of long-term debt	(26,618)	(58,621)
Proceeds from issuance of long-term debt	-	185,456
Deferred financing costs	(1)	(1,793)
Increase / (decrease) in refundable U S Government grants for student loans	62	(42)
Contributions for long-term investments, net	24,636	32,061
Net cash (used in) / provided by financing activities	(1,149)	150,527
Net increase in cash and cash equivalents	48,959	100,797
Cash and cash equivalents, beginning of year	236,244	135,447
Cash and cash equivalents, end of year	$ 285,203	$ 236,244
Supplemental disclosure of cash flow information:		
Cash paid during the year for interest on long-term debt	$ 28,740	$ 32,780
Non-cash investing and financing activities:		
Increase in construction related payables	$ 4,407	$ 4,245
Assets acquired under capital leases	$ 342	$ 3,677

See accompanying notes to consolidated financial statements

(1) Summary of Significant Accounting Policies

(a) General

The University of Rochester (the University) is a private nonprofit institution of higher education based in Rochester, New York. The University provides education and training services, primarily for students at the undergraduate, graduate, and postdoctoral levels. It also performs research, training, and other services under grants, contracts, and similar agreements with sponsoring organizations, primarily departments and agencies of the United States Government; and provides health care services through Strong Memorial Hospital (Hospital), Strong Home Care Group, and the various entities included in Strong Partners Health System, Inc. (SPHS).

(b) Basis of Presentation

The accompanying consolidated financial statements include all of the integrated divisions of the University – The Schools of Arts, Sciences and Engineering, including the Hajim School of Engineering and Applied Sciences, Margaret Warner Graduate School of Education and Human Development, William E. Simon Graduate School of Business Administration, Eastman School of Music, Memorial Art Gallery, School of Medicine and Dentistry, Strong Memorial Hospital, School of Nursing, Eastman Institute for Oral Health, Health Sciences, and the University of Rochester Medical Faculty Group (URMFG). Included also are Strong Partners Health System, Inc. (and its affiliates), Eastman Dental Center Foundation, Inc., Strong Home Care Group (and its subsidiaries), Crittenden Boulevard Housing Company, Inc., Excell Partners, Inc., Rochester BioVenture Center, Inc., High Tech Rochester, Inc., UR Investment, LLC, eXtensible Catalog Organization, LLC, University of Rochester Real Estate Corporation, UR Equity Holdings, Inc., and the Meliora Real Estate Corporation. All significant interorganizational balances and transactions have been eliminated.

The University is the sole member of SPHS, which is the sole member of Highland Hospital of Rochester (including its subsidiaries The Highland Foundation, Inc., Highland Facilities Development Corp., and the Medical Administrative Associates, Inc.); The Highlands Living Center, Inc.; Highland Community Development Corporation; and The Meadows at Westfall, Inc. Highland Hospital and its subsidiaries have debt outstanding which has been included in the University's consolidated financial statements; however, under the terms of the affiliation agreement with SPHS, the University has no legal obligation for the debt of Highland Hospital and affiliates.

The Eastman Dental Center Foundation, Inc. (the Foundation) was formed to hold and manage the investment assets of the former Eastman Dental Center, which was merged into the University during 1998. Income and assets of the Foundation are used to support oral health, education, and research projects at the University.

The University is the sole corporate member of Strong Home Care Group, which is the sole member of Visiting Nurse Service of Rochester and Monroe County, Inc. and Community Care of Rochester.

The University, through SPHS, Strong Memorial Hospital and URMFG, formed a Managed Care Organization (MCO) in October 1997 together with two community physician organizations: the Highland Physician Organization and the Rochester Community Physician Organization. The MCO has ceased operations related to member contracting activities and is in the process of finalizing its activities.

The University is the sole corporate member of Crittenden Boulevard Housing Company, Inc, which was formed to provide affordable housing facilities for graduate students and staff of the University.

The University is the sole corporate member of Excell Partners, Inc., which was formed to support early stage commercial development utilizing technologies created at the University of Rochester and other regional colleges and universities.

The University is the sole corporate member of Rochester BioVenture Center, Inc., which was formed to support the development of new businesses utilizing technologies created at the University and other regional colleges and universities, through the operation of incubator/research facilities in Monroe County, New York.

The University is the sole corporate member of High Tech Rochester, Inc. (HTR), which is a not-for-profit economic development organization that promotes the creation and growth of technology companies through support services and incubation facilities and provides consulting services for manufacturers.

The University is the sole member of University of Rochester Investment, LLC, which was formed for the purpose of holding certain University investments.

The University is the sole member of eXtensible Catalog Organization, LLC, which was formed to support the charitable and educational activities of the University through development of open-source library catalog software.

In December 2009, the University entered into a financing arrangement for the renovation of the Eastman Theatre enhanced by qualified investors in the New Markets Tax Credit (NMTC) program of the United States Treasury. The use of NMTCs is a program of the Community Development Financial Institutions Fund, a bureau of the United States Treasury. This transaction required the formation of a wholly-owned special purpose corporation known as the University of Rochester Real Estate Corporation.

In July 2010, UR Equity Holdings, Inc., a for-profit corporation, was formed for the purpose of holding the University's equity interests in startup companies.

In May 2011, the University became the sole corporate member of Meliora Real Estate Corporation, which was formed to support the charitable activities of the University of Rochester by providing financial and operational support to the University through the acquisition, holding and sale of real estate donated to the University and Affiliates.

(c) Basis of Accounting

The consolidated financial statements of the University are prepared on the accrual basis of accounting and in conformity with generally accepted accounting principles in the United States of America.

Classification of Net Assets

The University reports its net assets and changes therein according to three classifications: unrestricted, temporarily restricted, and permanently restricted, based upon the existence or absence of donor-imposed restrictions.

Permanently restricted – Net assets subject to donor–imposed stipulations that they be maintained permanently by the University. In accordance with the guidance provided in the New York Prudent Management of Institutional Funds Act (NYPMIFA), the University's Board of Trustees, with consideration of the actions, reports, information, advice and counsel provided by its duly constituted committees and appointed officers of the University, has instructed the University to adopt a methodology designed to avoid spending below the historical dollar value of donor-restricted (true) endowment funds, absent explicit donor direction to the contrary. As a result, the University classifies as permanently restricted net assets the original gift value of true endowments plus any subsequent gifts and accumulations made in accordance with the directions of the applicable gift instruments. The portion of true endowment funds that is not classified as permanently restricted net assets is classified as temporarily restricted net assets in accordance with accounting standards.

Temporarily restricted – Net assets subject to donor-imposed stipulations that may or will be met either by

actions of the University and/or the passage of time. Investment income and gains and losses on permanently restricted net assets are reported as temporarily restricted until appropriated for expenditure in accordance with donor-imposed stipulations. Under NYPMIFA, the appropriation and spending of such income is subject to a standard of prudence, as more fully discussed under the accounting policy note on investments, note 1(i). When a donor restriction expires, that is, when a stipulated time restriction ends or spending restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the consolidated statement of activities as net assets released from restriction.

Unrestricted – Net assets that are not subject to donor-imposed stipulations and that are generally available for support of the University's activities with certain limitations, as follows:

- Uses of certain unrestricted net assets are committed through contractual agreements. Such amounts primarily consist of required trusteed balances under long-term debt agreements and matching funds under student loan programs of the federal government. In addition, grants and contracts for the performances of certain services or functions are reported in the unrestricted net asset category.

- Many of the funds, which are unrestricted for accounting purposes, carry internal designations to specific divisions of the University, and therefore are not treated operationally as unrestricted funds.

- The Board of Trustees, through voluntary resolutions, has set aside portions of the University's unrestricted net assets to function as endowment, for property, plant and equipment purposes, and for other specific operating purposes.

Revenues from sources other than contributions are generally reported as increases in unrestricted net assets. Contributions are reported as increases in the appropriate category of net assets, except those contributions whose imposed restrictions are met in the same fiscal year they are received, are included in unrestricted revenues.

Expenses are reported as decreases in unrestricted net assets. Expiration of temporary restrictions recognized on net assets (i.e., the donor-stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as releases from temporarily restricted net assets to unrestricted net assets. Temporary restrictions on gifts to acquire long-lived assets are considered met in the period in which the assets are placed in service.

(d) Income Taxes

The University and the majority of its affiliates are not-for-profit organizations as described in section 501(c)(3) of the Internal Revenue Code and are generally exempt from income taxes on related income pursuant to Section 501(a) of the Code.

(e) Operations

The statements of activities present the changes in net assets of the University from operating activities and from non-operating activities. Operating revenues and expenses relate primarily to educational and training programs, research activities and hospital and patient care activities provided by the University and its related entities.

Utilization of investment income and gains on long-term investments held for endowment and similar purposes under the University's total return spending policy, as discussed in note 1(i), is considered operating revenue.

Non-operating activities consist primarily of investment income and appreciation from long-term investments in excess of amounts utilized for operations.

(f) Cash and Cash Equivalents and Operating Investments

Cash and cash equivalents include amounts on deposit with financial institutions; short-term investments with maturities of three months or less at the time of purchase and other highly liquid investments, primarily cash management funds, except that such instruments purchased with endowment and annuity and life income assets on deposit with trustees are classified as investments.

Operating investments include all other current investments with original maturities greater than three months and are used to support operations. These current investments include obligations of the U.S. Treasury, U.S. Government and other government agencies, and corporate and foreign bonds. Included also are internal operating funds invested in the University's long term investment pool however, they may be liquidated upon demand at any time.

(g) Inventories

Inventories, primarily medical supplies, are valued at the lower of cost, which is determined by the first-in, first-out method, or market.

(h) Contributions

Contributions, including unconditional promises, or pledges, are recognized as revenues in the period received. Conditional promises to give are not recognized until the conditions on which they depend are substantially met. Contributions of assets other than cash are recorded at their estimated fair value at the date of the gift. Contributions to be received after one year are discounted, at a range of 3.0% to 5.5%, to their present value. Amortization of the discount is recorded as additional contribution revenue and used in accordance with donor-imposed restrictions, if any, on the contributions. Allowance is made for uncollectible contributions based upon management's judgment and analysis of the creditworthiness of the donors, past collection experience and other relevant factors.

(i) Investments

The University's investments are comprised of the assets of the University's endowment and other investments held for general operating purposes. The University reports those investments at fair value as described further in note 12.

The Board of Trustees interprets NYPMIFA to allow for the spending of income and gains on investments of permanently restricted net assets in a manner that is prudent, considering such factors as the duration and preservation of the endowment fund, the purposes of the institution and the endowment fund, general economic conditions including the potential effect of inflation or deflation, the expected total return of the fund, other resources of the University, the needs of the University and the fund to make distributions and preserve capital, and the University's investment policy.

