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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2012</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization DREXEL UNIVERSITY		D Employer identification number 23-1352630
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 3201 ARCH STREET NO 420	Room/suite	E Telephone number (215) 895-2000
	City or town, state or country, and ZIP + 4 PHILADELPHIA, PA 191042875		G Gross receipts \$ 1,014,902,481
	F Name and address of principal officer JOHN A FRY 3141 CHESTNUT ST PHILADELPHIA, PA 19104		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ WWW.DREXEL.EDU	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities INTEGRATED ACADEMIC OFFERINGS ENHANCED BY TECHNOLOGY, COOPERATIVE EDUCATION AND CLINICAL PRACTICE			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	48	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	43	
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	10,740	
	6	Total number of volunteers (estimate if necessary)	2,236	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	4,596,938	
	b	Net unrelated business taxable income from Form 990-T, line 34	895,940	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 137,370,616	Current Year 127,243,677
	9	Program service revenue (Part VIII, line 2g)	690,066,490	755,725,028
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,779,624	46,749,763
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,357,772	8,881,261
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	851,574,502	938,599,729
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	198,845,637
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)	369,043,067	381,792,930
16a		Professional fundraising fees (Part IX, column (A), line 11e)	156,000	159,750
b		Total fundraising expenses (Part IX, column (D), line 25)	13,153,659	
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	236,104,383	257,678,181
18		Total expenses—Add lines 13–17 (must equal Part IX, column (A), line 25)	804,149,087	855,596,140
19		Revenue less expenses—Subtract line 18 from line 12	47,425,415	83,003,589
Net Assets or Fund Balances				Beginning of Current Year
	20	Total assets (Part X, line 16)	1,393,733,870	1,456,031,639
	21	Total liabilities (Part X, line 26)	724,466,468	714,006,723
	22	Net assets or fund balances—Subtract line 21 from line 20	669,267,402	742,024,916

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	*****			2014-05-14	
	Signature of officer			Date	
	HELEN Y BOWMAN SVP FINANCE/CFO/TREASURER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date
	Check <input type="checkbox"/> if self-employed			PTIN	
	Firm's name			Firm's EIN	
	Firm's address			Phone no	

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

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















- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4b	(Code) (Expenses \$ 103,462,374 including grants of \$ 14,588,848) (Revenue \$ 10,919,693)
	<p>RESEARCHDREXEL RESEARCHERS WORK ACROSS DISCIPLINES TO INCREASE THE WORLD'S STORE OF KNOWLEDGE AND TRANSLATE THAT NEW KNOWLEDGE INTO SOLUTIONS WITH TREMENDOUS POSITIVE IMPACT ON SOCIETY THE UNIVERSITY'S RESEARCH ENTERPRISE CONTINUES TO GROW AND ATTRACT INCREASING EXTRAMURAL SUPPORT, INCLUDING SPONSORED RESEARCH FUNDING OF \$111.8 MILLION IN FY2013. IN THE MOST RECENT YEAR, FIVE DREXEL FACULTY MEMBERS RECEIVED NATIONAL SCIENCE FOUNDATION CAREER AWARDS, SUPPORTING PROMISING YOUNG RESEARCHERS NATIONWIDE. THEIR RECOGNITION POINTS TO THE POTENTIAL FOR DREXEL'S RESEARCH ENTERPRISE TO CONTINUE TO GROW ITS IMPACT IN YEARS TO COME. DREXEL IS COMMITTED TO USING ITS RESEARCH AND TECHNOLOGICAL EXPERTISE TO BECOME AN EVEN MORE POWERFUL ECONOMIC ENGINE FOR GREATER PHILADELPHIA, HELPING TO CREATE NEW HIGH-TECH BUSINESSES AND JOBS. IN 2013, THE UNIVERSITY LAUNCHED DREXEL VENTURES, A NEW ENTERPRISE FACILITATING THE COMMERCIALIZATION OF DREXEL INVENTIONS IN PARTNERSHIP WITH REGIONAL AND NATIONAL ENTREPRENEURS, AND THE CHARLES D. CLOSE SCHOOL OF ENTREPRENEURSHIP, WHICH WILL INTEGRATE ENTREPRENEURSHIP AND INNOVATION SUPPORT ACROSS DREXEL'S CURRICULUM AND PROVIDE LEADERSHIP FOR THE REGION'S COMMUNITY OF NEW BUSINESS DEVELOPERS. DREXEL IS SPECIFICALLY COMMITTED TO TRANSLATIONAL RESEARCH, RIGOROUS ACADEMIC WORK THAT TANGIBLY TRANSLATES INTO INTELLECTUAL PROGRESS AND SOCIAL GOOD. WORKING WITH THE WALLACE H. COULTER FOUNDATION, WHICH HELPED DREXEL ESTABLISH A \$20 MILLION TRANSLATIONAL RESEARCH ENDOWMENT IN 2011, THE UNIVERSITY HAS BECOME A MODEL FOR BEST PRACTICES IN THE FIELD, MENTORING INSTITUTIONS ACROSS THE UNITED STATES AND THE WORLD TO INCREASE THE CAPACITY FOR LIFE-SAVING AND SOCIETY-CHANGING DISCOVERY. RECENT RESEARCH HIGHLIGHTS HAVE INCLUDED ROBOTICS (WHERE A DREXEL-LED TEAM WAS CHOSEN TO PARTICIPATE IN A DARPA CHALLENGE TO IMPROVE DISASTER RESPONSE), WATERSHED PROTECTION (THROUGH A GRANT FROM THE WILLIAM PENN FOUNDATION TO SCIENTISTS IN THE ACADEMY OF NATURAL SCIENCE OF DREXEL UNIVERSITY) AND WORKPLACE SAFETY (WHERE SCHOOL OF PUBLIC HEALTH RESEARCHERS SHOWED THAT CHANGING HOSPITAL DATA COLLECTION COULD PREVENT OCCUPATIONAL HEALTH HAZARDS), TO NAME JUST A FEW. DREXEL'S RESEARCHERS CONTINUE TO BUILD THE GLOBAL PARTNERSHIPS THAT WILL BE CRITICAL TO CREATE 21ST-CENTURY SOLUTIONS TO AMERICA'S CHALLENGES. THE PAST YEAR SAW NEW RELATIONSHIPS AND COLLABORATIONS WITH INSTITUTIONS FROM CHINA TO TURKEY TO BRAZIL AND CHILE DURING FY13. DREXEL UNIVERSITY CONDUCTED RESEARCH ON THE FOLLOWING RESEARCH GRANTS: FEDERALLY SPONSORED RESEARCH - 586 GRANTS; STATE OF PENNSYLVANIA SPONSORED RESEARCH - 50 GRANTS; CITY OF PHILADELPHIA CONTRACTS - 10 GRANTS; PRIVATE FOUNDATION SPONSORED RESEARCH - 142 GRANTS; INDUSTRY SPONSORED RESEARCH - 63 GRANTS.</p>

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	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	Yes	
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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response 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		
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	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)?	Yes	
b	If "Yes," enter the name of the foreign country CJ, EI, BD, JA, EK 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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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	48	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	43	
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	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	PA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	TAX OFFICE 3201 ARCH STREET SUITE 420 PHILADELPHIA, PA (215) 895-1463

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

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** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[illegible]

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								7,156,636	0	773,877

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 644

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
TURNER CONSTRUCTION COMPANY 1835 MARKET STREET 21ST FLOOR PHILADELPHIA PA 19103	CONSTRUCTION SERVICES	40,560,868
KEATING BUILDING CORPORATION THE PHOENIX SUITE 300 1600 ARCH S PHILADELPHIA PA 19103	CONSTRUCTION SERVICES	38,999,082
SODEXO SERVICES 9801 WASHINGTON BLVD GAITHERSBURG MD 20878	FOOD SERVICES	18,953,518
UNICCO SERVICES COMPANY 4002 SOLUTIONS CENTER CHICAGO IL 606774400	MECHANICAL/CUSTODIAL	6,216,509
ALLIED BARTON SECURITY SERVICES LLC EIGHT TOWER BRIDGE 161 WASHINGTON CONSHOHOCKEN PA 19428	SECURITY SERVICES	4,065,673

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►98

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c	588,012			
	d	Related organizations 1d	16,621,861			
	e	Government grants (contributions) 1e	78,476,355			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	31,557,449			
	g	Noncash contributions included in lines 1a-1f \$	13,238,306			
	h	Total. Add lines 1a-1f	127,243,677			
Program Service Revenue	Business Code					
	2a	TUITION AND FEES	900099	669,369,691	669,369,691	
	b	AUXILIARY ENTERPRISES	611710	72,421,148	72,421,148	
	c	OTHER PROGRAM SERVICES	611710	11,840,634	11,840,634	
	d	EDUCATIONAL ACTIVITIES	611600	2,093,555	2,093,555	
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	755,725,028			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	47,622,964			47,622,964
	4	Income from investment of tax-exempt bond proceeds	1,336,272			1,336,272
	5	Royalties	130,587			130,587
	6a	(i) Real				
		(ii) Personal				
		Gross rents	701,275			
		Less rental expenses	147,037			
	b	Rental income or (loss)	554,238			
	d	Net rental income or (loss)	554,238			554,238
	7a	(i) Securities				
		(ii) Other				
		Gross amount from sales of assets other than inventory	73,666,000			
		Less cost or other basis and sales expenses	75,875,473			
	b	Gain or (loss)	-2,209,473			
	d	Net gain or (loss)	-2,209,473			-2,209,473
	8a	Gross income from fundraising events (not including \$ 588,012 of contributions reported on line 1c) See Part IV, line 18				
	a		117,631			
	b	Less direct expenses b	280,242			
	c	Net income or (loss) from fundraising events	-162,611			-162,611
	9a	Gross income from gaming activities See Part IV, line 19				
	a					
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances				
	a					
	b	Less cost of goods sold b				
	c	Net income or (loss) from sales of inventory				
	Miscellaneous Revenue		Business Code			
	11a	MISCELLANEOUS REVENUE	900099	5,132,380	3,354,169	1,778,211
	b	APPLICATION SVC PROG	541519	3,252,762		3,252,762
	c	STUDENT FEES & FINES	900099	407,940	407,940	
	d	All other revenue		-434,035		-434,035
	e	Total. Add lines 11a-11d	8,359,047			
	12	Total revenue. See Instructions	938,599,729	759,487,137	4,596,938	47,271,977

