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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


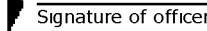


B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization The George Washington University		D Employer identification number 53-0196584
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) TAX DEPT 45155 RESEARCH PLACE Suite 160	Room/suite	E Telephone number (703) 726-8324
	City or town, state or country, and ZIP + 4 ASHBURN, VA 201474198		G Gross receipts \$ 1,652,712,215
	F Name and address of principal officer STEVEN KNAPP 2121 EYE ST NW 801 WASHINGTON, DC 20052		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.GWU.EDU			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities EDUCATION AND RESEARCH - SEE MISSION STATEMENT IN ATT 1 ON SCH O		
	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)	3	37
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	15,386
	6 Total number of volunteers (estimate if necessary)	6	5,000
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	11,916,603
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	80,014,552	70,589,630
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,110,409,246	1,170,406,465
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	22,618,400	34,335,224
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,720,049	31,182,081
		1,245,762,247	1,306,513,400
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	277,485,174	294,921,019
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	574,102,279	612,758,288
	16a Professional fundraising fees (Part IX, column (A), line 11e)	673,685	797,839
	16b Total fundraising expenses (Part IX, column (D), line 25) <u>28,309,790</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	399,885,141	424,043,708
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,252,146,279	1,332,520,854
	19 Revenue less expenses Subtract line 18 from line 12	-6,384,032	-26,007,454
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		3,484,155,828	3,545,345,140
21 Total liabilities (Part X, line 26)		1,653,006,543	1,655,182,744
22 Net assets or fund balances Subtract line 21 from line 20		1,831,149,285	1,890,162,396

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				2014-05-01	
				Date	
DAVID LAWLOR SR ASSOC VP FINANCE Type or print name and title					
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date
	Firm's name 				Check <input type="checkbox"/> if self-employed PTIN
	Firm's address 				Phone no (202) 414-1000

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

Part IIIStatement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

THE GEORGE WASHINGTON UNIVERSITY, AN INDEPENDENT ACADEMIC INSTITUTION CHARTERED BY THE CONGRESS OF THE UNITED STATES IN 1821, DEDICATES ITSELF TO FURTHERING HUMAN WELL-BEING THE UNIVERSITY VALUES A DYNAMIC, STUDENT-FOCUSED COMMUNITY STIMULATED BY CULTURAL AND INTELLECTUAL DIVERSITY AND BUILT UPON A FOUNDATION OF INTEGRITY, CREATIVITY, AND OPENNESS TO THE EXPLORATION OF NEW IDEAS THE GEORGE WASHINGTON UNIVERSITY, CENTERED IN THE NATIONAL AND INTERNATIONAL CROSSROADS OF WASHINGTON, D C , COMMITS ITSELF TO EXCELLENCE IN THE CREATION, DISSEMINATION, AND APPLICATION OF KNOWLEDGE TO PROMOTE THE PROCESS OF LIFELONG LEARNING FROM BOTH GLOBAL AND INTEGRATIVE PERSPECTIVES, THE UNIVERSITY PROVIDES A STIMULATING INTELLECTUAL ENVIRONMENT FOR ITS DIVERSE STUDENTS AND FACULTY BY FOSTERING EXCELLENCE IN TEACHING, THE UNIVERSITY OFFERS OUTSTANDING LEARNING EXPERIENCES FOR FULL-TIME AND PART-TIME STUDENTS IN UNDERGRADUATE, GRADUATE, AND PROFESSIONAL PROGRAMS IN WASHINGTON, D C , THE NATION, AND ABRO

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 928,338,820 including grants of \$ 237,978,844) (Revenue \$ 918,441,568)

EDUCATION OUR NAMESAKE ENVISIONED A UNIVERSITY IN THE NATION'S CAPITAL THAT WOULD PREPARE CITIZEN LEADERS BROUGHT TOGETHER FROM ALL OVER THE WORLD TODAY, WE ARE THAT UNIVERSITY WITH STUDENTS AND FACULTY MEMBERS FROM EVERY STATE AND MORE THAN 130 COUNTRIES TAKING FULL ADVANTAGE OF OUR SETTING IN A GLOBAL NERVE CENTER, A GW EDUCATION INTEGRATES INTELLECTUAL DISCOVERY, INTERACTIVE LEARNING, AND UNPARALLELED ACCESS TO OPPORTUNITIES IN EVERY SECTOR OF SOCIETY IN A CITY SHAPING THE FUTURE, GEORGE WASHINGTON IS A UNIVERSITY WHERE FACULTY AND STUDENTS NOT ONLY STUDY THE WORLD BUT ALSO WORK TO CHANGE IT

4b

(Code) (Expenses \$ 156,720,505 including grants of \$ 56,942,175) (Revenue \$ 150,297,467)