Investment of the University's net assets held for endowment and similar purposes is based upon a total return policy, and the utilization of its endowment resources for current operating and capital needs is related to this policy. Although NYPMIFA does not preclude the University from spending below the original gift value of permanently restricted funds, the University's policy is to spend no more than a stated percentage of fair value of its investment portfolio over time. Accordingly, during fiscal year 2011, the Board of Trustees authorized the use of total return (income and appreciation) from its endowment resources at an aggregate rate of 5.9% (5.8% during fiscal year 2010) of the average fair value of its consolidated investment portfolio for the most recent five years. To the extent that the total return requirement for the current year is not fulfilled by interest and dividends, the University utilizes the appreciation of its endowment and similar net assets for operating purposes. To the extent that the total return requirement for the current year is exceeded by interest and dividends, the University reinvests the

excess in its net assets held for endowment and similar purposes.

The University, in compliance with NYPMIFA, notified available donors who had established endowments prior to September 17, 2010 of the new law, and offered these donors the option of requiring the University to maintain historical dollar value for their endowment funds. A minority of donors requested this option; for those who did, the University has designed procedures to ensure that the University maintains historical dollar value.

Investment securities are exposed to various risks, such as interest rates, market, economic conditions, world affairs, and credit risks. Due to the level of risk associated with certain investment securities, it is possible that changes in value could occur in the near term and such changes could materially affect the amounts reported in the investments and investment activity of the University.

The University participates in securities lending activities. Investments that have been loaned to another institution are included in investments held for long-term purposes on the consolidated balance sheet. Cash received as collateral on the securities lending transactions is reported as collateral held for securities lending on the consolidated balance sheet. Since the collateral must be returned in the future, a corresponding liability is reported on the consolidated balance sheet.

(j) Property, Plant, and Equipment

Property, plant, and equipment are stated at cost or at estimated fair value if acquired by gift, less accumulated depreciation and amortization. Buildings used for research activities are componentized as site improvements, buildings, building services, and fixed equipment. Depreciation of the building components is recorded using the straight-line method over the useful lives of the components ranging from 4 to 40 years. Depreciation of non-research buildings, equipment and library books, and amortization of leasehold and land improvements are computed using the straight-line method over the estimated useful lives of the assets. Land and museum collections are not subject to depreciation. Estimated useful lives for non-research assets are as follows:

	Years
Building	40
Building and leasehold improvements	20
Land improvements	20
Equipment	4 to 15
Library books	10

The University reports gifts of property, plant, and equipment as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as temporarily restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the University reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

(k) Museum Collections

The University capitalizes museum collections. If purchased, collection items are capitalized at cost, and if donated, at their appraised or fair value on the accession date (the date on which the item is accepted by the Board of Trustees). There is no depreciation recorded on collection items.

(l) Split Interest Agreements and Perpetual Trusts

The University's split interest agreements with donors consist primarily of gift annuities, unitrusts, charitable remainder annuity trusts, and life income agreements. Assets held under these agreements are included in investments held for long-term purposes and investments in perpetual trusts held by others. For fiscal years 2011 and 2010, the fair values for split interest agreements are $81,119 and $69,947, respectively. Generally, contribution revenues are recognized at the dates the agreements are established

and liabilities are recorded for the present value of the estimated future payments to be made to the beneficiaries. The liabilities are adjusted during the term of the trusts for changes in the value of the assets, accretion of the discount and other changes in the estimates of future benefits. The University is also the beneficiary of certain perpetual trusts held and administered by others. The present values of the estimated future cash receipts, which are measured by the fair value of the assets contributed to the trust, are recognized as assets and contribution revenues at the dates the trusts are established. The carrying value of the assets is adjusted for changes in the fair value of the trust assets for both split interest agreements and perpetual trusts.

(m) Refundable U.S. Government Grants for Student Loans

Funds provided by the United States Government under the Federal Perkins, Nursing and Health Professions Student Loan programs are loaned to qualified students and may be re-loaned after cash collections. These funds are ultimately refundable to the government and are recognized as a liability in the accompanying consolidated balance sheet.

(n) Grants and Contracts

Revenue from grants and contracts, primarily for research and training programs, is generally recognized as earned, that is, as the related costs are incurred under the grant or contract agreements. Amounts received in advance are reported as advance receipt of sponsored research revenues.

Grants and contracts awarded to the University are subject to audit by the various sponsoring agencies. Indirect costs recovered on grants and contracts are recorded at rates established by the University with the federal government, or predetermined by the non-federal sponsor. Indirect cost rates for government grants and contracts are subject to audit, and subsequent final settlements are recorded as current period adjustments. Management believes the impact of any future settlements to be immaterial to the consolidated financial statements.

(o) Benefit Plans

The University provides certain health care and life insurance benefits to retired employees and spouses under a defined benefit plan. Benefits include basic medical and major medical coverage. Certain categories of retirees receive dental coverage and group life insurance. Such post-retirement benefits are accounted for as a form of deferred compensation over the estimated service lives of employees.

Post-employment benefits include benefits provided to former or inactive employees after employment but before retirement. For the University, such benefits include workers' compensation benefits, short-term disability benefits, and benefits provided under various other programs.

(p) Hospital and Faculty Practice Patient Care Activities

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows:

Medicare

Under the Medicare program, the Hospital receives reimbursement under a prospective payment system (PPS) for inpatient services. Under the hospital inpatient PPS, fixed payment amounts per inpatient discharge are established based on the patient's assigned diagnosis related group (DRG). When the estimated cost of treatment for certain patients is higher than the average, providers typically will receive additional "outlier" payments. The Hospital also receives reimbursement under a prospective payment system for certain medical outpatient services, based on service groups, called ambulatory payment classifications (APCs). Other outpatient services are based upon a fee schedule and/or actual costs. The Hospital's Medicare cost reports are

subject to audit by the fiscal intermediary. Such audits have been done through December 31, 2005.

Medicaid and Other Third-Party Payors

The New York Health Care Reform Act of 1996 (HCRA), as amended, governs payments to hospitals in New York State (NYS) through December 31, 2011.

Under HCRA, Medicaid, workers compensation, and no-fault payors pay rates are promulgated by the New York State Department of Health (DOH). Fixed payment amounts per inpatient discharge are established based on the patient's assigned case mix intensity similar to a Medicare DRG. All other third-party payors, principally Blue Cross, other private insurance companies, Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs) and other managed care plans, negotiate payment rates directly with the hospitals. Such arrangements vary from DRG-based payment systems, to per diems, case rates and percentage of billed charges. If such rates are not negotiated, then the payors are billed at the Hospital's established charges. Effective January 1, 2008, the DOH updated the data utilized to calculate the NYS DRG service intensity weights (SIWs) in order to utilize more current data in the DOH promulgated rates. Furthermore, effective December 1, 2009, NYS implemented inpatient reimbursement reform. The reform updated the data utilized to calculate payment rates utilizing All Payor Revised DRG's (APR-DRGs). APR-DRGs used revised SIWs to adjust each APR-DRG for patient activity. Similar type outpatient reforms were implemented effective December 1, 2008 by connecting outpatient payments to Ambulatory Payment Groups (APGs) which use outpatient SIWs based on types of service and resource consumption.

In addition, under HCRA, all non-Medicare payors are required to make surcharge payments for the subsidization of indigent care and other health care initiatives. The percentage amounts of the surcharge vary by payor and apply to a broader array of health care services. Also, certain payors are required to provide additional funds through surcharges on payments to hospitals for inpatient services or through voluntary election to pay a covered lives assessment directly to the DOH. Through December 31, 2008, these additional payments were used to fund a pool for graduate medical education (GME) expenses. Beginning January 1, 2009, the GME pool was consolidated into the indigent care pool.

Revenue from Blue Cross and Preferred Care accounted for approximately 27% and 7%, respectively, of the Hospital's net patient service revenue for the year ended June 30, 2011, and 26% and 10%, respectively, for the year ended June 30, 2010.

Revenue from Medicare and Medicaid programs accounted for approximately 32% and 17%, respectively, of the Hospital's net patient revenue for the fiscal year ended June 30, 2011, and 31% and 17%, respectively, for the year ended June 30, 2010. Laws and regulation governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by material amounts in the near term. The Hospital believes that it is in compliance, in all material respects, with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing. Compliance with such laws and regulations can be subject to future government review and interpretation. Non-compliance with such laws and regulations could result in repayments of amounts improperly reimbursed, substantial monetary fines, civil and criminal penalties and exclusion from the Medicare and Medicaid programs.

Both federal and New York State regulations provide for certain adjustments to current and prior years' payment rates and indigent care pool distributions based on industry-wide and hospital-specific data. The Hospital has established estimates based on information presently available of the amounts due to

or from Medicare, Medicaid, workers compensation, and no-fault payors and amounts due from the indigent care pool for such adjustments. Those adjustments, which can be reasonably estimated, have been provided for in the accompanying financial statements. The Hospital has estimated the potential impact of such adjustments based on the most recent information available. However, those which are either (a) without current specific regulations to implement such adjustments, or (b) are dependent upon certain future events, cannot be reasonably estimated and have not been provided for in the accompanying financial statements. Management believes the amounts recorded in the accompanying financial statements will not be materially affected upon the implementation of such adjustments. During fiscal years 2011 and 2010, the Hospital recognized approximately $17,300 and $(2,500) of net patient service revenue as a result of changes in estimates related to third party settlements. In addition, the Hospital recognized additional third party payables of approximately $16,000 and $14,600 related to fiscal years 2011 and 2010, respectively.

There are various other proposals at the federal and New York State levels relating to Medicare and Medicaid, that could, among other things, reduce reimbursement rates, modify reimbursement methods or increase managed care penetration. The ultimate outcome of these proposals and other market changes cannot presently be determined.

The University of Rochester Medical Faculty Group (URMFG) is an operating division of the University. In the year ending June 30, 2011, over 1,007 full-time faculty in 18 clinical departments and two clinical centers participated in patient care at the University of Rochester Medical Center. These full-time faculty physicians handled 881,233 outpatient visits in their offices, mostly on University-owned or leased premises; and covered 36,353 hospital admissions, as well as participated in the coverage of the emergency department handling over 98,758 visits. Payments for these services are derived primarily from third-party insurers including Managed Care companies (22.6%), Medicare (21.8%), Blue Shield (22.4%), Medicaid (10.6%), commercial (8.4%), other (5.1%), and self-pay (9.1%).

In addition to providing clinical outpatient care, the faculty group's mission is met by providing education and teaching. The faculty supervise and instruct 440 University medical students and 776 residents and fellows.

(q) Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues, and expenses during the reporting period. Management's assumptions are primarily related to the appropriate discount rate for the purposes of fair value calculations, allowances for doubtful accounts, self-insured risks, and third-party payor contractual adjustments and allowances. Actual results may differ from those estimates.

(r) Investment in Net Assets of Foundation

The University accounts for its interest in the net assets of the James P. Wilmot Foundation, Inc. (Foundation) in accordance with not-for-profit guidance. The guidance establishes standards for transactions in which a donor transfers assets to a not-for-profit organization or charitable trust, which then agrees to transfer those assets, the return on investment of those assets, or both to a beneficiary specified by the donor. Under the accounting guidance, the University is required to recognize the net assets and its share of the change in the net assets of the Foundation. The Foundation was established for the support of cancer research at the University's School of Medicine and Dentistry.