Part IX

Statement of Functional Expenses

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

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

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	13,905,231	13,905,231		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	167,905,130	167,905,130		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	34,154,918	34,154,918		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	5,743,726	1,788,262	3,019,064	936,400
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	301,856,001	252,247,470	42,129,920	7,478,611
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	17,944,729	14,966,576	2,525,365	452,788
9	Other employee benefits.	36,425,949	30,099,797	5,336,786	989,366
10	Payroll taxes.	19,822,525	16,370,810	2,909,468	542,247
11	Fees for services (non-employees):				
a	Management.	151,763		151,763	
b	Legal.	2,539,674	334,791	2,204,883	
c	Accounting.	731,118		731,118	
d	Lobbying.	487,696	487,696		
e	Professional fundraising services. See Part IV, line 17.	159,750			159,750
f	Investment management fees.	567,032		567,032	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	35,997,785	29,317,881	6,043,586	636,318
12	Advertising and promotion.	4,107,813	3,852,918	252,056	2,839
13	Office expenses.	28,320,674	22,594,251	5,251,760	474,663
14	Information technology.	15,044,542	12,029,691	2,868,960	145,891
15	Royalties.	1,205,567	1,177,374	28,193	
16	Occupancy.	41,678,762	38,743,733	2,928,004	7,025
17	Travel.	10,329,678	9,202,516	871,251	255,911
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	6,335,287	5,332,120	883,007	120,160
20	Interest.	18,265,000	18,265,000		
21	Payments to affiliates.	35,896,407	35,896,407		
22	Depreciation, depletion, and amortization.	29,193,204	27,187,631	2,005,573	
23	Insurance.	2,912,774	2,487,943	374,912	49,919
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	BAD DEBT EXPENSE	6,848,836	6,848,836		
b	MISCELLANEOUS	5,738,882	2,413,309	2,904,743	420,830
c	RECRUITING	3,169,580	2,956,298	197,969	15,313
d	PROFESSIONAL MEMBERSHIP	1,585,800	1,124,595	408,623	52,582
e	All other expenses	6,570,307	4,811,578	1,345,683	413,046
25	Total functional expenses. Add lines 1 through 24e.	855,596,140	756,502,762	85,939,719	13,153,659
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		26,696	1	28,125
	2	Savings and temporary cash investments		57,786,730	2	46,998,063
	3	Pledges and grants receivable, net		129,807,657	3	115,912,882
	4	Accounts receivable, net		51,513,322	4	54,989,437
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		90,000	5	72,000
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		9,631,539	9	10,591,079
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a998,138,785			
	b	Less accumulated depreciation	10b276,036,160	628,895,757	10c	722,102,625
	11	Investments—publicly traded securities		431,811,633	11	398,164,021
	12	Investments—other securities See Part IV, line 11		62,658,000	12	78,605,000
	13	Investments—program-related See Part IV, line 11		19,782,448	13	24,991,722
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		1,730,088	15	3,576,685
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1,393,733,870	16	1,456,031,639
Liabilities	17	Accounts payable and accrued expenses		141,014,660	17	143,896,213
	18	Grants payable			18	
	19	Deferred revenue		76,122,956	19	74,762,171
	20	Tax-exempt bond liabilities		439,596,679	20	434,484,775
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		6,140,938	23	197,573
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		61,591,235	25	60,665,991
	26	Total liabilities. Add lines 17 through 25		724,466,468	26	714,006,723
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		379,252,579	27	437,231,934
	28	Temporarily restricted net assets		174,139,525	28	187,035,581
	29	Permanently restricted net assets		115,875,298	29	117,757,401
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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		669,267,402	33	742,024,916
	34	Total liabilities and net assets/fund balances		1,393,733,870	34	1,456,031,639

Part XI Reconciliation 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	938,599,729
2	Total expenses (must equal Part IX, column (A), line 25)	2	855,596,140
3	Revenue less expenses Subtract line 2 from line 1	3	83,003,589
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	669,267,402
5	Net unrealized gains (losses) on investments	5	-10,513,373
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	267,298
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	742,024,916

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

Additional Data

Software ID:

Software Version:

EIN: 23-1352630

Name: DREXEL UNIVERSITY

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RENEE AMOORE TRUSTEE	2 00	X						0	0	0
PAUL MEL BAIADA TRUSTEE	2 00	X						0	0	0
ROBERT R BUCKLEY TRUSTEE	2 00	X						0	0	0
RANDALL S BURKERT TRUSTEE	2 00	X						0	0	0
BARRY C BURKHOLDER TRUSTEE	2 00	X						0	0	0
HONORABLE IDA K CHEN TRUSTEE	2 00	X						0	0	0
KATHLEEN P CHIMICLES TRUSTEE	2 00	X						0	0	0
ABBIE DEAN TRUSTEE	2 00	X						0	0	0
NICHOLAS DEBENEDICTIS TRUSTEE	2 00	X						0	0	0
RICHARD J DEPIANO TRUSTEE	2 00	X						0	0	0
GERIANNE TRINGALI DIPIANO TRUSTEE	2 00	X						0	0	0
ROBERT J DRUMMOND TRUSTEE	2 00	X						0	0	0
BRIAN FORD TRUSTEE	2 00	X						0	0	0
SEAN J GALLAGHER TRUSTEE	2 00	X						0	0	0
RICHARD A GREENAWALT CHAIRMAN	2 00	X		X				0	0	0
RICHARD A HAYNE VICE CHAIR	2 00	X		X				0	0	0
NINA HENDERSON TRUSTEE	2 00	X						0	0	0
PATRICIA IMBESI TRUSTEE	2 00	X						0	0	0
JOSEPH H JACOVINI ESQ TRUSTEE	2 00	X						0	0	0
J MICHAEL LAWRIE TRUSTEE	2 00	X						0	0	0
ROBERT J MONGELUZZI TRUSTEE	2 00	X						0	0	0
JOHN A NYHEIM TRUSTEE	2 00	X						0	0	0
DENIS P O'BRIEN TRUSTEE	2 00	X						0	0	0
D HOWARD PIERCE TRUSTEE	2 00	X						0	0	0
CHARLES P PIZZI TRUSTEE	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM T SCHLEYER TRUSTEE	2 00	X						0	0	0
NICHOLAS S SCHORSCH TRUSTEE	2 00	X						0	0	0
STEPHEN A SELLER ESQ TRUSTEE	2 00	X						0	0	0
STANLEY W SILVERMAN VICE CHAIR	2 00	X		X				0	0	0
MANUEL N STAMATAKIS TRUSTEE	2 00	X						0	0	0
CHARLES K VALUTAS TRUSTEE	2 00	X						0	0	0
CELESTINO R PENNONI TRUSTEE	2 00	X						0	0	0
JOHN A FRY PRESIDENT	40 00	X		X				1,058,504	0	186,377
RAPHAEL C LEE TRUSTEE	2 00	X						0	0	0
SALLY J BELLET TRUSTEE	2 00	X						0	0	0
GREGORY S BENTLEY TRUSTEE	2 00	X						0	0	0
CARL M BUCHHOLZ TRUSTEE	2 00	X						0	0	0
DOMENIC M DIPIERO III TRUSTEE	2 00	X						0	0	0
CYNTHIA P HECKSCHER TRUSTEE	2 00	X						0	0	0
ALAN C KESSLER TRUSTEE	2 00	X						0	0	0
THOMAS R KLINE TRUSTEE	2 00	X						0	0	0
ROBERT LEWIS TRUSTEE	2 00	X						0	0	0
JEFFREY T MACALUSO TRUSTEE	2 00	X						0	0	0
MICHAEL A RASHID TRUSTEE	2 00	X						0	0	0
MICHAEL J WILLIAMS TRUSTEE	2 00	X						0	0	0
JOEL KOPPELMAN TRUSTEE	2 00	X						0	0	0
R JOHN CHAPEL TRUSTEE	2 00	X						0	0	0
RICHARD ILL TRUSTEE	2 00	X						0	0	0
MICHAEL J EXLER ESQ SECRETARY	40 00			X				320,367	0	43,406
HELEN BOWMAN SVP FINANCE/CFO/TREASURER	40 00			X				539,548	0	38,406

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK GREENBERG PROVOST	40 00				X			507,047	0	43,406
ELIZABETH DALE SVP INST ADVANCEMENT	40 00				X			408,720	0	35,955
JAMES TUCKER SVP STUDENT LIFE & ADMIN	40 00				X			417,869	0	28,070
JOAN MCDONALD SVP ENROLLMENT MANAGEMENT	40 00				X			377,697	0	28,070
DONNA MURASKO PHD DEAN-SCHOOL OF ARTS & SCIE	40 00				X			384,898	0	29,790
BRIAN KEECH SVP & EXEC DIRECTOR, VP-GO	40 00				X			264,667	0	38,338
LORI DOYLE SVP UNIVERSITY COMMUNICATI	40 00				X			349,925	0	43,374
JOSEPH B HUGHES DEAN-COLLEGE OF ENGINEERING	40 00				X			367,466	0	37,392
JOHN A BIELEC PHD CHIEF INFORMATION OFFICER	40 00					X		360,741	0	28,593
RALPH WALKLING PHD CHAIR-DEPARTMENT OF FINANC	40 00					X		380,198	0	43,406
GEORGE TSETSEKOS PHD DEAN-LEBOW COLLEGE OF BUSI	40 00					X		389,892	0	43,406
DEBORAH CRAWFORD PHD SR VICE PROVOST FOR RESEARCH	40 00					X		366,163	0	31,196
JAMES FLINT JR HEAD COACH, ATHLETICS	40 00					X		444,074	0	38,406
ERIC J OLSON FORMER INTERIM SVP FINANCE	40 00						X	218,860	0	36,286

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

2012

Open to Public Inspection

Name of the organization DREXEL UNIVERSITY	Employer identification number 23-1352630
---	--

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 - Non-functionally integrated
- 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?

(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 supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 2012 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2011 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2012. 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—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
17a 10%-facts-and-circumstances test—2012. 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—2011. 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 IIISupport 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. 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—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
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.** 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).