RESEARCH AND RESEARCH SUPPORT GW'S RESEARCH IS DISTINGUISHED BY OUR COMMITMENT TO TRANSFORM POLICY THAT AFFECTS PEOPLE IN THEIR DAILY LIVES THIS UNIQUE APPROACH TO RESEARCH GIVES SPECIAL CHARACTER TO OUR TEACHING AND ENABLES US TO OFFER OUR STUDENTS LEARNING EXPERIENCES THAT FEW CAN MATCH WITH OUR LOCATION, CONNECTIONS, AND CLOSE PROXIMITY TO INSTITUTIONS SUCH AS THE NATIONAL INSTITUTES OF HEALTH, NATIONAL SCIENCE FOUNDATION, THE SMITHSONIAN INSTITUTION, AND LIBRARY OF CONGRESS, GW'S RESEARCH HELPS SOLVE NATIONAL AND GLOBAL PROBLEMS WHILE GIVING OUR STUDENTS LEARNING OPPORTUNITIES INSIDE AND OUTSIDE THE CLASSROOM IN THE 21ST CENTURY, GW'S FACULTY AND STUDENTS CONTINUE TO OPEN NEW DOORS OF DISCOVERY

4c

(Code) (Expenses \$ 94,088,707 including grants of \$ 0) (Revenue \$ 101,667,430)

AUXILIARY ENTERPRISES - STUDENTS AND COMMUNITY GW PROVIDES A NUMBER OF SERVICES THAT SUPPORT LEARNING, BUILD COMMUNITY, AND ENHANCE THE OVERALL QUALITY OF STUDENT LIFE AUXILIARY ENTERPRISES INCLUDE FACILITIES AND RESIDENTIAL PROPERTY MANAGEMENT, DINING, BOOKSTORE, PARKING, STUDENT HEALTH, MAIL, AND LAUNDRY SERVICES GW'S MARVIN CENTER HOUSES DINING FACILITIES, STUDENT ORGANIZATION OFFICES AND MEETING ROOMS AND IS UTILIZED BY STUDENTS, FACULTY, STAFF, AND VISITORS FOR MORE INFO ABOUT GW'S PROGRAMS & ACCOMPLISHMENTS, SEE THE 2012-2013 FINANCIAL REPORT ON THE FINANCE DIVISION WEBSITE AT HTTP //FINANCE GWU.EDU/REPORTS

4d

Other program services (Describe in Schedule O)



















(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

1,179,148,032

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	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 	16 Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <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		No
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	Yes	
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	Yes	
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 BR , CJ , CH 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?	Yes	
7d	If "Yes," indicate the number of Forms 8282 filed during the year		2
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	37	
	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	36	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe 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	AK , CA , IN , KS , MD , MA , MI , NH , NY , OH , OK , OR , SC
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	SHARON HEINLE AVP COMPTLR 45155 RESEARCH PLACE SUITE 260 ASHBURN, VA (703) 726-1087

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** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[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)							15,074,261	0	967,952	

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 **1,217**

		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 Yes	

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►325

Part VIII

Statement of Revenue

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

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	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	59,083			
	d	Related organizations 1d				
	e	Government grants (contributions) 1e	14,003,330			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	56,527,217			
	g	Noncash contributions included in lines 1a-1f \$	10,983,291			
	h	Total. Add lines 1a-1f	70,589,630			
Program Service Revenue	2a	STUDENT TUITION & FEES	Business Code			
			900099	827,985,368	827,985,368	
	b	GRANTS & CONTRACTS	900099	159,446,181	159,446,181	
	c	AUXILIARY ENTERPRISES	611710	101,667,430	101,667,430	
	d	MEDICAL EDUCATION AGREEMENTS	900099	58,265,608	58,265,608	
	e	OTHER PROGRAM SERVICE REVENUE	611710	23,041,878	23,041,878	
	f	All other program service revenue				
	g	Total. Add lines 2a–2f	1,170,406,465			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	11,686,438			11,686,438
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	2,263,050			2,263,050
	6a	Gross rents	(i) Real			
			42,531,471			
			(ii) Personal			
			25,570,151			
	b	Less rental expenses				
	c	Rental income or (loss)	16,961,320	0		
	d	Net rental income or (loss)	16,961,320			16,961,320
	7a	Gross amount from sales of assets other than inventory	(i) Securities			
			342,351,738	881,752		
			(ii) Other			
			319,739,536	845,168		
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)	22,612,202	36,584		
	d	Net gain or (loss)	22,648,786			22,648,786
	8a	Gross income from fundraising events (not including \$ 59,083 of contributions reported on line 1c) See Part IV, line 18				
		a	85,068			
	b	Less direct expenses b	43,960			
	c	Net income or (loss) from fundraising events	41,108			41,108
	9a	Gross income from gaming activities See Part IV, line 19				
		a				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances				
		a				
	b	Less cost of goods sold b				
	c	Net income or (loss) from sales of inventory	0			
	Miscellaneous Revenue		Business Code			
	11a	UNRELATED PARTNERSHIP INCOME	525990	-2,367,883	-2,367,883	
	b	INDEPENDENT OPERATIONS	721110	14,284,486	14,284,486	
	c					
	d	All other revenue				
	e	Total. Add lines 11a–11d	11,916,603			
	12	Total revenue. See Instructions	1,306,513,400	1,170,406,465	11,916,603	53,600,702