(s) Asset Retirement Obligations

The University accounts for asset retirement obligations in accordance with asset retirement and environmental obligations guidance. This guidance

primarily affects the way the University accounts for asbestos-related removal costs. The University accrues for asset retirement obligations in the period incurred if sufficient information is available to reasonably estimate the fair value of the obligation. Over time, the liability is accreted to its settlement value. Upon settlement of the liability, the University will recognize a gain or loss for any difference between the settlement amount and liability recorded.

(t) Derivative Instruments and Hedging Activities

Derivative instruments related to the University's long-term debt are included in accounts payable and accrued expenses or in accounts receivable, net on the consolidated balance sheet. The change in the fair value of the derivative instruments is included in the net depreciation/appreciation in the statements of activities. The University selected the combination of variable rate bond issues and interest rate swap agreements to obtain fixed rate financing at the lowest available cost at the time of the transactions. The University is exposed to credit loss in the event of nonperformance by the counterparty to its long-term rate swaps. The interest rate swaps do not qualify for cash flow hedge accounting.

(u) Reclassification

Certain amounts in previously issued financial statements have been reclassified to conform to the current year presentation.

(2) Net Assets

Unrestricted net assets consist of the following at June 30:

	2011	2010
Designated		
University divisions	$ 1,035,335	$ 1,153,801
Highland Hospital and affiliates	112,615	101,124
Eastman Dental Center Foundation	21,226	18,685
Other related entities	(20,146)	(23,032)
Total designated	1,149,030	1,250,578
Net investment in property, plant, and equipment	618,085	556,631
Undesignated	51,594	70,058
Total unrestricted net assets	$ 1,818,709	$ 1,877,267

Temporarily restricted net assets consist of the following at June 30:

	2011	2010
Accumulated appreciation on permanently restricted net assets subject to board appropriation and/or purpose restrictions	$ 410,780	$ 94,100
Interest in net assets of foundation	13,743	12,370
Related entities	897	1,235
Other gifts and income subject to		
Purpose restrictions	14,872	12,643
Time restrictions		
Contributions receivable	35,642	33,681
Split-interest agreements	30,282	25,543
Total temporarily restricted net assets	$ 506,216	$ 179,572

Permanently restricted net assets consist of the following at June 30:

	2011	2010
Perpetual endowment funds	$ 286,849	$ 263,528
Interests in perpetual trusts held by others	49,780	43,119
Split-interest agreements	2,758	2,371
Perpetual loan funds	3,634	2,925
Contributions receivable	15,914	12,985
Total permanently restricted net assets	$ 358,935	$ 324,928

Endowment net assets consist of the following at June 30, 2011:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Donor - restricted funds				
True endowments	$ -	$ 409,603	$ 286,849	$ 696,452
Term endowments	-	1,177	-	1,177
	-	410,780	286,849	697,629
Funds functioning as endowment (quasi)	861,660	-	-	861,660
Total endowment funds	$ 861,660	$ 410,780	$ 286,849	$ 1,559,289

Rollforward of endowment net assets from July 1, 2010 to June 30, 2011:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Endowment net assets, July 1, 2010	$ 988,403	$ 94,100	$ 263,528	$ 1,346,031
NYPMIFA adjustment	(239,778)	239,778	-	-
Investment return				
Investment income, net of fees	9,643	7,718	-	17,361
Net appreciation	136,375	104,636	-	241,011
Total investment return	146,018	112,354	-	258,372
New gifts	1,512	487	19,201	21,200
Amounts appropriated for expenditure	(48,502)	(34,946)	-	(83,448)
Other changes and reclassifications	14,007	(993)	4,120	17,134
Endowment net assets, June 30, 2011	$ 861,660	$ 410,780	$ 286,849	$ 1,559,289

Endowment net assets consist of the following at June 30, 2010:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Donor - restricted funds				
True endowments	$ 201.523	$ 93.045	$ 263.528	$ 558.096
Term endowments	-	1.055	-	1.055
	201.523	94.100	263.528	559.151
Funds functioning as endowment (quasi)	786.880	-	-	786.880
Total endowment funds	$ 988.403	$ 94.100	$ 263.528	$ 1.346.031

Rollforward of endowment net assets from July 1, 2009 to June 30, 2010:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Endowment net assets, July 1, 2009	$ 929.034	$ 86.337	$ 248.614	$ 1.263.985
Investment return				
Investment income, net of fees	9.727	1.436	-	11.163
Net appreciation	119.053	21.875	-	140.928
Total investment return	128.780	23.311	-	152.091
New gifts	1.097	234	14.629	15.960
Amounts appropriated for expenditure	(72.446)	(10.595)	-	(83.041)
Other changes and reclassifications	1.938	(5.187)	285	(2.964)
Endowment net assets, June 30, 2010	$ 988.403	$ 94.100	$ 263.528	$ 1.346.031

(3) Accounts Receivable

Accounts receivable at June 30 consist of the following

	2011	2010
Patient care and related activities, net of allowances for doubtful accounts of $31,897 and $34,862	$ 150,648	$ 169,561
Federal, state and local governments, foundations and companies, net of allowances for doubtful accounts of $598 and $836	42,835	42,834
Medical resident FICA refund claim (including interest), net of allowance of $16,818 and $16,818	31,520	31,520
Student receivables, net of allowances for doubtful accounts of $1,811 and $2,067	6,100	7,512
Royalties and other	61,403	56,406
Total accounts receivable	$ 292,506	$ 307,833

(4) Contributions

Contributions receivable, net, are summarized as follows at June 30:

	2011	2010
Unconditional promises expected to be collected in		
Less than one year	$ 3,181	$ 4,629
One year to five years	43,802	42,731
More than five years	25,991	10,757
Subtotal	72,974	58,117
Less unamortized discount and allowance for uncollectible amounts	(21,418)	(11,451)
Total contributions receivable, net	$ 51,556	$ 46,666

At June 30, 2011, the University had also received $39,976 in bequest intentions and certain other conditional promises to give. These intentions and conditional promises to give are not recognized as assets. If they are received, they will generally be restricted for specific purposes stipulated by the donor, primarily endowments for faculty support, scholarships or general operating support of a particular department or division of the University.

The University expended $34,897 and $31,046, for University relations and development for the years ended June 30, 2011 and 2010, respectively.

(5) Notes Receivable

Notes receivable, net, are summarized as follows at June 30:

	2011		
	Gross Receivable	Allowance	Net Receivable
Federal student loans	$ 17,002	$ 904	$ 16,098
Institutional student loans	4,032	606	3,426
Other note receivable	28,482	-	28,482
Total	$ 49,516	$ 1,510	$ 48,006

	2010		
	Gross Receivable	Allowance	Net Receivable
Federal student loans	$ 17,340	$ 904	$ 16,436
Institutional student loans	3,818	606	3,212
Other note receivable	28,515	-	28,515
Total	$ 49,673	$ 1,510	$ 48,163

Student loan programs are funded by donor contributions, other institutional sources and governmental programs, primarily the Federal Perkins Loan Program. The amounts received from the federal government's portion of the Perkins program are ultimately refundable to the federal government and are reported as a liability on the University's consolidated balance sheet as Refundable U.S. Government grants for student loans.

Credit worthiness is not a factor when granting a student a loan from institutional or federal resources; it is based on financial need. However, once the loan is in repayment status, the University monitors the aging of the student loans receivable.

Student loans are often subject to unique restrictions and conditions and, therefore, it is not practical to determine fair values. The allowance is intended to provide for loans, both in repayment status and not yet in repayment status (borrowers are still in school or in the grace period following graduation), that may not be collected.

The other note receivable represents a $28,482 note receivable of the University of Rochester Real Estate Corporation (wholly-owned by the University) for a loan to the Chase NMTC Eastman Theatre Investment Fund LLC (a non-consolidated entity) which matures in December, 2049. The University receives interest only, at 1% during the first ninety months of the term. For the remainder of the term, the note shall bear interest at 1.7%, compounding annually, with a minimum of 1.0% principal payable

annually, with all principal and any unpaid interest due on the maturity date. Refer to Note 8 (p) for further information.

(6) Investments Held for Long-Term Purposes

Investments were held for the following long-term purposes at June 30:

	2011	2010
Endowment and similar purposes	$ 1,640,407	$ 1,415,977
Property, plant and equipment purposes		
Debt service reserve held by trustees under debt agreements	13,907	15,190
Other	48,730	74,372
Total property, plant and equipment purposes	62,637	89,562
Other purposes	79,975	58,479
Total investments held for long-term purposes	$ 1,783,019	$ 1,564,018

For investment purposes, substantially all investments held for endowment and similar purposes participate in one of several pools, each with its own investment policy and objectives. The investment pool assets are owned by the separate endowment and similar funds within each pool based on the percent ownership of each fund to the pool. Income, realized and unrealized gains and losses are distributed based on the percent ownership of the pooled assets measured at fair value.

The following table summarizes changes in relationships between cost and fair values of investments held for endowment and similar purposes:

	2011		
	Fair Value	Cost	Net Gains/ (Losses)
End of year	$ 1,640,407	$ 1,480,017	$ 160,390
Beginning of year	$ 1,415,977	$ 1,428,432	$ (12,455)
Unrealized appreciation, net			172,845
Realized net gains for year			80,060
Net increase for year			$ 252,905

	2010		
	Fair Value	Cost	Net Gains/ (Losses)
End of year	$ 1,415,977	$ 1,428,432	$ (12,455)
Beginning of year	$ 1,320,628	$ 1,401,040	$ (80,412)
Unrealized appreciation, net			67,957
Realized net gains for year			78,733
Net increase for year			$ 146,690

The University permits several of its investment managers to utilize forward contracts, currency options and futures with the specific authorization of the investment committee of the Board of Trustees. However, the University was not directly engaged in any of the above mentioned derivative transactions as of June 30, 2011 and 2010.

Management does not anticipate that losses, if any, resulting from its market or credit risks would materially affect the consolidated financial position of the University.

The University lends securities to qualified financial institutions through a program administered by a securities lending agent. All loans are callable at any time and are fully collateralized. Income is earned based on the collateral held and invested during the

period of lending. The collateral minimum requirement is 100% for securities on loan.

Investment fees were $32,427 and $30,655 for the years ended June 30, 2011 and 2010, respectively.