Facts And Circumstances Test

Explanation

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

2012

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 35c (Proxy Tax), then

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

Name of the organization DREXEL UNIVERSITY	Employer identification number 23-1352630
---	--

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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If “Yes,” describe in Part IV	

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

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

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

Part II-A

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
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															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

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

		(a)	(b)	
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		103,153
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		384,543
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total Add lines 1c through 1i			487,696
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 carry over lobbying and political expenditures from the prior year?	3	

Part III-B

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

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

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	LINE A - VOLUNTEERS DREXEL UNIVERSITY HAS USED VOLUNTEERS TO HELP GET OUR MESSAGE TO ELECTED OFFICIALS STUDENT VOLUNTEERS PARTICIPATE IN ACTIVITIES SUCH AS STUDENT LOBBYING DAY, SPONSORED BY THE ASSOCIATION FOR INDEPENDENT COLLEGES AND UNIVERSITIES, DURING WHICH STUDENTS TRAVEL TO HARRISBURG TO MEET THEIR ELECTED OFFICIALS THIS PROGRAM IS DONE IN CONJUNCTION WITH THE STUDENT GOVERNMENT ASSOCIATION LINE D - MAILINGS TO MEMBERS, LEGISLATORS OR THE PUBLIC IN CASES WHERE LEGISLATION MAY OR WILL AFFECT THE UNIVERSITY, ITS SUBSIDIARIES OR HIGHER EDUCATION IN GENERAL, WE MAKE CONTACT WITH LEGISLATORS THROUGH MAILINGS THESE ARE PERSONALIZED MAILINGS RATHER THAN DIRECT MAIL CAMPAIGNS LINE G - DIRECT CONTACT WITH LEGISLATORS, THEIR STAFFS, GOVERNMENT OFFICIALS, OR A LEGISLATIVE BODY WE HAVE DIRECT CONTACT WITH OUR LEGISLATORS, THEIR STAFFS, AND VARIOUS GOVERNMENT OFFICIALS THROUGHOUT THE YEAR VIA PHONE CALLS, WRITTEN CORRESPONDENCE, AND MEETINGS THE FREQUENCY OF CONTACT DEPENDS ON THE ISSUES AT HAND

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization DREXEL UNIVERSITY	Employer identification number 23-1352630
---	--

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	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
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? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

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 education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

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

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

3

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

4

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

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 section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

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

Part III

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

1a

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

b

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

(i) Revenues included in Form 990, Part VIII, line 1

▶\$ _____

(ii) Assets included in Form 990, Part X

▶\$ 9,011,494

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶\$ _____

b

Assets included in Form 990, Part X

▶\$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

- 3

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

a

☒

Public exhibition

d

☐

Loan or exchange programs

b

☒

Scholarly research

e

☐

Other

c

☒

Preservation for future generations
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

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

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" 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 XIII and complete the following table

	Amount
1c	
1d	
1e	
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 XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back | |
|----|--|---------------|---------------------|---------------------|--------------------|-------------|
| 1a | Beginning of year balance | 364,097,000 | 382,586,000 | 305,402,000 | 290,578,000 | 379,632,000 |
| b | Contributions | 13,767,000 | 4,517,000 | 35,214,000 | 5,991,000 | 6,557,000 |
| c | Net investment earnings, gains, and losses | 28,541,000 | 1,307,000 | 58,733,000 | 26,089,000 | -77,701,000 |
| d | Grants or scholarships | 4,427,242 | 4,420,686 | 4,275,410 | 4,623,190 | 4,840,385 |
| e | Other expenditures for facilities and programs | 11,739,758 | 19,892,314 | 12,487,590 | 12,632,810 | 13,069,615 |
| f | Administrative expenses | | | | | |
| g | End of year balance | 390,238,000 | 364,097,000 | 382,586,000 | 305,402,000 | 290,578,000 |
- 2

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

a

Board designated or quasi-endowment

47 500 %

b

Permanent endowment

29 250 %

c

Temporarily restricted endowment

23 250 %

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

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐

☐

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		54,726,161		54,726,161
b Buildings		798,043,575	190,290,148	607,753,427
c Leasehold improvements		12,011,251	7,101,610	4,909,641
d Equipment		90,002,487	53,028,839	36,973,648
e Other		43,355,311	25,615,563	17,739,748
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				722,102,625

Schedule D (Form 990) 2012

Part XI 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 XIII)	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 XIII)	4b			
c	Add lines 4a and 4b	4c			
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5		

Part XII 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 XIII)	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 XIII)	4b			
c	Add lines 4a and 4b	4c			
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE DREXEL COLLECTION, FOUNDED BY A J DREXEL IN 1892, CONSISTS OF 6,000 OBJECTS. THE FOCUS OF THE COLLECTION IS PRIMARILY 19TH CENTURY EUROPEAN ART INCLUDING PAINTINGS, SCULPTURE, PRINTS AND DRAWINGS, PORCELAIN, SILVER AND FURNITURE. THE DREXEL COLLECTION IS DISPLAYED IN THREE GALLERIES - THE ANTHONY J DREXEL PICTURE GALLERY, THE RINCLIFFE GALLERY AND THE GALLERY IN THE PAUL PECK ALUMNI CENTER. THE GALLERIES ARE OPEN TO THE STUDENTS, FACULTY, STAFF AND THE PUBLIC. OBJECTS FROM THE PERMANENT COLLECTION ARE DISPLAYED IN THE ANTHONY J DREXEL PICTURE GALLERY WHICH IS VISITED BY POTENTIAL STUDENTS AND THEIR FAMILIES - APPROXIMATELY 75 VISITORS DAILY. IN ADDITION, THE GALLERY IS OPEN TO THE PUBLIC DAILY FROM 3:30 - 5:30. THE RINCLIFFE GALLERY DISPLAYS OBJECTS FROM OUR DECORATIVE ARTS COLLECTION. THERE IS A NEW EXHIBITION EVERY TWO MONTHS. THE GALLERY IS OPEN FROM 8:00 AM - 8:00 PM. THE GALLERY IN THE PAUL PECK ALUMNI CENTER IS VISITED BY DREXEL FACULTY AND STAFF FOR MEETINGS AND RECEPTIONS. THERE IS NO CHARGE TO VISIT THE ART COLLECTION IN ANY OF THE GALLERIES.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	DREXEL UNIVERSITY HAD AN ENDOWMENT SPENDING RULE THAT LIMITED THE SPENDING OF ENDOWMENT RESOURCES TO 4.75% OF THE AVERAGE MARKET VALUE OF THE POOLED ENDOWMENT PORTFOLIO FOR THE PRIOR SEVEN FISCAL YEARS. TO THE EXTENT THAT CURRENT YIELD IS INADEQUATE TO MEET THE SPENDING RULE, A PORTION OF CUMULATIVE REALIZED NET GAINS IS AVAILABLE FOR CURRENT USE. ENDOWMENT RESOURCES ARE USED TO FUND SCHOLARSHIPS, ACADEMIC PROGRAMS AND PROFESSORSHIPS.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE UNIVERSITY HAS BEEN GRANTED TAX-EXEMPT STATUS AS A NONPROFIT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, FILES FEDERAL TAX FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX) ANNUALLY. NO PROVISION FOR INCOME TAXES IS REQUIRED IN THE UNIVERSITY FINANCIAL STATEMENTS. THE UNIVERSITY FILES U.S. FEDERAL, STATE AND LOCAL INFORMATION RETURNS AND NO RETURNS ARE CURRENTLY UNDER EXAMINATION. THE STATUTE OF LIMITATIONS ON THE UNIVERSITY'S U.S. FEDERAL INFORMATION RETURNS REMAINS OPEN FOR THREE YEARS FOLLOWING THE YEAR THEY ARE FILED. THE UNIVERSITY AND ITS AFFILIATES DO FROM TIME TO TIME INCUR INCIDENTAL ACTIVITIES THAT ARE SUBJECT TO UNRELATED BUSINESS INCOME FOR WHICH A 990T OR OTHER INCOME TAX RETURN IS FILED, AS APPROPRIATE. THIS PRIMARILY INCLUDES INCOME FROM INVESTMENTS HELD IN THE ENDOWMENT FUND FOR WHICH THE INVESTMENT MANAGER HAS REPORTED UNRELATED BUSINESS INCOME ON A SCHEDULE K-1 ALONG WITH INCOME FROM CERTAIN CONSULTING AND CONFERENCE SERVICES. THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ISSUED ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE UNIVERSITY DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN TAX POSITIONS.

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

2012

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

Part I		YES	NO
<div>1</div> 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	Yes	
	3	Yes	
	4a	Yes	
<div>2</div> 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?	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> 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			

Part III 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
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	DREXEL UNIVERSITY INCLUDES ITS RACIALLY NONDISCRIMINATORY POLICY IN NEWSPAPER AND MAGAZINE ADVERTISING DURING REGISTRATION PERIODS AND IN STUDENT BROCHURES
EXPLANATION OF RACIAL DISCRIMINATION	SCHEDULE E, PART I, LINE 5	DREXEL UNIVERSITY WAS FOUNDED UPON THE PRINCIPLE OF DIVERSITY AS AN EDUCATIONAL GOAL AND REMAINS COMMITTED TO THAT PRINCIPLE TODAY. IN 1892, NOTED FINANCIER, PHILANTHROPIST, AND ADVISOR TO U.S. PRESIDENTS, ANTHONY J. DREXEL CREATED THE DREXEL INSTITUTE OF ART, SCIENCE AND INDUSTRY TO PROVIDE HIGHER EDUCATION TO MEN AND WOMEN OF THE WORKING CLASS WHO WERE NOT WELCOME IN THE COLLEGES AND UNIVERSITIES OF THAT DAY. A. J. DREXEL ENVISIONED A LEARNING ENVIRONMENT IN WHICH YOUNG MEN AND WOMEN WOULD LEARN SKILLS AND ACQUIRE KNOWLEDGE IN SUBJECTS THAT WOULD PREPARE THEM FOR REWARDING CAREERS. DREXEL'S CO-OPERATIVE EDUCATION PROGRAM ENCOURAGES STUDENTS TO LEARN HOW TO WORK TOGETHER BY PLACING THEM IN REAL BUSINESS SETTINGS THAT ARE INCREASINGLY DIVERSE. WE HAVE EMBRACED DIVERSITY BECAUSE WE KNOW THERE IS NO OTHER WAY TO ENSURE OUR STUDENTS ARE PREPARED FOR A DIVERSE WORLD. WE WILL CONTINUE TO HONOR OUR FOUNDERS' VISIONS, CREATING A DIVERSE STUDENT COMMUNITY AS AN ESSENTIAL PART OF OUR MISSION.
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	DREXEL UNIVERSITY RECEIVES FUNDS FROM VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES UNDER THEIR RESPECTIVE STUDENT FINANCIAL AID ASSISTANCE PROGRAMS. FEDERAL PROGRAMS INCLUDE THE PELL GRANT PROGRAM, SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT (SEOG) PROGRAM, COLLEGE WORK STUDY (CWS) PROGRAM AND PERKINS LOAN PROGRAM. THE STATE PROGRAM IS THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE PROGRAM FOR STUDENTS. IN ADDITION, THE UNIVERSITY IS AWARDED SPONSORED RESEARCH AND OTHER GRANTS BY VARIOUS FEDERAL AGENCIES, INCLUDING NSF AND HHS.