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 <input checked="" type="checkbox"/>				
	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	43,934,244	43,934,244		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	237,598,498	237,598,498		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	13,388,277	13,388,277		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	7,858,820	1,356,635	5,104,576	1,397,609
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	495,068,047	436,416,817	44,199,162	14,452,068
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	32,957,191	28,372,829	3,480,590	1,103,772
9 Other employee benefits	43,754,220	37,667,985	4,620,858	1,465,377
10 Payroll taxes	33,120,010	28,513,000	3,497,785	1,109,225
11 Fees for services (non-employees)				
a Management	0			
b Legal	5,988,819	2,220,039	3,768,780	
c Accounting	3,257,707	414,722	2,842,985	
d Lobbying	2,000	2,000		
e Professional fundraising services See Part IV, line 17	797,839			797,839
f Investment management fees	9,670,229		9,670,229	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	100,798,262	91,576,075	8,224,882	997,305
12 Advertising and promotion	5,075,469	2,489,685	2,405,846	179,938
13 Office expenses	31,679,669	24,252,984	6,036,348	1,390,337
14 Information technology	25,757,733	19,309,151	6,250,149	198,433
15 Royalties	66,721	66,721		
16 Occupancy	60,419,523	55,812,020	4,603,029	4,474
17 Travel	23,290,076	20,629,550	1,113,732	1,546,794
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	11,452	11,452		
19 Conferences, conventions, and meetings	23,631,401	15,550,575	5,033,066	3,047,760
20 Interest	42,671,559	40,723,411	1,948,144	4
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	63,156,168	59,482,250	3,673,918	
23 Insurance	3,178,749	3,136,738	42,011	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a SUBSCRIPTIONS/PERIODICALS	5,005,249	4,837,775	107,038	60,436
b MEMBERSHIPS	2,814,770	2,156,602	600,312	57,856
c UBI TAX	4,837		4,837	
d INTERDEPARTMENTAL ASSESSMENTS		6,725,226	-7,175,157	449,931
e All other expenses	17,563,315	2,502,771	15,009,912	50,632
25 Total functional expenses. Add lines 1 through 24e	1,332,520,854	1,179,148,032	125,063,032	28,309,790
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <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		1,348,453	1	1,317,838
	2	Savings and temporary cash investments		541,324,170	2	339,723,544
	3	Pledges and grants receivable, net		82,539,899	3	82,780,459
	4	Accounts receivable, net		42,072,853	4	26,346,448
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		97,053	5	78,853
	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		0	6	0
	7	Notes and loans receivable, net		477,888	7	602,895
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		12,717,862	9	18,320,281
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a2,734,396,030			
	b	Less accumulated depreciation	10b652,333,259	1,890,636,095	10c	2,082,062,771
	11	Investments—publicly traded securities		347,435,495	11	434,138,107
	12	Investments—other securities See Part IV, line 11		516,713,464	12	513,071,358
	13	Investments—program-related See Part IV, line 11		29,299,572	13	28,621,824
	14	Intangible assets		7,945,484	14	7,945,484
	15	Other assets See Part IV, line 11		11,547,540	15	10,335,278
	16	Total assets. Add lines 1 through 15 (must equal line 34)		3,484,155,828	16	3,545,345,140
Liabilities	17	Accounts payable and accrued expenses		181,123,366	17	197,965,155
	18	Grants payable		0	18	0
	19	Deferred revenue		44,399,576	19	42,143,981
	20	Tax-exempt bond liabilities		167,730,000	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	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		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		224,949,326	23	224,270,913
	24	Unsecured notes and loans payable to unrelated third parties		997,501,588	24	1,154,562,664
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		37,302,687	25	36,240,031
	26	Total liabilities. Add lines 17 through 25		1,653,006,543	26	1,655,182,744
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		1,351,776,842	27	1,381,211,316
	28	Temporarily restricted net assets		255,393,043	28	281,283,663
	29	Permanently restricted net assets		223,979,400	29	227,667,417
	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		1,831,149,285	33	1,890,162,396
	34	Total liabilities and net assets/fund balances		3,484,155,828	34	3,545,345,140