(7) Property, Plant, and Equipment

As of June 30, 2011 and 2010, the University's investment in property, plant and equipment is as follows:

	2011	2010
Buildings and improvements	$ 1,934,740	$ 1,813,667
Land improvements	42,805	42,054
Completed projects under leasehold agreements	9,086	8,738
Equipment owned	806,659	773,609
Library books	142,372	134,181
Subtotal	2,935,662	2,772,249
Less accumulated depreciation	1,676,285	1,549,084
Subtotal	1,259,377	1,223,165
Land	7,860	7,860
Museum collections	30,431	30,160
Construction in progress	156,107	139,853
Total property, plant and equipment, net	$ 1,453,775	$ 1,401,038

(8) Long-term Debt

The following is a summary of the University's long-term indebtedness at June 30:

	2011	2010
Obligations under capital lease agreements, 3 414% to 7 85% (a)	$ 15,889	$ 20,509
Urban Development Corporation loan (b)	1,667	1,833
Direct Note Obligation, Series 2003, 5 40% to 5 75% (net of unamortized discount of $21 in 2011 and $23 in 2010) (c)	8,579	8,577
Bond Payable – COMIDA, 10 00% (d)	598	627
Bond payable – DHCR Series 1973A, 6 26% (e)	1,325	-
Bond payable – DHCR Series 1979A, 8 40% (f)	300	-
Bond payable – DASNY Series 1994B, 5 50% (g)	9,170	9,610
Bond payable – DASNY Series 2001A, 2 90% to 5 00% (net of unamortized discount of $67 in 2011 and $75 in 2010) (h)	13,952	15,365
Bond payable – DASNY Series 2003A, B, and C, 3 97% (i)	114,904	123,050
Bond payable – DASNY Series 2004A, 3 00 to 5 25% (net of unamortized premium of $353 in 2011 and $368 in 2010) (j)	26,283	26,968
Bond payable – COMIDA, 3 125% to 5 450% (net of unamortized premium of $661 in 2011 and $761 in 2010) (k)	30,511	33,601
Bond payable – DASNY Series 2006 A-1 and B-1, 3 919% (l)	111,180	111,180
Bond payable – DASNY Series 2007A-1, A-2, B, and C, 4 00% to 5 00% (net of unamortized premium of $7,121 in 2011 and $7,371 in 2010) (m)	240,315	241,215
Bond payable – DASNY Series 2009A, B, C, D, and E, 2 50% to 5 00% (net of unamortized premium of $2,678 in 2011 and $3,087 in 2010) (n)	106,523	115,702
Bond payable – DASNY Series 2010, 2 00% to 5 20% (net of unamortized discount of $65 in 2011 and $68 in 2010) (o)	10,935	10,932
Notes payable, 0 74% to 2 73% (p)	53,782	53,782
Total long-term debt	$ 745,913	$ 772,951

The following is a description of the University's long-term debt:

(a) Obligations Under Capital Lease Agreements

The University entered into a tax-exempt capital lease program in November 2006 for $10,832. The lease is being repaid with quarterly payments of $573, including interest at 3.879% to 3.881% through November 2012. The leased equipment includes a network infrastructure upgrade and the purchase of an MRI.

In addition to the arrangement discussed above, the University and its related entities have entered into several other capital leases for equipment.

(b) Urban Development Corporation Loan

In March 1992, the New York State Urban Development Corporation (UDC) entered into an agreement with the University to partially fund the construction of the University's Center for Optoelectronics and Imaging (COI) with a loan of $5,000. The agreement requires the University to pay an amount equal to the debt service on the $6,320 tax-exempt bond issued by which UDC financed the loan and the associated reserve funds and costs of issuance. The loan is collateralized by a mortgage on the property.

Pursuant to an agreement authorized by statute, the State of New York leases the COI from the University for the 30 year term of the loan, paying, as rent, an amount sufficient to cover the University's obligations to UDC. These rents have been assigned to UDC as further collateral for the loan. The University retains possession of the property under a sub-lease from the State at an annual rent equivalent to one-thirtieth of the sum of the loan principal and the cost of issuance of the UDC bonds.

(c) Direct Note Obligation–The Bank of New York

Pursuant to an agreement between the University and the Bank of New York dated November 25, 2003, the Bank of New York issued $8,600 of notes known as the University of Rochester Direct Note Obligations, Series 2003. The Series 2003 notes were issued to refinance drawings under the University's revolving line of credit with JPMorgan Chase Bank. The line of credit had been used to refinance indebtedness and certain other mortgages related to Eastman Place. Eastman Place is a facility used partly to house activities of the Eastman School of Music.

The Series 2003 notes are general, unsecured obligations of the University.

(d) Bond Payable – COMIDA

Pursuant to an agreement between the University and the County of Monroe Industrial Development Agency (COMIDA) dated January 6, 2004, COMIDA issued a replacement bond in the amount of $698. The 2004 COMIDA Replacement bond is for the purchase of property at 10 Gibbs Street, Rochester, New York which has become part of the Eastman School of Music campus.

(e) Bonds Payable – DHCR Series 1973A

Pursuant to an agreement with a University related entity (Crittenden Boulevard Housing Company, Inc.) and the New York State Division of Housing and Community Renewal (DHCR) dated September 1973, DHCR issued and sold $7,065 of Series A bonds. The related entity is repaying the indebtedness at an average rate of 6.26%, maturing November 2013.

(f) Bonds Payable – DHCR Series 1979A

Pursuant to an agreement with a University related entity (Crittenden Boulevard Housing Company, Inc.) and the New York State Division of Housing and Community Renewal (DHCR) dated April 1979, DHCR issued and sold $7,670 of Series 1979A bonds. The related entity is repaying the indebtedness at an average rate of 8.4%, maturing November 2018.

(g) Bonds Payable – DASNY Series 1994B

Pursuant to an agreement with a University related entity (Highland Hospital and affiliates) and DASNY, $13,000 of Series 1994B Revenue Bonds were issued and sold by DASNY. The related entity is repaying the indebtedness at a fixed rate of 5.50%, maturing July 1, 2023.

During fiscal year 2009, the Series 1994B bonds were remarketed and converted from a fixed interest rate to a variable interest rate determined by the bond agent. The terms related to principal repayment did not change. A loss on debt extinguishment due to bond restructuring of $717 was recognized.

The bond issue is collateralized by an interest in certain buildings and equipment and an irrevocable direct pay letter of credit held by HSBC Bank which expires July 2012.

(h) Bonds Payable – DASNY Series 2001A

Pursuant to an agreement between the University and DASNY dated July 10, 2001, DASNY issued and sold $22,920 of bonds known as the University of Rochester Revenue Bonds, Series 2001A. The Series 2001A bonds were issued at a discount of $152 resulting in net proceeds of $22,768 to refinance (1) all the outstanding $184 University's

Dormitory (Apartment) bonds of 1962, HUD Series D and all the outstanding $840 University's Dormitory (Apartment) bonds of 1966, HUD Series E and (2) a portion of the University of Rochester Revenue Bond, Series 1994A, maturing on and after July 1, 2007. HUD Series D and E were paid on October 1, 2001. DASNY Series 1994A bondholders were paid on July 1, 2004.

The Loan Agreement and the obligation of the University to make payments under the Loan Agreement are general obligations of the University. No collateralized interest in any revenues or assets of the University has been granted by the University to the Authority under the Loan Agreement.

(i) Bonds Payable – DASNY Series 2003A, B, and C

Pursuant to an agreement with the University and DASNY dated October 29, 2003, DASNY issued and sold $164,425 of Series 2003 bonds, consisting of $32,550 Series 2003A bonds, $49,650 Series 2003B bonds and $82,225 Series 2003C bonds.

Series 2003A bonds were issued to finance (1) an expansion of the Laboratory for Laser Energetics building to accommodate the construction of a federally funded laser expansion; (2) renovation of space to house a functional MRI; (3) deferred maintenance remediation in various buildings and (4) renovation and information technology upgrades in various faculty offices, laboratory space and student residential buildings. A portion of the proceeds from Series 2003A also refinanced the remaining portion of the University of Rochester Revenue Bonds, Series 1987.

Series 2003B bonds were issued to finance (1) equipment acquisitions for the Hospital; (2) the expansion of an existing garage and (3) laboratory relocations at the Hospital. Series 2003B bonds also refinanced University of Rochester Series 1993A bonds and a portion of the University of Rochester Series 1994 bonds.

Series 2003C bonds were issued to finance (1) construction of an Adult Intensive Care Unit; (2) renovations of the Cancer Center and (3) deferred maintenance, renovations and improvements to faculty offices, laboratory and clinical spaces for various departments and areas within the Hospital and School of Medicine and Dentistry. Series 2003C also refinanced a portion of the University of Rochester Series 1994 bonds.

On July 31, 2003, the University executed interest rate swaps with third parties. The University entered into interest rate swap agreements to exchange variable rate debt for a fixed rate obligation without the exchange of the underlying principal amount. Generally under this agreement, the counterparty pays the University a variable interest rate equal to 61.5% of one-month LIBOR plus 56 basis points. The University will pay the counterparty a fixed interest rate of 3.97%. These rates are subject to change based upon certain conditions as stated in the swap agreement. The contractual relationship under this agreement will last until July 1, 2033.

During fiscal year 2009, the Series 2003A, B and C bonds were restructured and converted from an auction rate to a variable rate as determined by the remarketing agent. The terms related to principal repayment did not change. The bonds have a corresponding letter-of-credit available at varying financial institutions, individually in amounts totaling the outstanding debt service of each bond.

The Loan Agreement and the obligation of the University to make payments under the Loan Agreement are general obligations of the University.

The University has a letter of credit in place for DASNY Series 2003A and 2003C in the amount of $103,502 with JP Morgan Chase Bank, N.A which expires in March 2013. Of this total, no amounts were outstanding at June 30, 2011 and 2010.

The University has a letter of credit in place for DASNY Series 2003B in the amount of $34,745 with HSBC Bank, N.A which expires in September 2013. Of this total, no amounts were outstanding at June 30, 2011 and 2010.

(j) Bonds Payable – Series 2004A

Pursuant to an agreement between the University and DASNY dated August 26, 2004, DASNY issued $45,000 of bonds known as the University of Rochester Revenue Bonds, Series 2004A. The Series 2004A bonds were issued at a premium of $603, resulting in proceeds of $45,603 to finance the construction of a co-generation facility to provide supplementary heat and/or electricity to the University and will also provide an addition to the University's Central Utility plant.

A portion of the Series 2004A bonds were refinanced as a result of the issuance of Series 2007C during fiscal year 2007.

The Loan Agreement and the obligation of the University to make payments under the Loan Agreement are general obligations of the University.

(k) Bonds Payable – COMIDA

Pursuant to an agreement with a University related entity (Highland Hospital and affiliates) and the County of Monroe Industrial Agency (COMIDA) dated June 23, 2005, COMIDA issued and sold $20,000 of fixed rate Civic Facility Revenue Refunding Bonds and $14,920 of fixed rate Civic Facility Revenue Project Bonds. The COMIDA Refunding Bonds were issued at a premium of $912 and were used to refund a portion of Series 1997A debt. These Refunding Bonds are collateralized by amounts in a Debt Service Reserve Fund. The COMIDA Project Bonds were issued at a premium of $362 and were issued to finance (1) the Park Ridge Oncology Project, (2) the Bariatric Surgery Project, (3) the Orthopedic Operating Room Project and (4) various renovation projects throughout Highland Hospital. These Project Bonds are collateralized by the construction projects noted above. In addition, Highland Hospital issued $6,135 of direct taxable notes on June 23, 2005 to refund the remaining portion of Series 1997A and all of Series 1997B debt. These notes were issued at a discount of $5 and are collateralized by amounts in a Debt Service Reserve Fund.