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

2012

Open to Public
Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
3a Sub-total	0	0			60,853
b Total from continuation sheets to Part I	0	0			2,630,609
c Totals (add lines 3a and 3b)	0	0			2,691,462

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

[illegible]

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 ► 6

3 Enter total number of other organizations or entities **3**

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	CENTRAL AMERICA AND THE CARIBBEAN	47	664,483	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	EAST ASIA AND THE PACIFIC	1,308	16,300,996	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	EUROPE	237	4,762,109	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	MIDDLE EAST AND NORTH AFRICA	104	1,115,644	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	NORTH AMERICA	49	1,133,392	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	RUSSIA AND NEWLY INDEPENDENT STATES	49	677,382	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	SOUTH AMERICA	62	684,965	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	SOUTH ASIA	494	6,057,488	CREDIT TO STUDENT ACCOUNTS			
SCHOLARSHIPS	SUB-SAHARAN AFRICA	151	2,074,694	CREDIT TO STUDENT ACCOUNTS			
STUDY ABROAD	EUROPE	1	10,000	WIRED			

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ 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

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

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 23-1352630
Name: DREXEL UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EUROPE	0	0	PROGRAM SERVICES	ATHLETICS	16,647
NORTH AMERICA	0	0	PROGRAM SERVICES	ATHLETICS	1,231
EUROPE	0	0	BUSINESS		2,171

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	BUSINESS		1,106
CENTRAL AMERICA	0	0	BUSINESS		7,941
EUROPE	0	0	FUNDRAISING		30,415

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING		1,296
NORTH AMERICA	0	0	FUNDRAISING		46
SOUTH ASIA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	2,389

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	334,025
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	197,571
SOUTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	12,701

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	8,325
CENTRAL AMERICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	4,935
RUSSIA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	3,195

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	10,341
SOUTH ASIA	0	0	PROGRAM SERVICES	RECRUITING	17,262
EUROPE	0	0	PROGRAM SERVICES	RECRUITING	41,305

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RECRUITING	25,250
SOUTH AMERICA	0	0	PROGRAM SERVICES	RECRUITING	13,296
NORTH AMERICA	0	0	PROGRAM SERVICES	RECRUITING	3,444

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RECRUITING	1,344
CENTRAL AMERICA	0	0	PROGRAM SERVICES	RECRUITING	448
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	RECRUITING	3,346

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SOUTH ASIA	0	0	PROGRAM SERVICES	RESEARCH	100,973
EUROPE	0	0	PROGRAM SERVICES	RESEARCH	439,116
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH	196,396

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	11,411
NORTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	200,952
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RESEARCH	267,830

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	0	0	PROGRAM SERVICES	RESEARCH	13,541
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	RESEARCH	1,925
EUROPE	0	0	PROGRAM SERVICES	STUDY ABROAD	429,306

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STUDY ABROAD	9,046
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ATHLETICS	1,806
SUB-SAHARAN AFRICA	0	0	FUNDRAISING		46

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	0	0	PROGRAM SERVICES	STUDY ABROAD	133,595
NORTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	133,807
SOUTH AMERICA	0	0	PROGRAM SERVICES	ATHLETICS	3,083

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	ATHLETICS	2,746
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	ATHLETICS	1,567
SOUTH ASIA	0	0	FUNDRAISING		113

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
RUSSIA	0	0	PROGRAM SERVICES	RECRUITING	3,083
RUSSIA	0	0	PROGRAM SERVICES	RESEARCH	865
SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDY ABROAD	225

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	RESEARCH	123,812	WIRE			
		EUROPE	RESEARCH	25,000	WIRE			
		EAST ASIA AND THE PACIFIC	RESEARCH	100,000	WIRE			
		EUROPE	RESEARCH	15,156	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	RESEARCH	5,211	WIRE			
		SOUTH ASIA	RESEARCH	100,764	WIRE			
		EUROPE	RESEARCH	87,500	WIRE			
		EAST ASIA AND THE PACIFIC	RESEARCH	73,887	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA - CANADA AND MEXICO	RESEARCH	142,436	WIRE			

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. Form 990-EZ filers are not required to complete this part.

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number

23-1352630

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 <input checked="" type="checkbox"/> Mail solicitations	e <input checked="" type="checkbox"/> Solicitation of non-government grants
b <input checked="" type="checkbox"/> Internet and email solicitations	f <input type="checkbox"/> Solicitation of government grants
c <input checked="" type="checkbox"/> Phone solicitations	g <input checked="" type="checkbox"/> Special fundraising events
d <input checked="" type="checkbox"/> In-person solicitations	

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
STOCKADE CONSULTING GROUP INC 650 FRANKLIN STREET SCHENECTADY, NY 12305	TELEMARKETING		No	242,000	159,750	82,250
Total				242,000	159,750	82,250

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

AL, AK, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>11TH STREET FAMILY HEALTH SERVICES</u>	<u>BUSINESS LEADER OF THE YEAR</u>	<u>3</u>	(add col (a) through col (c))	
			(event type)	(event type)	(total number)		
	1	Gross receipts	210,022	209,750	285,871	705,643	
	2	Less Contributions . .	210,022	182,450	195,540	588,012	
	3	Gross income (line 1 minus line 2)		27,300	90,331	117,631	
Direct Expenses	4	Cash prizes			2,700	2,700	
	5	Noncash prizes . . .			11,075	11,075	
	6	Rent/facility costs . .		53,148	88,322	141,470	
	7	Food and beverages .		23,695	11,308	35,003	
	8	Entertainment					
	9	Other direct expenses .	25,630	26,560	37,804	89,994	
	10	Direct expense summary Add lines 4 through 9 in column (d) ►					(280,242)
	11	Net income summary Combine line 3, column (d), and line 10 ►					-162,611

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			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>
	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 _____

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

Name ▶

Address ▶

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

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

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

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

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

Identifier	Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
DREXEL UNIVERSITY

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

2012

Open to Public
Inspection

Employer identification number
23-1352630

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. Part II can be duplicated if additional space is needed.

(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
See Additional Data Table							

2

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

92

3

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

27

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)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	12818	167,808,801			
(2) AWARDS	110	86,329			
(3) RESEARCH GRANT	1	10,000			

Part IV

Supplemental Information.

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE PRINCIPAL INVESTIGATOR HAVING RESPONSIBILITY FOR THE GRANT MONITORS SUBCONTRACTOR PERFORMANCE BASED ON THE PROGRAM'S TASKS AND GOALS THE PRINCIPAL INVESTIGATOR REVIEWS THE PERFORMANCE BEFORE AUTHORIZING THE SUBCONTRACTOR'S INVOICE FOR PAYMENT

Software ID:

Software Version:

EIN: 23-1352630

Name: DREXEL UNIVERSITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
BAYLOR COLLEGE OF MEDICINEONE BAYLOR PLAZA HOUSTON,TX 770303411	74-1613878	501(C)(3)	27,564				RESEARCH
BLOOMSBURG UNIVERSITY 400 EAST SECOND STREET BLOOMSBURG,PA 18660	23-2738930	501(C)(3)	26,220				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
BRANDEIS UNIVERSITY 415 SOUTH STREET WALTHAM,MA 024549110	04-2103552	501(C)(3)	20,530				RESEARCH
BRYN MAWR COLLEGE101 NORTH MERION AVENUE BRYN MAWR, PA 191012899	23-1352621	501(C)(3)	64,063				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
CARNEGIE MELLON UNIVERSITY5000 FORBES AVENUE PITTSBURGH,PA 15213	25-0969449	501(C)(3)	115,398				RESEARCH
CASE WESTERN RESERVE UNIVERSITY10900 EUCLID AVENUE CLEVELAND,OH 441067006	34-1018992	501(C)(3)	204,969				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
CHARLESTON COUNTY SCHOOL DISTRICT3999 BRIDGE VIEW DRIVE NORTH CHARLESTON, SC 29405	57-6000322	COUNTY OF CHARLESTON	20,336				RESEARCH
CHEYNEY UNIVERSITY 1837 UNIVERSITY CIRCLE CHEYNEY,PA 19319	23-2478688	501(C)(3)	93,950				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
CHILDRENS HOSPITAL OF PHILADELPHIA34TH STREET CIVIC CENTER BLVD PHILADELPHIA,PA 19104	23-1352166	501(C)(3)	178,469				RESEARCH
COALITION OF NATIONAL CANCER COOPERATIVE 1818 MARKET STREET SUITE 1100 PHILADELPHIA,PA 19103	23-2935628	501(C)(3)	467,930				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
COLUMBIA UNIVERSITY 615 WEST 131ST STREET 3RD FLOOR NEW YORK,NY 10027	13-5598093	501(C)(3)	119,273				RESEARCH
COMMUNITY COLLEGE OF PHILADELPHIA1700 SPRING GARDEN STREET PHILADELPHIA,PA 19130	23-2612698	501(C)(3)	248,083				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
DANA-FARBER CANCER INSTITUTE44 BINNEY STREET BP414 BOSTON,MA 02115	04-2263040	501(C)(3)	146,521				RESEARCH
DELAWARE STATE UNIVERSITY1200 N DUPONT HIGHWAY DOVER,DE 19901	51-0305893	501(C)(3)	11,189				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
GEORGIA TECH RESEARCH CORP711 MARIETTA STREET ATLANTA,GA 30318	58-6002023	STATE OF GEORGIA	342,286				RESEARCH
JOHNS HOPKINS UNIVERSITY8013 CORPORATE DRIVE SUITE D BALTIMORE,MD 21236	52-0595110	501(C)(3)	988,543				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
KAISER FOUNDATION RESEARCH1800 HARRISON STREET 16TH FLOOR OAKLAND,CA 94612	94-1105628	501(C)(3)	465,259				RESEARCH
MASSACHUSETTS INSTITUTE OF TECHNOLOGY77 MASSACHUSETTS AVENUE CAMBRIDGE,MA 02139	04-2103594	501(C)(3)	200,002				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
MICHIGAN STATE UNIVERSITY360 ADMINISTRATION BUILDING EAST LANSING, MI 488241046	38-6005984	501(C)(3)	70,118				RESEARCH
MOBILE COUNTY PUBLIC SCHOOL1 MAGNUM PASS MOBILE,AL 36618	63-6000774	501(C)(3)	15,646				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
NATIONAL BUREAU OF ECONOMIC RESEARCH 1050 MASSACHUSETTS AVENUE CAMBRIDGE,MA 02138	13-1641075	501(C)(3)	19,435				RESEARCH
NATIONAL JEWISH MEDICAL & RESEARCH 1400 JACKSON STREET DENVER,CO 80206	74-2044647	501(C)(3)	6,386				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
NEW JERSEY INSTITUTE OF TECHNOLOGY2000 PENNINGTON ROAD EWING, NJ 086280718	22-2797398	501(C)(3)	206,935				RESEARCH
PHILADELPHIA HEALTH MANAGEMENT CORP260 SOUTH BROAD STREET 18TH FLOOR PHILADELPHIA, PA 191025085	23-7221025	501(C)(3)	79,333				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
PUBLIC HEALTH INSTITUTE555 12TH STREET 10TH FLOOR OAKLAND,CA 946074046	94-1646278	501(C)(3)	22,725				RESEARCH
REGENTS OF UNIVERSITY OF CALIFORNIAONE SHIELDS AVENUE DAVIS,CA 95616	94-6036494	501(C)(3)	364,931				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
ROTHMAN INSTITUTEPO BOX 757910 PHILADELPHIA, PA 191757910	23-2856880	501(C)(3)	50,000				RESEARCH
SAVANNAH RIVER NUCLEAR SOLUTIONS LLC PO BOX 6809 AIKEN,SC 29808	26-0240191		26,676				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
ST LUKE'S-ROOSEVELT HOSPITAL CENTER1111 AMSTERDAM AVENUE NEW YORK,NY 10025	13-2997301	501(C)(3)	15,911				RESEARCH
SWARTHMORE COLLEGE 500 COLLEGE AVENUE SWARTHMORE,PA 19081	23-1352683	501(C)(3)	67,118				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
TEMPLE UNIVERSITY1805 N BROAD STREET PHILADELPHIA,PA 19122	23-1365971	501(C)(3)	250,142				RESEARCH
NATIONAL FOUNDATION FOR THE CENTERS FOR DISEASE CONTROL AND PREVENTION INC55 PARK PLACE NO 400 ATLANTA,GA 30303	58-2106707	501(C)(3)	66,691				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
THOMAS JEFFERSON UNIVERSITY1020 WALNUT STREET PHILADELPHIA,PA 19107	23-1352651	501(C)(3)	50,046				RESEARCH
TRUSTEES OF UNIVERSITY OF PENNSYLVANIA3451 WALNUT STREET PHILADELPHIA,PA 19104	23-1352685	501(C)(3)	1,273,933				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
REGENERATIVE RESEARCH FOUNDATIONONE DISCOVERY DRIVE RENSSELAER,NY 12144	20-3654626	501(C)(3)	129,035				RESEARCH
UNIVERSITY OF MICHIGAN 500 S STATE STREET ANN ARBOR,MI 48109	38-6006309	501(C)(3)	94,077				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
UNIVERSITY OF CHICAGO 5801 S ELLIS AVENUE CHICAGO,IL 60637	36-2177139	501(C)(3)	99,788				RESEARCH
UNIVERSITY OF DELAWARE222 SOUTH CHAPEL STREET NEWARK,DE 19716	51-6000297	501(C)(3)	587,709				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
UNIVERSITY OF ILLINOIS 506 S WRIGHT 209 HAB MC339 URBANA,IL 61801	37-6000511	501(C)(3)	343,115				RESEARCH
UNIVERSITY OF MARYLAND220 ARCH STREET 13TH FLOOR ROOM 02-128 BALTIMORE,MD 21201	52-6002033	501(C)(3)	74,172				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
UNIVERSITY OF MEDICINE AND DENTISTRYPO BOX 3009 NEWARK,NJ 071030009	22-1775306	501(C)(3)	10,916				RESEARCH
UNIVERSITY OF PITTSBURGH116 ATWOOD STREET SUITE 201 PITTSBURGH,PA 15260	25-0965591	501(C)(3)	58,107				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
UNIVERSITY OF TENNESSEE301 ANDY HOLT TOWER KNOXVILLE, TN 379960100	62-6001636	501(C)(3)	104,419				RESEARCH
UNIVERSITY OF TEXAS HEALTH CENTER AT TYLER 11937 US HIGHWAY 271 TYLER,TX 757083154	75-6001354	501(C)(3)	49,304				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
UNIVERSITY OF WASHINGTON3903 BROOKLYN AVENUE NE SEATTLE,WA 981056694	91-6001537	501(C)(3)	40,614				RESEARCH
WEST TEXAS A & M UNIVERSITYWT BOX 60999 CANYON,TX 79016	75-6031405	501(C)(3)	42,596				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
RUTGERS UNIVERSITY120 ALBANY STREET NEW BRUNSWICK, NJ 08901	23-7318742	501(C)(3)	31,580				RESEARCH
GREATER PHILADELPHIA URBAN AFFAIRS COALITION1207 CHESTNUT STREET 7TH FLOOR PHILADELPHIA,PA 19107	23-7046393	501(C)(3)	82,026				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
COLBY COLLEGE4120 MAYFLOWER HILL WATERVILLE,ME 04901	01-0211497	501(C)(3)	30,616				RESEARCH
WPVI4100 CITY LINE AVENUE PHILADELPHIA,PA 19131	23-6444850	501(C)(3)	63,000				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
TT GOVERNMENT SOLUTIONS INC DBA APPLIED COMMUNICATION SCIENCES150 MOUNT AIRY ROAD BASKING RIDGE,NJ 07920	45-2826612		453,074				RESEARCH
SCIENTIFIC RESEARCH CORP2300 WINDY RIDGE PARKWAY SUITE 400 SOUTH ATLANTA,GA 30339	76-0255801		916,553				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
RESEARCH FOUNDATION FOR MENTAL HYGIENE INC 150 BROADWAY NO 301 MENANDS,NY 12204	14-1410842	501(C)(3)	27,970				RESEARCH
RESEARCH FOUNDATION OF CUNY230 WEST 41ST STREET NEW YORK,NY 10036	13-1988190	501(C)(3)	101,849				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
NEUROPSYCHIATRIC RESEARCH INSTITUTE700 FIRST AVENUE SOUTH FARGO,ND 58103	45-0274828	501(C)(3)	8,621				RESEARCH
SPECIALTY SYSTEMS1451 ROUTE 37 WEST TOMS RIVER,NJ 08755	22-2247050		10,979				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
NEW MEXICO STATE UNIVERSITYPO BOX 3590 LAS CRUCES,NM 88003	85-0170157	501(C)(3)	148,492				RESEARCH
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER HOUSTON7000 FANNIN SUITE 1200 HOUSTON,TX 77030	74-1761309		116,380				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER1515 HOLCOMBE BLVD HOUSTON,TX 77030	74-6001118		30,466				RESEARCH
NEW YORK UNIVERSITY 105 E 17TH STREET - 4TH FLOOR NEW YORK,NY 10003	13-5562308	501(C)(3)	133,179				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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NORTHWESTERN UNIVERSITY633 CLARK STREET EVANSTON,IL 60208	36-2167817	501(C)(3)	41,228				RESEARCH
INOVIO PHARMACEUTICALS1787 SENTRY PKY BLDG 18 SUITE 400 BLUE BELL,PA 19422	33-0969592		130,089				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
RICE UNIVERSITY6100 MAIN STREET HOUSTON,TX 77005	74-1109620	501(C)(3)	117,694				RESEARCH
BATTELLE MEMORIAL INSTITUTE505 KING AVENUE COLUMBUS,OH 43201	31-4379427	501(C)(3)	71,739				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
PATHWAYS PROGRAM310 ALMOSLAND ROAD HOLMES,PA 19043	23-2001837	501(C)(3)	9,915				RESEARCH
PENNSYLVANIA STATE UNIVERSITY408 OLD MAIN UNIVERSITY PARK,PA 16802	24-6000376	115	8,826				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
ARTSTOR INC151 EAST 61ST STREET NEWYORK,NY 10065	30-0152767	501(C)(3)	11,125				RESEARCH
CLEVELAND CLINIC9500 EUCLID AVENUE NO JJ19 CLEVELAND,OH 44195	34-0714585	501(C)(3)	15,376				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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EDESIGN DYNAMICS338 WEST 39TH STREET 10TH FLOOR NEW YORK,NY 10018	45-0511045		135,812				RESEARCH
FRONTIER SCIENCE & TECH RESEARCH FOUNDATION 900 COMMONWEALTH AVENUE BOSTON,MA 02215	16-1056814	501(C)(3)	616,825				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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HOWARD UNIVERSITY2400 6TH STREET NW WASHINGTON,DC 20059	53-0204707	501(C)(3)	52,557				RESEARCH
INSTITUTE FOR HEPATITIS AND VIRUS RESEARCH 3805 OLD EASTON ROAD DOYLESTOWN,PA 18902	06-1671347	501(C)(3)	254,849				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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KENNEDY KRIEGER INSTITUTE INC707 N BROADWAY BALTIMORE,MD 21205	52-1524965	501(C)(3)	74,999				RESEARCH
KLING STUBBINS INC2301 CHESTNUT STREET PHILADELPHIA,PA 19103	23-1711665		34,241				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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LANCASTER GENERAL HOSPITAL555 NORTH DUKE STREET LANCASTER,PA 17604	23-1365353	501(C)(3)	5,696				RESEARCH
MEDICAL DIAGNOSTICS LAB2439 KUSER ROAD HAMILTON,NJ 08690	22-3510467		39,820				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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OHIO STATE UNIVERSITY 1960 KENNY ROAD COLUMBUS,OH 43210	31-6025986		98,413				RESEARCH
PA CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS1400 N PROVIDENCE ROAD MEDIA,PA 19063	23-7135840	501(C)(3)	74,437				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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PHILADELPHIA HOUSING AUTHORITY12 SOUTH 23RD STREET PHILADELPHIA,PA 19103	23-6003266		79,146				RESEARCH
PRESIDENT AND FELLOWS OF HARVARD CO1033 MASSACHUSETTS AVENUE THRID FLOOR CAMBRIDGE,MA 02138	04-2103580	501(C)(3)	118,035				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
PROSERVICES CORP700 SOUTH CLINTON AVENUE TRENTON,NJ 08611	22-3845815		8,000				RESEARCH
PURDUE UNIVERSITY401 S GRANT STREET WEST LAFAYETTE,IN 47907	35-6002041	501(C)(3)	94,494				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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RENSSELAER POLYTECHNIC INST110 EIGHTH STREET TROY,NY 12180	14-1340095	501(C)(3)	48,756				RESEARCH
RESEARCH FOUNDATION OF SUNYPO BOX 9 ALBANY,NY 12201	14-1368361	501(C)(3)	49,231				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SINAI HOSPITAL OF BALTIMORE INC2401 WEST BELVEDERE AVENUE BALTIMORE,MD 21215	52-0486540	501(C)(3)	25,000				RESEARCH
SWEET BRIAR COLLEGEPO BOX 1051 SWEET BRIAR,VA 24595	54-0534105	501(C)(3)	14,500				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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TENNESSEE ORTHOPAEDIC FOUNDATIONPO BOX 30974 KNOXVILLE,TN 37930	26-4245045	501(C)(3)	12,750				RESEARCH
TEXAS ENGINEERING EXPERIMENT STATION301 TARROW STREET COLLEGE STATION,TX 77840	74-2648747		9,112				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF GEORGIA 210 S JACKSON STREET ATHENS,GA 30602	58-6001998		5,066				RESEARCH
UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY GARDENS LOS ANGELES,CA 90089	95-1642394	501(C)(3)	51,040				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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VILLANOVA UNIVERSITY 800 LANCASTER AVENUE VILLANOVA,PA 19085	23-1352688	501(C)(3)	13,868				RESEARCH
VIRGINIA POLYTECH INSTITUTE201 SOUTHGATE CENTER BLACKSBURG,VA 24061	54-6001805		156,642				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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ZIMMERMAN CONSULTING GROUP LLC1000 S 4TH STREET LEAVENWORTH,KS 66048	68-0598084		22,282				RESEARCH
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER SAN ANTONIO201 W 7TH STREET AUSTIN,TX 78701	74-1586031		6,673				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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MONTGOMERY COUNTY COMMUNITY ACTION DEVELOPMENT COMMISSION113 E MAIN STREET NORRISTOWN,PA 19401	23-1689892	501(C)(3)	20,813				RESEARCH
MURRAY STATE UNIVERSITY200 SPARKS HALL MURRAY,KY 42071	61-1005783	501(C)(3)	13,273				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(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
AERODYN RESEARCH INC 45 MANNING ROAD BILLERICA,MA 01821	04-2471226		159,863				RESEARCH
AMERICAN WATER WORKS COMPANY INC1025 LAUREL OAK ROAD VOORHEES,NJ 08043	04-3207700		33,000				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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BALL STATE UNIVERSITY 2000 W UNIVERSITY AVENUE MUNCIE, IN 47306	35-6000221	501(C)(3)	58,774				RESEARCH
BATON ROUGE ORTHOPAEDIC CLINIC LLC 8080 BLUEBONNET BLVD BATON ROUGE, LA 70810	72-1460193		20,000				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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CHARLES LOOMIS CHARISS MCAFEE ARCHITECTS1906 RITTENHOUSE SQ PHILADELPHIA,PA 19103	23-3025211		16,067				RESEARCH
CITYLIGHTS NETWORK 6330 PASCHALL AVENUE PHILADELPHIA,PA 19142	27-0182908	501(C)(3)	7,337				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION 301 PETERSON SERVICE BUILDING LEXINGTON,KY 40506	61-6033693	501(C)(3)	37,761				RESEARCHRESEARCH
UNIVERSITY OF CONNECTICUT2390 ALUMNI DRIVE STORRS,CT 06269	06-6070722	501(C)(3)	92,088				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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EMORY UNIVERSITY1599 CLIFTON ROAD 3RD FLOOR ATLANTA,GA 30322	58-0566256	501(C)(3)	106,167				RESEARCH
THE GEORGE WASHINGTON UNIVERSITY45155 RESEARCH PLACE ASHBURN,VA 20147	53-0196584	501(C)(3)	15,783				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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GREATER PHILADELPHIA COALITION AGAINST HUNGER1725 FAIRMOUNT AVENUE NO 1023 PHILADELPHIA,PA 19130	26-2727680	501(C)(3)	5,198				RESEARCH
HARTZBAND CENTER FOR HIP & KNEE REPLACEMENT LLC10 FOREST AVENUE PARAMUS,NJ 07652	16-1635466		50,000				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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INDIANA UNIVERSITYPO BOX 500 BLOOMINGTON,IN 47402	35-6018940	501(C)(3)	25,208				RESEARCH
INDIANAPOLIS MUSEUM OF ART4000 MICHIGAN ROAD INDIANAPOLIS,IN 46208	35-0867955	501(C)(3)	8,624				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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IOWA UNIVERSITY2505 UNIVESITY BOULEVARD PO BOX 2230 AMES,IA 50010	42-1143702	501(C)(3)	48,364				RESEARCH
J COMPUTING INC276 W SCHWAB AVE HOMESTEAD,PA 15120	80-0599027		264,927				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JACKSON LABORATORY 600 MAIN STREET BAR HARBOR,ME 04609	01-0211513	501(C)(3)	50,000				RESEARCH
JEWISH HOSPITAL & ST MARY'S HEALTHCARE539 S 4TH STREET LOUISVILLE,KY 40202	61-1029768	501(C)(3)	18,000				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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MADISON AREA TECHNICAL COLLEGE1701 WRIGHT STREET MADISON,WI 53704	23-7265867	501(C)(3)	8,753				RESEARCH
MIRIAM HOSPITAL164 SUMMIT AVENUE PROVIDENCE,RI 02906	05-0258905	501(C)(3)	22,335				RESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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DARTMOUTH COLLEGE7 LEBANON STREET SUITE 302 NO 6015 HANOVER,NH 03755	02-0222111	501(C)(3)	119,682				RESEARCH
UNIVERSITY OF LOUISIANA LAFAYETTE POST OFFICE DRAWER 44290 ULL LAFAYETTE,LA 70504	72-6023836	501(C)(3)	5,000				RESEARCHRESEARCH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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COUGAAR SOFTWARE INC 7621 VIRGINIA AVE FALLS CHURCH,VA 22043	54-2020473		38,800				RESEARCH