(l) Bonds Payable – DASNY Series 2006A-1 and B-1

Pursuant to an agreement between the University and DASNY dated March 16, 2006, DASNY issued and sold $111,180 of bonds known as the University of Rochester Revenue Bonds, Series 2006, consisting of $94,130 Series 2006A-1 bonds and $17,050 Series 2006B-1 bonds. The Series 2006A-1 bonds were issued to refinance the University of Rochester Series 1999A bonds and portions of the University of Rochester Series 1997A bonds, the University of Rochester Series 1998A bonds and the University of Rochester Series 2000A bonds. The Series 2006B-1 bonds were issued to refinance portions of the University of Rochester Series 1999B bonds.

On March 16, 2006, the University executed interest rate swaps with a third party. The University entered into an interest rate swap agreement to exchange variable rate debt for the fixed rate obligation without the exchange of the underlying principal amount. Generally under this agreement, the counterparty will pay the University a variable interest rate based on the Bond Market Association (BMA) Municipal Swap Index. The University will pay the counterparty a fixed interest rate of 3.919%. These rates are subject to change based upon certain conditions as stated in the swap agreement. The contractual relationship under this agreement will last until July 1, 2027.

During fiscal year 2009, the Series 2006A-1 and B-1 bonds were restructured and converted from an auction rate to a variable rate as determined by the remarketing agent. The terms related to principal repayment did not change. The bonds have a corresponding letter-of-credit available at varying financial institutions, individually in amounts totaling the outstanding debt service of each bond.

The Loan Agreement and the obligation of the University to make payments under the Loan Agreement are general obligations of the University.

The University has a letter of credit in place in the amount of $112,642 with Bank of America, N.A,

which expires in September 2014. The letter of credit has a renewal option that can be exercised every three years. Of this total, no amounts were outstanding as of June 30, 2011 and 2010.

(m) Bonds Payable – DASNY Series 2007A-1, A-2, B and C

Pursuant to an agreement between the University and DASNY dated February 21, 2007, DASNY issued and sold $235,869 of bonds known as the University of Rochester Revenue Bonds, Series 2007, consisting of $111,210 Series 2007A-1 bonds, $20,534 Series 2007A-2 bonds, $40,290 Series 2007B bonds and $63,835 Series 2007C bonds. The Series 2007 bonds were issued at a net premium of $8,207 resulting in proceeds of $244,076.

Series 2007A-1 bonds were issued to finance (1) the construction of the University's portion of the Cancer Center; (2) the acquisition and renovation of a new University Data Center; (3) an upgrade to the central utilities chilled water capacity and the expansion of its infrastructure; (4) the construction of a new animal facility and the renovation of existing laboratory space at the Cardiovascular Research Building; (5) the construction or renovation of a University Health Service building; and (6) various deferred maintenance projects and renovations of laboratories, office space and student residential buildings.

Series 2007A-2 bonds were issued to finance (1) the renovation of the University Advancement and Alumni Center; and (2) the construction of a biomedical engineering and optics building.

Series 2007B bonds were issued to finance (1) the construction of Hospital's portion of the Cancer Center; (2) the renovation of the Hospital's surgical adult intensive care and intermediate care units; (3) the renovation of the Hospital's medical behavioral inpatient unit; and (4) the purchase of equipment for the Hospital.

Series 2007C bonds were issued to refinance (1) a portion of the University of Rochester Series 1998A bonds; and (2) a portion of the University of Rochester Series 2004A bonds.

The Loan Agreement and the obligation of the University to make payments under the Loan Agreement are general obligations of the University.

(n) Bonds Payable – DASNY Series 2009A, B, C, D and E

Pursuant to an agreement between the University and DASNY dated July 22, 2009, DASNY issued and sold $117,279 of bonds known as the University of Rochester Revenue Bonds, Series 2009, consisting of $54,469 Series 2009A bonds, $34,460 Series 2009B bonds, $11,135 Series 2009C bonds, $3,625 Series 2009D bonds and $13,590 Series 2009E bonds. The Series 2009 bonds were issued at a net premium of $3,463 resulting in proceeds of $120,742.

Series 2009A bonds were issued to finance (1) fire alarm replacements, sprinkler installations, and renovations in undergraduate halls; (2) renovations to laboratories and offices throughout the River Campus and Medical Center ; (3) renovation of Wilson Commons dining hall; (4) central utilities infrastructure improvements for the River Campus and Medical Center; (5) various deferred maintenance and renovation projects at the Eastman Campus and Medical Center; (6) a portion of the construction of the Clinical and Translational Science Building.

Series 2009B bonds were issued to refinance the remaining outstanding bonds for Series 1997A, Series 1998A, and Series 2000A.

Series 2009C bonds were issued to finance the relocation of certain electrical switchgear within the Medical Center.

Series 2009D bonds were issued to refinance the outstanding bonds for Series 1999B.

Series 2009E bonds were issued to finance a portion of the construction of the Clinical and Translational Science Building.

The Loan Agreement and the obligation of the University to make payments under the Loan Agreement are general obligations of the University.

(o) Bonds Payable - DASNY Series 2010

Pursuant to an agreement with a University related entity (Highland Hospital and affiliates) and DASNY dated June 25, 2010, DASNY issued and sold $11,000 of bonds known as Highland Hospital Revenue Bonds, Series 2010. The Series 2010 bonds were issued at a net discount of $68 resulting in proceeds of $10,932.

Series 2010 bonds were issued to finance the following: (1) the creation of a twenty-two bed Neuromedicine Inpatient Unit; and (2) the enhancement and expansion of the space, equipment, and technology used for Perioperative Services.

(p) Notes Payable – Eastman Theatre Renovation

In December 2009, the University entered into a financing arrangement for the renovation of the Eastman Theatre enhanced by qualified investors in the New Markets Tax Credit program. This transaction resulted in $53,782 in new external consolidated debt and $28,482 in new external notes receivable to the University.

Several loans were created through the NMTC financing structure. The first is an ordinary bank loan from JPMorgan Chase for $15,482 at a cost of LIBOR plus 2.5% for a seven-year term. After seven years, this loan is expected to be refinanced by tax-exempt bonds and amortized in equal payments over thirty years. The remaining loans are specialized NMTC notes payable totaling $38,300 at a cost of 0.74% for forty years, maturing on December 18, 2049. The University is required to pay interest only on these promissory notes for the first seven years. The lenders of the notes payable are a group of Community Development Entities that will receive significant tax credits as a result of this loan.

The University loaned $28,482 to an investment fund as a part of the setup of the community development entities. The external note receivable matures on December 18, 2049. Refer to Note 5 for further information on the external notes receivable.

(q) Required Principal Payments

Required composite principal payments for long-term debt, net of unamortized discount or premium, for each of the years in the five-year period ending June 30, 2016 and thereafter are as follows:

Maturity	Principal Portions of Lease Payments	Principal Payments of Debt	Total Principal Payments
2012	$ 4,020	$ 25,780	$ 29,800
2013	1,999	26,075	28,074
2014	783	27,855	28,638
2015	799	36,269	37,068
2016	734	33,991	34,725
Thereafter	7,554	580,054	587,608
Total	$ 15,889	$ 730,024	$ 745,913

The University incurred $29,344 and $28,053 of interest expense for the years ended June 30, 2011 and 2010, respectively, net of interest capitalization of $2,766 and $3,870 for the years ended June 30, 2011 and 2010, respectively.

The University has letter of credit agreements with various financial institutions to purchase the University's variable rate demand bonds in the event they cannot be remarketed. In the event that the bonds covered by these agreements are not remarketable and the agreements are not otherwise renewed, the principal amounts (including variable rate demand bonds not subject to a liquidity facility) would be $29,800, $111,753, $149,478, $11,363, $11,025, and $432,494 for the five year period ending June 30, 2016 and thereafter.

(r) Fair Value of Long-Term Debt

The fair value of the University's long-term debt is estimated based upon the amount of future cash flows, discounted using the University's current borrowing rate for similar debt instruments of comparable maturities. The fair value of total long term debt, excluding capital leases, was $708,943 and $743,377 at June 30, 2011 and 2010, respectively.

(9) Benefits Plans

Self-insurance Plans – University

The University is self-insured for workers' compensation. Based on estimates provided by actuaries, liabilities for asserted and unasserted claims under the workers' compensation program at June 30, 2011 were discounted by 3.50% and amounted to $42,686 (3.25% and $40,800 in 2010). These liabilities are offset by receivables for the expected insurance direct payments against these claims of $8,882 at June 30, 2011 ($7,920 at June 30, 2010). The liabilities are included in accrued pension, post-retirement, and post-employment liabilities, and the receivables are included in other assets on the consolidated balance sheet. The University has a standby letter of credit with JPMorgan Chase Bank to cover potential liabilities under the University's self-insured workers' compensation program.

The University is self-insured for health care benefits. Based on estimates provided by actuaries, the University's obligation for incurred but not reported claims was $11,035 and $12,056 as of June 30, 2011 and 2010, respectively. These amounts are included in accounts payable and accrued expenses on the consolidated balance sheet and have not been discounted.

Retirement Plan – University

The University provides defined contribution retirement plans to its employees. The University of Rochester's Retirement Program offers four investment company options that are administered by each of the separate investment companies. Under these plans, the University made contributions of $70,334 and $66,560 in 2011 and 2010, respectively, which were vested for the benefit of the participants.

Post-retirement Benefit Plan – University

The University's post-retirement benefit plan includes basic medical, major medical, dental coverage, and life insurance. Benefit levels differ for current retirees, current employees eligible to retire, and current employees not eligible to retire.

The University incurred post-retirement plan expense of $16,325 and $15,364 for the years ended June 30, 2011 and 2010, respectively, which is recorded in fringe benefits expense on the consolidated statement of activities.

Benefit expense for this plan for the years ended June 30, 2011 and 2010 includes the following components:

	2011	2010
Change in benefit obligation:		
Benefit obligation at beginning of year	$ 143,377	$ 125,596
Service cost	2,917	2,562
Interest cost	7,337	7,636
Estimated plan participant contributions	2,013	1,654
Actuarial (gain)/loss	(8,033)	14,436
Benefits paid	(9,244)	(8,507)
Amendments	3,160	-
Benefit obligation at end of year	$ 141,527	$ 143,377
Change in plan assets:		
Fair value of plan assets at beginning of year	$ -	$ -
Employer contributions	7,231	6,853
Participant contributions	2,013	1,654
Benefits paid	(9,244)	(8,507)
Fair value of plan assets at end of year	$ -	$ -
Components of accrued benefit:		
Funded status	$ (141,527)	$ (143,377)
Unrecognized net actuarial loss	18,678	27,663
Unrecognized prior service cost	8,863	10,822
Accrued benefits	$ (113,986)	$ (104,892)
Amounts recognized in the consolidated balance sheets consist of:		
Accrued post-retirement benefit cost	$ (104,892)	$ (96,381)
Net post-retirement benefit expense	(16,325)	(15,364)
Employer contributions	7,231	6,853
Accrued benefits	$ (113,986)	$ (104,892)
Amount recorded in unrestricted net assets	(27,541)	(38,485)
Net amount recognized in unrestricted net assets	$ (141,527)	$ (143,377)
Components of net periodic benefit cost:		
Service cost	$ 2,917	$ 2,562
Interest cost	7,337	7,636
Amortization of prior service cost	6,071	5,166
Net periodic benefit cost	$ 16,325	$ 15,364

Estimated future contributions, benefit payments, and 28% prescription subsidy payments are as follows:

	Estimated Contributions / Benefit Payments	Estimated 28% Rx Subsidy Payments
2012	$ 8,896	$ 1,018
2013	9,578	1,126
2014	10,143	1,156
2015	10,363	1,042
2016	10,491	1,063
2017 to 2021	53,721	2,428

Benefits are valued based upon the projected unit cost method. The weighted average assumptions used at the measurement date, July 1, are as follows:

	2011	2010
Discount rate for obligation	5 25%	5 25%
Expected return on plan assets	N/A	N/A
Rate of compensation increase	N/A	N/A
Health care cost trend rate – initial	10 00%	10 00%
Health care cost trend rate – final	4 50%	4 50%

The rate increase in health care costs was assumed to decrease to 4.50% in 2017 and to remain at that level thereafter.