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate 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</div><div><div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>1b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</div></div>		No
<div><div>2</div><div>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?</div></div>	Yes	
<div><div>3</div><div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</div><div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div><div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>		
<div><div>4</div><div>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</div></div>		
<div><div>4a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>4b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>	Yes	
<div><div>4c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>		No
<div><div></div><div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div></div>		
<div><div>5</div><div>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</div></div>		
<div><div>5a</div><div>The organization?</div></div>		No
<div><div>5b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>		No
<div><div>6</div><div>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</div></div>		
<div><div>6a</div><div>The organization?</div></div>		No
<div><div>6b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>		No
<div><div>7</div><div>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</div></div>		No
<div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</div></div>		No
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div></div>		

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

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

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

(A) Name and Title		(B) Breakdown of 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 as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	UNIVERSITY POLICY AUTHORIZES BUSINESS OR FIRST-CLASS TRAVEL FOR ALL EMPLOYEES WHEN FLIGHTS EXCEED FIVE HOURS IN DURATION WITH THE APPROPRIATE APPROVAL IN ADVANCE. ON AN INFREQUENT BASIS, THE PRESIDENT'S SPOUSE MAY TRAVEL WITH THE PRESIDENT FOR BUSINESS REASONS WHEN FULFILLING OBLIGATIONS OF HER UNIVERSITY POSITION. THE PRESIDENT IS PROVIDED HOUSING AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE UNIVERSITY. PERSONAL SERVICES FOR MAID/CLEANING SERVICES ARE PROVIDED FOR THE HOUSE AS UNIVERSITY RELATED EVENTS AND ACTIVITIES ARE HELD AT THE RESIDENCE. THE PRESIDENT IS ALSO PROVIDED A DRIVER TO ATTEND UNIVERSITY RELATED EVENTS. THE PRESIDENT RECEIVES SOCIAL CLUB MEMBERSHIPS FOR BUSINESS-RELATED ACTIVITIES. THE SR VP FOR FINANCE/TREASURER/CFO RECEIVED A HOUSING ALLOWANCE THAT IS TREATED AS TAXABLE COMPENSATION. SOCIAL CLUB DUES FOR BUSINESS-RELATED ACTIVITIES WERE PROVIDED FOR SENIOR VICE PRESIDENTS AND DEANS WHICH ARE TREATED AS NON-TAXABLE COMPENSATION.
	PART I, LINE 1B	HOUSING ALLOWANCES AND SOCIAL CLUB MEMBERSHIPS WERE APPROVED BY THE PRESIDENT OR PROVOST.
SUPPLEMENTAL INFORMATION	PART III	PART I, LINE 4B AND PART II, COLUMN C: THE UNIVERSITY WILL PROVIDE JOHN FRY WITH DEFERRED COMPENSATION. THE UNIVERSITY SHALL CREDIT MR. FRY WITH \$100,000 ON JULY 31, 2011, AND ON EACH FOLLOWING JULY 31 THROUGH 2015 WHILE HE REMAINS EMPLOYED BY THE UNIVERSITY AS PRESIDENT AND CHIEF EXECUTIVE OFFICER. VESTING AND PAYMENT OF THE DEFERRED COMPENSATION, AS ADJUSTED FOR EARNINGS, GAINS, AND LOSSES BASED ON DEEMED INVESTMENT OPTIONS SELECTED IN ADVANCE BY MR. FRY, SHALL OCCUR ON JULY 31, 2015, PROVIDED MR. FRY IS EMPLOYED BY THE UNIVERSITY ON THAT DATE. IN THE EVENT MR. FRY'S EMPLOYMENT WITH THE UNIVERSITY IS TERMINATED PRIOR TO JULY 31, 2015 ON ACCOUNT OF DEATH, DISABILITY, NON-RENEWAL OF THIS AGREEMENT BY THE UNIVERSITY, OR TERMINATION OF HIS EMPLOYMENT BY THE UNIVERSITY OTHER THAN FOR CAUSE, THE DEFERRED COMPENSATION, AS ADJUSTED FOR EARNINGS, GAINS AND LOSSES, SHALL BECOME VESTED AND PAYABLE UPON HIS TERMINATION OF EMPLOYMENT. IN THE EVENT MR. FRY VOLUNTARILY TERMINATES HIS EMPLOYMENT WITH THE UNIVERSITY PRIOR TO JULY 31, 2015, OR THE UNIVERSITY TERMINATES MR. FRY'S EMPLOYMENT FOR CAUSE, THE DEFERRED COMPENSATION SHALL BE FORFEITED. IN ADDITION, IN RECOGNITION OF AND CONSIDERATION FOR THE GOODS AND VALUABLE SERVICES MR. FRY HAS PROVIDED, AND WILL CONTINUE TO PROVIDE, TO THE UNIVERSITY DURING HIS EMPLOYMENT, THE UNIVERSITY AGREES TO PROVIDE MR. FRY WITH CERTAIN SUPPLEMENTAL RETIREMENT AND DEATH BENEFITS, EFFECTIVE AS OF JULY 1, 2012. MR. FRY'S ACCOUNT SHALL BE CREDITED WITH AN ALLOCATION BY THE UNIVERSITY IN THE FALL OF EACH YEAR (AND NOT LATER THAN DECEMBER 15), BEGINNING IN THE FALL OF 2013, AND ENDING IN THE FALL OF 2020, IN ACCORDANCE WITH THE FOLLOWING FORMULA: THE ALLOCATION FOR EACH YEAR SHALL BE CONDITIONED ON MR. FRY'S CONTINUED EMPLOYMENT THROUGH THE END OF THE FISCAL YEAR ENDING ON THE IMMEDIATELY PRECEDING JUNE 30 (OR UPON THE DATE OF DEATH, TOTAL DISABILITY, OR INVOLUNTARY TERMINATION, IF EARLIER). THE FORMULA IS 11% OF THE SUM OF MR. FRY'S PAID COMPENSATION (BASE SALARY AND ANNUAL PERFORMANCE BONUS (IF ANY)) FOR THE FISCAL YEAR ENDING ON THE IMMEDIATELY PRECEDING JUNE 30 THAT IS IN EXCESS OF THE COMPENSATION LIMIT UNDER SECTION 401(A)(17) OF THE INTERNAL REVENUE CODE AS IN EFFECT DURING SUCH PERIOD IN DETERMINING THE MAXIMUM COMPENSATION UNDER THE UNIVERSITY'S PENSION PLAN.

Software ID:
Software Version:
EIN: 23-1352630
Name: DREXEL UNIVERSITY

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				
JOHN A FRY	(i) (ii)	714,120 0	200,000 0	144,384 0	170,067 0	16,310 0	1,244,881 0	0 0
MICHAEL J EXLER ESQ	(i) (ii)	275,367 0	45,000 0	0 0	27,500 0	15,906 0	363,773 0	0 0
HELEN BOWMAN	(i) (ii)	376,765 0	70,000 0	92,783 0	22,500 0	15,906 0	577,954 0	0 0
MARK GREENBERG	(i) (ii)	457,047 0	50,000 0	0 0	27,500 0	15,906 0	550,453 0	0 0
ELIZABETH DALE	(i) (ii)	348,720 0	60,000 0	0 0	27,500 0	8,455 0	444,675 0	0 0
JAMES TUCKER	(i) (ii)	357,869 0	60,000 0	0 0	27,500 0	570 0	445,939 0	0 0
JOAN MCDONALD	(i) (ii)	317,697 0	60,000 0	0 0	27,500 0	570 0	405,767 0	0 0
DONNA MURASKO PHD	(i) (ii)	334,898 0	50,000 0	0 0	27,500 0	2,290 0	414,688 0	0 0
BRIAN KEECH	(i) (ii)	229,667 0	35,000 0	0 0	22,500 0	15,838 0	303,005 0	0 0
LORI DOYLE	(i) (ii)	304,925 0	45,000 0	0 0	27,500 0	15,874 0	393,299 0	0 0
JOSEPH B HUGHES	(i) (ii)	325,582 0	30,000 0	11,884 0	22,500 0	14,892 0	404,858 0	0 0
JOHN A BIELEC PHD	(i) (ii)	323,741 0	37,000 0	0 0	27,500 0	1,093 0	389,334 0	0 0
RALPH WALKLING PHD	(i) (ii)	380,198 0	0 0	0 0	27,500 0	15,906 0	423,604 0	0 0
GEORGE TSETSEKOS PHD	(i) (ii)	389,892 0	0 0	0 0	27,500 0	15,906 0	433,298 0	0 0
DEBORAH CRAWFORD PHD	(i) (ii)	326,163 0	40,000 0	0 0	22,500 0	8,696 0	397,359 0	0 0
JAMES FLINT JR	(i) (ii)	409,074 0	35,000 0	0 0	22,500 0	15,906 0	482,480 0	0 0
ERIC J OLSON	(i) (ii)	213,860 0	5,000 0	0 0	20,448 0	15,838 0	255,146 0	0 0

Schedule K (Form 990)	<div>Supplemental Information on Tax Exempt Bonds</div> <div>▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.</div> <div>▶ Attach to Form 990. ▶ See separate instructions.</div>	OMB No 1545-0047
		2012
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization DREXEL UNIVERSITY	Employer identification number 23-1352630
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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	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2011A	23-2243852	70917RX75	05-16-2011	160,304,025	NEW CONSTR/BLDG RENOV/REFUNDING OF 1997, 1998, 1998-2, 2003B		X		X		X
B	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2007B	23-2243852	70917RNP6	10-04-2007	30,000,000	SCIENCE BLDG/DORMITORY/WELLNESS CENTER		X		X		X
C	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2007A	23-2243852	70917RMJ1	10-04-2007	96,463,410	SCIENCE BLDG/DORMITORY/WELLNESS CENTER		X		X		X
D	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2005A&B	23-2243852	70917N3B8	02-16-2005	61,312,145	CAPITAL IMPROVEMENTS/EQUIPMENT/ADV REFUNDING OF 1997/1999 BONDS		X		X		X

Part II

Proceeds

				A		B		C		D	
1	Amount of bonds retired			2,590,000		2,325,000				3,065,000	
2	Amount of bonds legally defeased			250,000							
3	Total proceeds of issue			161,953,371		30,572,813		98,251,163		63,310,555	
4	Gross proceeds in reserve funds										
5	Capitalized interest from proceeds			2,700,000		2,700,000		9,022,947			
6	Proceeds in refunding escrows										
7	Issuance costs from proceeds			1,386,270		285,425		835,415		833,218	
8	Credit enhancement from proceeds			11,508		11,508		1,529,000		879,260	
9	Working capital expenditures from proceeds										
10	Capital expenditures from proceeds			77,105,897		27,483,553		86,701,839		31,998,410	
11	Other spent proceeds			59,095,696						34,167,910	
12	Other unspent proceeds			24,365,508							
13	Year of substantial completion			2012		2012		2012		2012	
14	Were the bonds issued as part of a current refunding issue?			Yes	No	Yes	No	Yes	No	Yes	No
				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		X	X	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X						X	
c	Are there any research agreements that may result in private business use of bond-financed property?		X	X		X		X	
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X		X		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%		0 00000%		0%		0%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0%		0 00000%		0 00000%		0%	
6	Total of lines 4 and 5	0%		0 00000%		0%		0%	
7	Does the bond issue meet the private security or payment test?		X		X		X		X
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X	X	
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X		X		
b	Exception to rebate?		X		X		X		
c	No rebate due?	X		X		X			
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X		X			X	X	
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X	X	
b	Name of provider	WELLS FARGO BANK							
c	Term of hedge	19 8000000000000						19 8000000000000	
d	Was the hedge superintegrated?		X						X
e	Was a hedge terminated?		X						X

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X	X	
b	Name of provider	ROYAL BANK OF CANADA						ROYAL BANK OF CANADA	
c	Term of GIC	2 500000000000						2 500000000000	
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X						X	
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X	X	
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V

Procedures To Undertake Corrective Action

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

Part VI

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

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION		PART II, LINE 3, COLUMNS B, C, & D THE TOTAL PROCEEDS EXCEEDS THE ISSUE PRICE BECAUSE OF THE INVESTMENT EARNINGS ON THE PROJECT FUND PART II, LINE 12, COLUMNS A & B THE OTHER SPENT PROCEEDS RELATE TO THE REFUNDING PROCEEDS OF EACH ISSUE PART IV, LINE 2C, COLUMN A THE FINAL REBATE REPORT WAS COMPLETED ON 6/5/2013, WHICH DETERMINED THE ISSUE MET THE 6 MONTH SPENDING EXCEPTION PART IV, LINE 2C, COLUMN B THE FINAL REBATE REPORT WAS COMPLETED ON 6/7/2013 PART IV, LINE 2C, COLUMN C THE FINAL REBATE REPORT WAS COMPLETED ON 8/16/2012 PART IV, LINE 2C, COLUMN D THE FINAL REBATE REPORT WAS COMPLETED ON 9/28/2012

Schedule K (Form 990)	<div>Supplemental Information on Tax Exempt Bonds</div> <div>▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.</div> <div>▶ Attach to Form 990. ▶ See separate instructions.</div>	OMB No 1545-0047
		2012
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization DREXEL UNIVERSITY	Employer identification number 23-1352630
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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 PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2012	23-2243852	70917SCB7	10-18-2012	33,242,964	REFUND ISSUES DATED 12/23/2002 & 2/03/2003		X		X		X

Part II Proceeds									
		A		B		C		D	
1	Amount of bonds retired	2,605,000							
2	Amount of bonds legally defeased								
3	Total proceeds of issue	33,242,964							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	415,332							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds	32,827,632							
12	Other unspent proceeds								
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	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						
2	Are there any lease arrangements that may result in private business use of bond-financed property?	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							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
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 %		%		%		%	
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 %		%		%		%	
6	Total of lines 4 and 5	0 %		%		%		%	
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?	X							
c	No rebate due?	X							
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?	X							

Part V

Procedures To Undertake Corrective Action

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

Part VI

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

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number

23-1352630

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

2

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

\$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

\$

Part II

Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e)Original principal amount	(f)Balance due	(g) In default?		(h) Approved by board or committee?		(i)Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) DR JOSEPH B HUGHES	KEY EMPLOYEE	PERSONAL		X	90,000	72,000		No	Yes		Yes	
Total						72,000						

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 assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		2,000	GRANT-IN-AID	EDUCATIONAL
(2)		20,460	TUITION REMISSION	EDUCATIONAL
(3)		1,000	ALUMNI GRADUATE AWARD	EDUCATIONAL
(4)		5,000	ENDOWED SCHOLARSHIP	EDUCATIONAL

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
(1) PECO ENERGY COMPANY	TRUSTEE	959,003	ELECTRICITY		No
(2) DR MIMI B SELLER	FAMILY MEMBER OF TRUSTEE	107,638	COMPENSATION		No
(3) VICTOR TRINGALI	FAMILY MEMBER OF TRUSTEE	121,604	COMPENSATION		No
(4) DUANE MORRIS LLP	TRUSTEE	141,156	LEGAL FEES		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		80,850	FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	31	2,653,805	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests	X	2	9,072,800	FAIR MARKET VALUE
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>EQUIPMENT</u>)	X	5	1,422,500	FAIR MARKET VALUE
OTHER GIFTS IN				
26 Other ► (<u>KIND</u>)	X	19	8,351	FAIR MARKET VALUE
27 Other ► (<u> </u>)				
28 Other ► (<u> </u>)				
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			15
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 noncash contributions?	32a		No	
b If "Yes," describe in Part II				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

Supplemental Information.