Assumed health care cost trend rates have a significant effect on the amounts reported for the health care plans. A one percentage-point change in the health care cost trend rate would have the following effects:

	One Percentage Point Increase	One Percentage Point Decrease
Effect on total of service and interest cost components	$ 627	$ (519)
Effect on post-retirement benefit obligation	$ 4,932	$ (4,227)

The Medicare Prescription Drug Improvement and Modernization Act of 2003 provides for a direct government subsidy for employers who continue to offer a retiree drug program that is deemed to be actuarially equivalent in the government plan. The University qualified for the Medicare Part D prescription drug federal subsidy.

Employers are required to recognize the over-funded or under-funded status of defined benefit pension and post-retirement plans as assets or liabilities in its consolidated balance sheet and to recognize changes in that funded status in the year in which the changes occur through changes in unrestricted net assets. In addition, employers are required to measure the funded status of the plan as of the consolidated balance sheet date.

Post-employment Benefits – University

Accrued post-employment benefits of the University amounted to $65,393 and $59,330 at June 30, 2011 and 2010, respectively.

Self-insurance Plans – Related Entity (Highland Hospital and Affiliates)

A related entity is self-insured for workers' compensation claim losses and expenses. A letter of credit in the amount of $5,864 is maintained as security for workers compensation claims. Included in accrued pension, post-retirement, and post-employment at June 30, 2011 and 2010 are accruals of approximately $10,534 and $9,252, respectively, for specific incidents to the extent that they have been asserted or are probable of assertion and can be reasonably estimated. These liabilities are offset by a receivable for the expected insurance direct payments against these claims of $1,767 and $1,516 at June 30, 2011 and 2010, respectively. This liability has been discounted by 1.75% and 2.00% at June 30, 2011 and 2010, respectively.

Retirement Plan – Related Entity (Highland Hospital and Affiliates)

The retirement plan of a related entity covers all employees who have completed two years of continuous employment. The benefits for this plan are based primarily on years of service and employees' pay near retirement. The related entity's funding policy is to contribute annually, an amount consistent with the requirement of the Employee Retirement Income Security Act. Plan assets consist principally of cash equivalents, common stocks and fixed income investments.

Retirement plan expense of $6,590 and $7,449 was incurred for the years ended December 31, 2010 and 2009, respectively, and is recorded in fringe benefits in the consolidated statement of activities. In addition, a pension related benefit other than net periodic pension cost of ($4,635) and $6,585 for the years ending December 31, 2010 and 2009, respectively, was recorded in other changes on the consolidated statement of activities.

Pension expense for this plan for the years ended December 31, 2010 and 2009 includes the following components (in thousands):

	2010	2009
Change in benefit obligation:		
Benefit obligation at beginning of year	$ 105,693	$ 93,046
Service cost	4,739	3,903
Interest cost	6,235	5,596
Curtailment	(839)	-
Actuarial (gain)/loss	8,458	5,668
Benefits paid	(2,804)	(2,520)
Benefit obligation at end of year	$ 121,482	$ 105,693

	2010	2009
Change in plan assets:		
Fair value of plan assets at beginning of year	$ 73,648	$ 56,161
Actual return on plan assets	7,657	14,547
Employer contribution	6,000	5,703
Benefits paid	(2,805)	(2,520)
Administrative expenses paid	(288)	(243)
Fair value of plan assets at end of year	$ 84,212	$ 73,648

	2010	2009
Amounts recognized in the balance sheets consist of:		
Accrued benefits	$ (5,016)	$ (3,867)
Amount recognized in unrestricted net assets	(32,254)	(28,178)
Funded Status	$ (37,270)	$ (32,045)

	2010	2009
Components of net periodic benefit cost:		
Service cost	$ 4,739	$ 3,903
Interest cost	6,235	5,597
Expected return on plan assets	(6,401)	(4,946)
Amortization (gain)/loss	2,017	2,895
Net periodic benefit cost	$ 6,590	$ 7,449

Weighted-average assumptions as of December 31:		
Discount rate for obligation	5 48%	5 97%
Discount rate for pension expense	5 97%	6 09%
Investment return assumption (regular)	8 50%	8 50%
Future compensation increase rate	3 80%	3 80%

The pension plan funds are allocated to two money managers, each with a balanced portfolio. These money managers monitor financial market funds and adjust inconsistent strategy accordingly.

The weighted-average asset allocation for the pension plan as of December 31, by asset manager categories is as follows:

	2010	2009
Weighted-average assumptions by asset categories:		
Equity securities	54%	56%
Fixed income securities	40%	30%
Cash and other investments	6%	14%
	100%	100%

Estimated future benefit payments for the years ending December 31:

2011	$ 2,816
2012	3,130
2013	3,636
2014	4,053
2015	4,533
2016 to 2020	34,462
Total estimated future payments	$ 52,630

The related entity expects to contribute $6,750 to the plan in 2011 and contributed $6,000 to the plan in 2010.

The plan's asset allocation policy states the assets should be allocated as follows:

	Target Allocation	Range
Domestic equity	25%	20-30%
International equity	25%	20-35%
Fixed income	20%	20-40%
Inflation protection assets	18%	5-30%
Hedge funds/absolute return	10%	5-15%
Cash and equivalents	2%	0-5%

In addition, the total equity commitment should not exceed 75% of assets.
The asset allocation ranges established by this investment policy represent a long-term perspective, and as such, rapid unanticipated market shifts or changes in economic conditions may cause the asset mix to fall outside of the policy range. These divergences should be of a short-term nature.

Inflows and disbursements should be allocated such that the assets are rebalanced toward the target allocation.

The plan assets are invested with an outside trustee for the sole benefit of the plan participants. Investments are managed to maximize total return while maintaining a prudent level of risk.

The following assets were recorded at fair value within the plan assets of the related entity as of December 31, 2010 and 2009, respectively. Fair value for Level 1 is based upon quoted market prices. Level 2 may be based on quoted prices for similar and/or inputs other than quoted prices that are observable for the asset or liability. Level 3, which primarily consists of a mutual fund investing in publicly traded stock, bonds, short-term investments, preferred stocks, warrants, asset backed securities, and mortgage backed securities.

The following assets were recorded at fair value within the plan assets of the related entity as of December 31

Description	Level 1	Level 2	Level 3	2010 Total Fair Value
Cash	$ 1,411	$ -	$ -	$ 1,411
Mutual fund – global balanced asset	41,135	-	-	41,135
Mutual fund – multi asset	-	41,666	-	41,666
	$ 42,546	$ 41,666	$ -	$ 84,212

Description	Level 1	Level 2	Level 3	2009 Total Fair Value
Cash	$ 304	$ -	$ -	$ 304
Mutual fund – global balanced asset	37,411	-	-	37,411
Mutual fund – multi asset	-	-	35,933	35,933
	$ 37,715	$ -	$ 35,933	$ 73,648

(10) Investment in Captive Insurance Company

The Hospital, together with other universities and teaching hospitals, has formed a captive insurance company (captive) to insure the professional liability risks of the shareholders. The Hospital's investment in the captive represents 20% of the voting rights; however, the dissolution provisions of the captive agreement indicate that the Hospital's financial participation (based on percentage of premiums paid) is approximately 8% of the financial results of the captive. Due to the Hospital's significant influence in the captive, the investment in the captive has been recorded under the equity method.

The Hospital's premiums are based on its professional liability experience and a shared risk factor with the other participants. Premiums are subject to retrospective adjustment based on, among other things, actual loss experience of the Hospital.

The most recent audited financial information for the captive for years ended December 31 is summarized below:

	2010	2009
Results of operations		
Net earned premiums	$ 210,377	$ 265,352
Expenses	(244,235)	(283,751)
Investment income and realized gains on sales of marketable securities	43,927	24,663
Net income	10,069	6,264
Other comprehensive income	58,824	144,387
Comprehensive income	68,893	150,651
Net capital additions (withdrawals) by shareholders	4,765	(216)
Change in shareholders' equity	$ 73,658	$ 150,435
Financial position		
Total assets	$ 2,423,247	$ 2,144,835
Total liabilities	2,194,579	1,989,825
Shareholders' equity	$ 228,668	$ 155,010

(11) Professional Liability Claims

The University's coverage for professional liability insurance is provided under insurance policies obtained jointly with other universities and teaching hospitals. The primary layer of coverage as well as the buffer and self-insured layers of excess insurance were written by MCIC Vermont, Inc. (a Risk Retention Group) formed and directed by the participating insured institutions. Multiple layers of excess insurance were purchased from several different insurance companies. The maximum coverage for the Medical Center is $221,500 per claim. The per claim coverage amount at each of the five participating institutions has been tailored to their own experience and exposures.

Based on estimates provided by the actuaries retained by MCIC Vermont, Inc., the University's obligations for incurred, but not reported claims were $31,995 and $34,224 as of June 30, 2011 and 2010, respectively. These amounts have not been discounted and are included in accounts payable and accrued expenses on the consolidated balance sheet.

(12) Fair Value of Financial Instruments

Assets and liabilities recorded at fair value in the balance sheet are categorized based upon the level of judgment associated with the inputs used to measure fair value. An asset or liability's categorization within the fair value hierarchy is based on the lowest level of observable inputs to its valuation. Hierarchical levels are directly related to the amount of subjectivity associated with the inputs to fair valuation of these assets and liabilities as follows:

Level 1 – Valuations are based on quoted prices in active markets for identical assets or liabilities that the University has the ability to access. Valuations are based on quoted prices that are readily and regularly available in active markets. Valuation of these products does not entail a significant degree of judgment.

Level 2 – Valuations are based on quoted prices in active markets for similar assets or liabilities, quoted

prices in markets that are not active or for which all significant inputs are observable, directly or indirectly.

Level 3 – Valuations are based on inputs that are unobservable and significant to the overall fair value measurement. These are generally company generated inputs and are not market based inputs.

The following tables present the financial instruments carried at fair value as of June 30 on the consolidated balance sheet based on the valuation hierarchy defined above:

	Quoted Market Prices (Level 1)	Significant Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2011 Total Fair Value
Assets				
Cash and cash equivalents	$ -	$ 16,465	$ -	$ 16,465
Collateral held for securities lending	-	69,282	-	69,282
Operating and long term investments:				
Cash and cash equivalents	71,574	72,446	-	144,020
Debt securities				
Asset backed securities	-	19,347	-	19,347
Bank loans	-	692	-	692
Bond funds	68,576	-	1,608	70,184
Corporate bonds	-	71,526	107	71,633
Government bonds & securities	-	47,636	-	47,636
Non-government backed securities	-	633	-	633
Mortgage backed bonds	-	7,434	-	7,434
Other	7,633	23,188	-	30,821
Common, mutual fund & preferred stock				
Common stock	226,346	609	-	226,955
Equity exchange traded funds	135	-	-	135
Mutual funds (domestic)	17,593	21,843	-	39,436
Mutual funds (global)	5,312	-	-	5,312
Mutual funds (international)	49,147	190,019	-	239,166
Preferred stock	319	-	-	319
Real assets	323	-	262,627	262,950
Private equity	-	-	400,557	400,557
Hedge funds	-	99,001	294,549	393,550
Other	6,317	7,650	17,665	31,632
Total operating and long term investments:	453,275	562,024	977,113	1,992,412
Interest in net assets of foundation	-	-	13,743	13,743
Trusts held by others	-	-	49,780	49,780
Total assets at fair value	$ 453,275	$ 647,771	$ 1,040,636	$ 2,141,682
Liabilities				
Interest rate swap payable	$ -	$ 24,984	$ -	$ 24,984
Total liabilities at fair value	$ -	$ 24,984	$ -	$ 24,984

	Quoted Market Prices (Level 1)	Significant Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2010 Total Fair Value
Assets				
Cash and cash equivalents	$ -	$ 14.734	$ -	$ 14.734
Collateral held for securities lending	-	79.283	-	79.283
Operating and long term investments:				
Cash and cash equivalents	95.200	75.627	-	170.827
Debt securities				
Asset backed securities	-	14.780	-	14.780
Bank loans	-	577	-	577
Bond funds	57.939	-	1.595	59.534
Corporate bonds	-	64.948	126	65.074
Government bonds & securities	-	41.708	-	41.708
Non-government backed securities	-	987	-	987
Mortgage backed bonds	-	9.962	-	9.962
Other	5.706	24.654	24	30.384
Common, mutual fund & preferred stock			-	
Common stock	192.341	485	-	192.826
Equity exchange traded funds	93	-	-	93
Mutual funds (domestic)	-	34.606	-	34.606
Mutual funds (global)	-	181.531	-	181.531
Mutual funds (international)	35.700	-	-	35.700
Preferred stock	48	-	-	48
Real assets	323	-	206.707	207.030
Private equity	-	-	337.226	337.226
Hedge funds	-	100.969	270.736	371.705
Other	4.780	5.253	12.508	22.541
Total operating and long term investments:	392.130	556.087	828.922	1.777.139
Interest in net assets of foundation	-	-	12.370	12.370
Trusts held by others	-	-	43.119	43.119
Total assets at fair value	$ 392.130	$ 650.104	$ 884.411	$ 1.926.645
Liabilities				
Interest rate swap payable	$ -	$ 28.339	$ -	$ 28.339
Total liabilities at fair value	$ -	$ 28.339	$ -	$ 28.339

The valuation methodologies for assets and liabilities measured at fair value described below may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. The University believes its valuation methods are appropriate and consistent with other market participants. However, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different estimate of fair value at the reporting date.

Fair value for Level 1 is based upon quoted market prices in active markets. Fair value for Level 2 is based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets. Inputs are obtained from various sources including market participants, dealers, and brokers. Level 3 consists primarily of the University's alternative investments (primarily limited partnership interests in absolute return, hedge funds, private equity, real estate, and natural resource funds) and represents the ownership interest in the net asset value (NAV) of the respective partnerships. Investments held by the partnerships consist of marketable securities as well as securities that do not have readily determined fair values. The fair values of the securities held by limited partnerships that do not have readily observable fair values are determined by the general partner and are based on historical cost, appraisals, and/or other estimates that require varying degrees of judgment. If no public market exists for the investment securities, the fair value is determined by the general partner taking into consideration, the costs of the securities, prices of recent significant placements of securities of the same issuer, and subsequent developments concerning the companies to which the securities relate.

Interest in net assets of foundation are considered Level 3 assets as they represent the University's share of net assets as reported by the foundation.

Investments in perpetual trusts held by others are valued at the fair value of the assets contributed to the trusts, and are considered Level 3 assets.

Interest rate swaps are valued using both observable and unobservable inputs, such as quotations received from the counterparty, dealers or brokers, whenever available and considered reliable. In instances where models are used, the value of the interest rate swap depends upon the contractual terms of, and specific risks inherent in, the instrument as well as the availability and reliability of observable inputs. Such inputs include market prices for reference securities, yield curves, credit curves, measures of volatility, prepayment rates, assumptions for nonperformance risk, and correlations of such inputs. The University's interest rate swap arrangements have inputs which can generally be corroborated by market data and are therefore classified within level 2.

Fair value of interest rate swaps in the consolidated balance sheets:

	Notional Amount	2011 Level 2 Fair Value	2010 Level 2 Fair Value
Accounts payable	$ 226,085	$ 24,984	$ 28,339

Effect of interest swaps on statements of activities:

	2011 Unrealized Gain/(Loss)	2010 Unrealized Gain/(Loss)
Non-operating net appreciation / (depreciation)	$ 3,355	$ (8,880)

Activity related to interest rate swaps affect unrestricted net assets, and in the consolidated statement of cash flows, are included in changes in accounts payable and accrued expenses in the operating activities section.

The following tables are rollforwards of the consolidated balance sheet amounts for financial instruments classified by the University within Level 3 of the fair value hierarchy defined above.

	Balance June 30, 2010	Realized Gains/(Losses)	Unrealized Gains/(Losses)	Purchases, Sales and Settlements, Net	Transfers In/(Out) of Level 3	Balance June 30, 2011
Investments						
Debt securities	$ 1.745	$ 12	$ (9)	$ (33)	$ -	$ 1.715
Private equity	337.226	(4.882)	35.596	32.617	-	400.557
Hedge funds	270.736	(2.031)	25.736	108	-	294.549
Real assets and other	219.215	(9.941)	34.860	36.155	3	280.292
Interest in net assets of a foundation	12.370	(566)	2.413	813	(1.287)	13.743
Investments of trusts held by others	43.119	(2.011)	8.577	95	-	49.780
Total fair value	$ 884.411	$ (19.419)	$ 107.173	$ 69.755	$ (1.284)	$ 1.040.636

	Balance June 30, 2009	Realized Gains/(Losses)	Unrealized Gains/(Losses)	Purchases, Sales and Settlements, Net	Transfers In/(Out) of Level 3	Balance June 30, 2010
Investments						
Debt securities	$ 731	$ 22	$ 21	$ (394)	$ 1.365	$ 1.745
Private equity	266.346	(2.534)	39.700	33.714	-	337.226
Hedge funds	359.852	31.007	136	(19.330)	(100.929)	270.736
Real assets and other	207.931	14	(17.071)	27.693	648	219.215
Interest in net assets of a foundation	11.653	248	594	800	(925)	12.370
Investments of trusts held by others	40.691	689	1.652	87	-	43.119
Total fair value	$ 887.204	$ 29.446	$ 25.032	$ 42.570	$ (99.841)	$ 884.411

All net realized and unrealized gains/(losses) in the table above are reflected in net appreciation of long-term investment activities in the accompanying statement of activities. Net unrealized gains/(losses) relate to those financial instruments held by the University at June 30, 2011.

The University is permitted under US GAAP to estimate the fair value of an investment at the measurement date using the reported NAV without further adjustment unless the entity expects to sell the investment at a value other than NAV or if the NAV is not calculated in accordance with US GAAP. The University's investments in private equity, natural resources, real estate, and certain hedge funds in the absolute return portfolio are fair valued based on the most current NAV.

The University performs additional procedures including due diligence reviews on its investments in investment companies and other procedures with respect to the capital account or NAV provided to ensure conformity with US GAAP. The University has assessed factors including, but not limited to, managers' compliance with the Fair Value Measurement standard, price transparency and valuation procedures in place, the ability to redeem at NAV at the measurement date, and existence of certain redemption restrictions at the measurement date.

The guidance also requires additional disclosures to enable users of the financial statements to understand the nature and risk of the University's investments. Furthermore, investments which can be redeemed at NAV by the University on the measurement date or within 90 days are classified as Level 2. Investments which cannot be redeemed on the measurement date or within 90 days are classified as Level 3. The new guidance did not materially affect the University's consolidated financial statements.

Strategy	2011 Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice
Hedge funds				
Long/short	$ 196.939	$ -	Quarterly, annually, 1 & 3 year rolling lock-ups	45 - 90 days
Multi-strategy	196.611	-	Quarterly, annually, 1 & 2 year rolling lock-ups	45 - 90 days
Private equity			**Remaining Fund Life**	**Drawdown Period**
Buyouts	267.250	65.527	1 to 10 years	1 to 7 years
Venture capital	79.250	24.460	1 to 12 years	1 to 6 years
Distressed	54.057	7.426	1 to 5 years	1 to 3 years
Real assets				
Real estate	158.632	88.115	1 to 10 years	1 to 5 years
Natural resources	103.995	56.419	1 to 12 years	1 to 5 years
Total alternative investments	$ 1.056.734	$ 241.947		

Strategy	2010 Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice
Hedge funds				
Long/short	$ 174.413	$ -	Quarterly, annually, 3 year rolling lock-ups	45 - 90 days
Multi-strategy	197.292	-	Quarterly, annually, 1 & 2 year rolling lock-ups	45 - 90 days
Private equity			**Remaining Fund Life**	**Drawdown Period**
Buyouts	230.808	77.758	1 to 8 years	1 to 3 years
Venture capital	57.824	38.866	1 to 13 years	1 to 7 years
Distressed	48.594	17.658	1 to 5 years	1 to 3 years
Real assets				
Real estate	115.347	108.350	1 to 10 years	1 to 3 years
Natural resources	91.360	62.805	1 to 12 years	1 to 5 years
Total alternative investments	$ 915.638	$ 305.437		

(13) Lines of Credit

The University has a $50,000 committed line of credit agreement with Northern Trust Company that is subject to annual credit review and renewal. Under this agreement, no amounts were outstanding at June 30, 2011 and 2010, respectively.

The University has a $75,000 committed line of credit agreement with JPMorgan Chase Bank, N.A. that is subject to annual credit review and renewal. Under this agreement, no amounts were outstanding at June 30, 2011 and 2010, respectively.