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTIONS	PART I, COLUMN (B)	DREXEL UNIVERSITY IS REPORTING THE ACTUAL NUMBER OF CONTRIBUTORS IN COLUMN B

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

2012

Open to Public Inspection

Name of the organization

DREXEL UNIVERSITY

Employer identification number

23-1352630

Identifier	Return Reference	Explanation
	FORM 990, PART V, LINES 7G & 7H	NOT APPLICABLE
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS PREPARED BY THE TAX OFFICE AND SUBMITTED TO THE SENIOR VICE PRESIDENT FOR FINANCE/TREASURER/CHIEF FINANCIAL OFFICER FOR REVIEW AND SIGNING PRIOR TO FILING, FORM 990 AND ALL REQUIRED SCHEDULES ULTIMATELY FILED WITH THE INTERNAL REVENUE SERVICE WERE AVAILABLE TO EACH MEMBER OF THE BOARD OF TRUSTEES FOR THEIR REVIEW AND COMMENT
	FORM 990, PART VI, SECTION B, LINE 12C	DREXEL UNIVERSITY'S CONFLICT OF INTEREST POLICY APPLIES TO ALL EMPLOYEES (WHETHER A KEY EMPLOYEE OR NOT), OFFICERS, AND TRUSTEES OF THE UNIVERSITY. THE CONFLICT OF INTEREST POLICY IS INTENDED TO SATISFY COMPLIANCE REQUIREMENTS AND GUIDE UNIVERSITY PERSONNEL IN AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT. THE KEY TO AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT IS TO MAKE COLLEGE AND UNIVERSITY PERSONNEL AWARE OF WHAT CONSTITUTES A CONFLICT OF INTEREST AND FOR THEM TO DISCLOSE POTENTIAL SITUATIONS BEFORE THE ACTIVITY IS UNDERTAKEN. THE FORMAT FOR THE DISCLOSURE IS FOR EACH EMPLOYEE, OFFICER OR TRUSTEE TO COMPLETE A QUESTIONNAIRE ANNUALLY. THE COMPLETED QUESTIONNAIRE IS SUBMITTED TO THE HUMAN RESOURCES DEPARTMENT IN THE CASE OF EMPLOYEES AND REVIEWED BY THE OFFICE OF THE GENERAL COUNSEL. COMPLETED QUESTIONNAIRES FOR OFFICERS AND TRUSTEES ARE SUBMITTED DIRECTLY TO THE OFFICE OF THE GENERAL COUNSEL FOR REVIEW. AFTER REVIEW AND DETERMINATION IS MADE AS TO WHETHER A CONFLICT OF INTEREST EXISTS AND AT WHAT LEVEL, THOSE CONFLICTS THAT ARE DETERMINED TO BE DETRIMENTAL TO THE UNIVERSITY ARE DISCUSSED WITH THE EMPLOYEE AND THE EMPLOYEE IS ENCOURAGED TO TERMINATE THE ACTIVITY. EMPLOYEES WHO WILLINGLY OR OTHERWISE CONTINUE TO VIOLATE THE CONFLICT OF INTEREST POLICY ARE SUBJECT TO DISCIPLINARY ACTION UP TO AND INCLUDING SUSPENSION WITHOUT PAY, DEMOTION OR TERMINATION OF EMPLOYMENT. IN THE CASE OF TRUSTEES, A CONFLICT OF INTEREST QUESTIONNAIRE IS MAILED ANNUALLY. TRUSTEES ARE REQUIRED TO COMPLETE THE QUESTIONNAIRE AND DISCLOSE ANY INTERESTS IN ANY CORPORATION, PARTNERSHIP OR OTHER ORGANIZATION IN WHICH THEY OWN OR CONTROL 5% OR MORE OF THE ENTITY. IT IS THE POLICY OF THE UNIVERSITY NOT TO CONTRACT WITH OR ENTER INTO A COMMERCIAL RELATIONSHIP WITH ANY TRUSTEE OR CORPORATION, PARTNERSHIP, PROPRIETORSHIP OR OTHER ORGANIZATION IN WHICH SUCH TRUSTEE HAS AN INTEREST AS AN OFFICER, DIRECTOR, PARTNER, EMPLOYEE, OWNER, OR CONTROLLING STOCKHOLDER.
	FORM 990, PART VI, SECTION B, LINE 15	DREXEL IS COMMITTED TO COMPENSATING ITS EXECUTIVE TEAM AT A FAIR AND COMPETITIVE LEVEL. TO MEET THIS GOAL, DREXEL UNIVERSITY'S HUMAN RESOURCES DEPARTMENT PREPARES AN EXECUTIVE COMPENSATION ANALYSIS ANNUALLY USING THE COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION OF HUMAN RESOURCES (CUPA) SURVEY AND IRS FORM 990 INFORMATION AS THEY RELATE TO THE UNIVERSITY'S PEER GROUPS. POSITIONS INCLUDED IN THE ANALYSIS WERE THE PRESIDENT, SECRETARY, TREASURER, SENIOR VICE PRESIDENTS, CHIEF INFORMATION OFFICER AND HIGHLY-COMPENSATED DEANS. USING THE EXECUTIVE COMPENSATION ANALYSIS, A THIRD-PARTY ADVISOR PREPARED A REPORT AND SUBMITTED THE REPORT TO THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES (THE "COMMITTEE") ALONG WITH CERTAIN PERFORMANCE CRITERIA. THE COMPENSATION ANALYSIS SERVED AS THE BASIS FOR THE PRESIDENT'S RECOMMENDATIONS FOR UNIVERSITY EXECUTIVES. THE THIRD-PARTY ADVISOR PROVIDED THE COMMITTEE WITH A LETTER ON THE APPROPRIATENESS OF THE DECISION-MAKING PROCESS AND D REASONABLENESS OF THE PROPOSED COMPENSATION. ALL COMPENSATION WAS APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES PRIOR TO BECOMING EFFECTIVE ON JULY 1, 2012.
	FORM 990, PART VI, SECTION C, LINE 19	DREXEL UNIVERSITY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC IN A VARIETY OF WAYS. THE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE, AND ITS GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	CONTRIBUTION RECEIVABLE WRITE-OFF 267,298
OVERSIGHT OF THE AUDIT	PART XI, LINE 2C	THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES HAS RESPONSIBILITY FOR SELECTING THE INDEPENDENT ACCOUNTANT AND OVERSEEING THE AUDIT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

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

2012

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) PHILADELPHIA HEALTH & EDUCATION CORP DBA DREXEL UNIV COLLEGE OF MEDICINE 245 N 15TH ST PHILADELPHIA, PA 19102 23-2979433	EDUCATION, PATIENT CARE AND MEDICAL RESEARCH	PA	501(C)(3)	LINE 2	DREXEL UNIVERSITY	Yes	
(2) ACADEMIC ASSETS INC 3601 POWELTON AVE LL PHILADELPHIA, PA 19104 23-2455915	HOLDING COMPANY	PA	501(C)(3)	LINE 11C, III-FI	DREXEL UNIVERSITY	Yes	
(3) ACADEMIC PROPERTIES INC 3601 POWELTON AVE LL PHILADELPHIA, PA 19104 23-2411680	STUDENT HOUSING	PA	501(C)(3)	LINE 11C, III-FI	ACADEMIC ASSETS INC		No
(4) THE ACADEMY OF NATURAL SCIENCES OF PHILDELPHIA 1900 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19103 23-1352000	MUSEUM	PA	501(C)(3)	LINE 9	DREXEL UNIVERSITY	Yes	

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) DREXEL E-LEARNING INC 3001 MARKET ST SUITE 300 PHILADELPHIA, PA 19104 23-3068200	DISTANCE LEARNING AND ONLINE COURSES	PA	N/A	C			100 000 %		No
(2) JANUS HOUSING CORP 3601 POWELTON AVE LL PHILADELPHIA, PA 19104 04-3721325	INACTIVE	PA	ACADEMIC PROPERTIES INC	C			100 000 %		No
(3) SCHUYLKILL CROSSING LTD 76 ST PAUL ST SUITE 500 BURLINGTON, VT 05401 74-3090959	LIABILITY INSURANCE	VT	PHILADELPHIA HEALTH & EDUCATION CORP	C	642,518	5,515,650	15 000 %		No

Part V

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

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

1

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

a

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

b

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

c

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

d

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

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

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

k

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

l

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

m

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

n

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

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

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

s

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

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

Yes

1l

Yes

1m

Yes

1n

No

1o

No

1p

Yes

1q

No

1r

Yes

1s

Yes

2

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

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

Schedule R (Form 990) 2012

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

[illegible]

Software ID:
Software Version:
EIN: 23-1352630
Name: DREXEL UNIVERSITY

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation	
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--> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
PHILADELPHIA HEALTH & EDUCATION CORP	L	22,007,000	BOOK AMOUNT
ACADEMIC PROPERTIES INC	K	1,680,000	BOOK AMOUNT
SCHUYLKILL CROSSING RECIPROCAL RISK RETENTION GROUP	P	790,000	BOOK AMOUNT
PHILADELPHIA HEALTH & EDUCATION CORP	M	3,826,000	BOOK AMOUNT
PHILADELPHIA HEALTH & EDUCATION CORP	K	3,077,000	BOOK AMOUNT
ACADEMIC PROPERTIES INC	M	152,000	BOOK AMOUNT
PHILADELPHIA HEALTH & EDUCATION CORP	P	8,912,000	BOOK AMOUNT
PHILADELPHIA HEALTH & EDUCATION CORP	R	56,704,000	BOOK AMOUNT
PHILADELPHIA HEALTH & EDUCATION CORP	S	3,559,000	BOOK AMOUNT
DREXEL E-LEARNING INC	R	22,119,000	BOOK AMOUNT
PHILADELPHIA HEALTH & EDUCATION CORP	B	22,007,000	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	B	5,339,106	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	D	722,680	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Q	3,404,143	BOOK AMOUNT