The University has a $50,000 committed line of credit agreement with U.S. Bank, N.A. that is subject to annual credit review and renewal. Of this total, $1,000 and $0 were outstanding at June 30, 2011 and 2010, respectively.

The University has $788 in standby letters of credit with JPMorgan Chase Bank, N.A. to cover potential liabilities of other financial obligations.

The University had a $25,000 line of credit agreement with First Niagara Bank which expired on July 13, 2010. Under this agreement, no amounts were outstanding at June 30, 2011 and 2010, respectively.

(14) Commitments and Contingencies

In the ordinary course of operations, the University is named as a defendant in various lawsuits, or events occur which could lead to litigation, claims, or assessments. Although the outcome of such matters cannot be predicted with certainty, management believes that insurance coverage is sufficient to cover current or potential claims, or that the final outcomes of such matters will not have a material adverse effect on the consolidated financial position.

At June 30, 2011, the University has entered into construction contracts and commitments aggregating $603,405 ($505,332 at June 30, 2010) of which $484,210 ($423,544 at June 30, 2010) had been fulfilled.

(15) Leases

The University leases research laboratories, office space, and equipment under operating leases expiring through August 2023. Rental expense for the years ended June 30, 2011 and 2010 totaling $33,799 and $31,358, respectively, is included in the accompanying consolidated statements of activities.

Future minimum payments by year and in the aggregate, under non-cancelable operating leases, with initial or remaining terms of one year or more are as follows:

	University	Related Entities
2012	$ 28,793	$ 3,520
2013	26,412	2,856
2014	21,608	2,574
2015	16,302	2,480
2016	13,963	2,492
Thereafter	41,259	6,449
Total minimum lease payments	$ 148,337	$ 20,371

(16) Scholarships, Grants, and Fellowships

The University awarded a total of $142,321 and $132,222 in scholarships, grants, and fellowships during fiscal years 2011 and 2010, respectively. In addition, the University awarded $21,317 and $18,869, respectively, of scholarships, grants, and fellowships as compensation to the recipients. Of this amount, $20,514 and $21,058, respectively, of the total scholarships, grants, and fellowships awarded were specifically funded by federal, state, or private gifts or grants, or by investment income and gains earned on investments held for endowment and similar purposes and utilized under the University's total return spending policy.

(17) Functional Expenses

The University also records expenses according to major classes of programs or functions. Functional expenses for the years ended June 30 consisted of the following:

	2011	2010
Instruction	$ 300,191	$ 286,736
Research	334,396	304,557
Public service	10,235	10,541
Libraries and other academic support	60,165	53,376
Student services	45,212	42,534
Institutional support	89,749	81,283
Hospital and faculty practice patient care	1,721,125	1,654,447
Auxiliary enterprises	90,164	84,649
Total functional expenses	$ 2,651,237	$ 2,518,123

(18) Subsequent Events

Pursuant to an agreement between the University and Monroe County Industrial Development Corporation (MCIDC) dated September 1, 2011, MCIDC issued and sold $161,660 of bonds known as the University of Rochester Tax-Exempt Revenue Bonds, Series 2011, consisting of $122,340 Series 2011A bonds and $39,320 Series 2011B bonds. The Series 2011 bonds were issued at a premium of $14,088 resulting in proceeds of $175,748.

Series 2011A bonds were issued to finance (1) the renovation of Danforth Dining Center; (2) the construction of a new building to house the University's Digital Media Center and Fabrication Lab; (3) renovations to laboratories and offices throughout the River Campus and Medical Center; (4) various renovations for Fauver Stadium; (5) various deferred maintenance and renovation projects at the Eastman School of Music and related residential halls; (6) the construction of a new undergraduate residence hall; (7) the renovation of various undergraduate and graduate residential facilities; (8) construction of the Raymond F. LeChase Hall to house the University's Warner School of Education; (9) improvements and expansion of the central utilities plant; (10) renovation and modernization of the Medical Center storm sewer infrastructure, and (11) a portion of the Cancer Center Vertical Expansion improvements. A portion of Series 2011A was also used to refinance all of the outstanding bonds for Series 2001A.

Series 2011B bonds were issued to finance (1) a portion of the Cancer Center Vertical Expansion improvements; (2) the relocation of the Bone Marrow Transplant Unit; (3) the replacement of the air handler equipment within Strong Memorial Hospital, and (4) replacement of certain existing angiographic equipment.

The loan agreement and the obligation of the University to make payments under the loan agreement are general obligations of the University.

The University has performed an evaluation of subsequent events through October 20, 2011 the date on which the consolidated financial statements were issued.

Additional Data

Software ID:
Software Version:
EIN: 16-0743209
Name: UNIVERSITY OF ROCHESTER

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOEL SELIGMAN TRUSTEE, PRESIDENT & CEO	80.0	X		X				682,402	0	87,012
RICHARD T AAB TRUSTEE	2.0	X						0	0	0
MARK S AIN TRUSTEE	2.0	X						0	0	0
ERNEST A BATES MD TRUSTEE	2.0	X						0	0	0
NAOMI M BERGMAN TRUSTEE	25	X						0	0	0
LAURENCE H BLOCH TRUSTEE	2.0	X						0	0	0
SHEILA E BLUMSTEIN TRUSTEE	2.0	X						0	0	0
JOHN H BRUNING TRUSTEE	2.0	X						0	0	0
URSULA M BURNS TRUSTEE	25	X						0	0	0
WILLIAM M CARPENTER TRUSTEE	2.0	X						0	0	0
ARUNAS A CHESONIS TRUSTEE	2.0	X						0	0	0
LAUNCELOT F DRUMMOND TRUSTEE	2.0	X						0	0	0
BERNARD T FERRARI MD TRUSTEE	2.0	X						0	0	0
DAVID FLAUM TRUSTEE	2.0	X						0	0	0
BARRY W FLORESCUE TRUSTEE	2.0	X						0	0	0
ROGER B FRIEDLANDER TRUSTEE	2.0	X						0	0	0
ROBERT B GOERGEN CHAIR EMERITUS	2.0	X						0	0	0
GWEN MELTZER GREENE TRUSTEE	2.0	X						0	0	0
PAUL F GRINER TRUSTEE	25	X						0	0	0
EDMUND A HAJIM Chair	4.0	X		X				0	0	0
RICHARD B HANDLER TRUSTEE	2.0	X						0	0	0
ALAN F HILFIKER TRUSTEE	2.0	X						0	0	0
ROBERT H HURLBUT TRUSTEE	2.0	X						0	0	0
MICHAEL E JONES TRUSTEE	2.0	X						0	0	0
CAROL D KARP TRUSTEE	25	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT KEEGAN TRUSTEE	2 0	X						0	0	0
JOHN M KELLY TRUSTEE	25	X						0	0	0
LAURENCE KESSLER TRUSTEE	2 0	X						0	0	0
LOUIS G LANGE MD TRUSTEE	2 0	X						0	0	0
R WAYNE LECHASE TRUSTEE	2 0	X						0	0	0
NANCY A LIEBERMAN TRUSTEE	2 0	X						0	0	0
GAIL A LIONE TRUSTEE	2 0	X						0	0	0
CATHY E MINEHAN TRUSTEE	2 0	X						0	0	0
NATHAN F MOSER TRUSTEE	2 0	X						0	0	0
CHARLES R MUNNERLYN TRUSTEE	2 0	X						0	0	0
KATHLEEN ANN MURRAY TRUSTEE	2 0	X						0	0	0
WILLIAM A PECK MD TRUSTEE	2 0	X						0	0	0
PHILIP A PIZZO MD TRUSTEE	2 0	X						0	0	0
FRANCIS L PRICE TRUSTEE	2 0	X						0	0	0
ELENA A PROKUPETS TRUSTEE	2 0	X						0	0	0
THOMAS S RICHARDS TRUSTEE	2 0	X						0	0	0
MICHAEL S ROSEN TRUSTEE	2 0	X						0	0	0
RICHARD E SANDS TRUSTEE	25	X						0	0	0
THOMAS R SLOAN TRUSTEE	2 0	X						0	0	0
HUGO F SONNENSCHEIN TRUSTEE	2 0	X						0	0	0
KATHY N WALLER TRUSTEE	2 0	X						0	0	0
DANIEL R WEGMAN TRUSTEE	2 0	X						0	0	0
RALPH R WHITNEY JR TRUSTEE	2 0	X						0	0	0
JANICE M WILLETT TRUSTEE	2 0	X						0	0	0
CARL C WILLIAMS TRUSTEE	2 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS C WILMOT SR TRUSTEE	2 0	X						0	0	0
NATHANIEL WISCH MD TRUSTEE	2 0	X						0	0	0
G ROBERT WITMER JR CHAIR EMERITUS	2 0	X						0	0	0
PAUL J BURGETT VP AND GENERAL SECRETARY	60 0			X				239,209	0	29,642
BRADFORD C BERK SR VP HEALTH SCIENCE	65 0			X				868,727	0	153,032
RALPH W KUNCL PROVOST & EXEC VP	74 0			X				525,527	0	73,679
PETER LENNIE SR VP & DEAN OF FACULTY	60 0			X				405,433	0	38,642
WILLIAM M MURPHY VP for communications	40 0			X				218,988	0	32,175
RONALD J PAPROCKI SR VP ADMIN & FINANCE, CFO	65 0			X				503,695	0	47,279
DOUGLAS W PHILLIPS SR VP institutional resources	62 0			X				284,851	0	282,340
SUE S STEWART SR VP AND GENERAL COUNSEL	65 0			X				403,546	0	33,796
MARK B TAUBMAN DEAN,SMD,VP FOR HEALTH SCIENCE	75 0			X				711,871	0	117,228
JAMES D THOMPSON SR VP & CHIEF ADV OFFICER	75 0			X				486,463	0	43,099
RICHARD FISHER DIR CANCER CTR & VP CLIN SRVS	60 0				X			615,270	0	66,842
STEVEN GOLDSTEIN VICE PRESIDENT- URMC	70 0				X			873,182	0	162,555
RAYMOND J MAYEWSKI VP, URMC OFC SR VP FOR HEALTH	51 0				X			508,997	0	115,827
ELIZABETH MCANARNEY INTERIM ACTING DEAN SMD	45 0				X			190,457	0	13,016
MICHAEL D MALONEY MD ASSOC PROF , ORTHOPAEDICS M&D	86 0					X		1,014,695	0	280,045
MARC D BROWN MD PROF , DERMATOLOGY M&D	60 0					X		1,687,050	0	35,890
JEFFREY H PETERS MD PROF CHAIR DEPT OF SURGERY	73 0					X		1,201,950	0	58,493
BRENT DUBESHTER MD PROFESSOR, OBSTETRICS & GYNE	80 0					X		1,244,237	0	45,596
JASON HAITAO HUANG MD ASSOC PROF DEPT NEUROSURGERY	60 0					X		1,343,235	0	49,441
THOMAS H JACKSON FORMER OFFICER	40 0						X	372,757	0	42,054
CHARLES MCCOLLISTER EVARTS FORMER OFFICER	40 0						X	314,552	0	35,776