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	1,306,513,400
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,332,520,854
3	Revenue less expenses Subtract line 2 from line 1	3	-26,007,454
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,831,149,285
5	Net unrealized gains (losses) on investments	5	82,710,285
6	Donated services and use of facilities	6	122,860
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	2,187,420
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,890,162,396

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		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	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	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
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	Yes	

Additional Data

Software ID:

Software Version:

EIN: 53-0196584

Name: The George Washington University

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

(A) Name and Title	(B) Average hours per week (list any 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			
W RUSSELL RAMSEY CHAIRMAN OF THE BD/COMM CHR	5 0	X						0	0	0
NELSON A CARBONELL JR VICE CHAIR OF THE BD/COMM CHR	5 0	X								
I ALLAN FROM SECRETARY OF THE BD/COMM CHR	5 0	X								
W SCOTT AMEY TRUSTEE	2 0	X								
RICHARD W BLACKBURN TRUSTEE	2 0	X								
CHRISTOPHER J BRIGHT TRUSTEE	2 0	X								
ROSLYN M BROCK TRUSTEE	2 0	X								
GEORGE COELHO TRUSTEE/COMM CHR	3 0	X								
LEE FENSTERSTOCK TRUSTEE	2 0	X								
HEATHER S FOLEY TRUSTEE	2 0	X								
DIANA HENRIQUES TRUSTEE	2 0	X								
A MICHAEL HOFFMAN TRUSTEE	2 0	X								
MARK V HUGHES TRUSTEE/COMM CHR	3 0	X								
JAMES F HUMPHREYS TRUSTEE	2 0	X								
MADELEINE S JACOBS TRUSTEE	2 0	X								
DAVID KARLGAARD TRUSTEE/COMM CHR	3 0	X								
STUART S KASSAN TRUSTEE	2 0	X								
JAY E KATZEN TRUSTEE	2 0	X								
J RICHARD KNOP TRUSTEE	2 0	X								
PETER B KOVLER TRUSTEE	2 0	X								
GERALD LAZARUS TRUSTEE	2 0	X								
RANDY LEVINE TRUSTEE/COMM CHR	3 0	X								
ANN WALKER MARCHANT TRUSTEE	2 0	X								
DAVID NADLER TRUSTEE	2 0	X								
BJ PENN TRUSTEE/COMM CHR	3 0	X								

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			
ROBERT G PERRY TRUSTEE/COMM CHR	3 0	X								
LINDA RABBITT TRUSTEE/COMM CHR	3 0	X								
DEBORAH RATNER SALZBERG TRUSTEE	2 0	X								
STEVEN S ROSS TRUSTEE/COMM CHR	3 0	X								
MARK R SHENKMAN TRUSTEE	2 0	X								
ROBERT K TANENBAUM TRUSTEE/COMM CHR	3 0	X								
CYNTHIA STEELE VANCE TRUSTEE/COMM CHR	3 0	X								
SUNIL WADHWANI TRUSTEE	2 0	X								
KERRY WASHINGTON-THRU 10912 TRUSTEE	2 0	X								
GEORGE W WELLDE JR TRUSTEE	2 0	X								
TITILOLA WILLIAMS-DAVIES TRUSTEE	2 0	X								
ELLEN ZANE TRUSTEE/COMM CHR	3 0	X								
STEVEN KNAPP PRESIDENT - EX OFFICIO	50 0	X		X				1,180,534		105,913
LOUIS H KATZ EXECUTIVE VP & TREASURER	50 0 1			X				1,381,110		30,000
STEVEN LERMAN PROVOST & EVP ACADEMIC AFFRS	50 0 4			X				644,009		146,548
BETH NOLAN SR VP & GENERAL COUNSEL	50 0			X				623,234		34,678
JEFFREY S AKMAN VP FOR HLTH AFFRS/DEAN SMHS	50 0				X			784,875		
LEO M CHALUPA VP FOR RESEARCH	50 0				X			466,743		49,414
MICHAEL MORSBERGER VP FOR DEVELOPMENT	50 0				X			464,453		56,879
DONALD W LINDSEY CHIEF INVESTMENT OFFICER	50 0				X			585,720		44,488
DAVID P STEINOUR CHIEF INFORMATION OFFICER	50 0				X			339,388		31,431
MARGUERITE E BARRATT DEAN, CCAS	50 0				X			329,738		34,014
PAUL SCHIFF BERMAN DEAN, LAW SCHOOL	50 0				X			519,280		54,876
SHAHRAM SARKANI DIRECTOR & PROF OF EMSE	50 0					X		825,452		44,289
NOZER SINGPURWALLA DIRECTOR & PROF OF STATISTICS	50 0					X		797,315		37,142

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			
IRA LUPU PROFESSOR EMERITUS OF LAW	50 0					X		766,047		19,885
THOMAS A MAZZUCHI CHAIR, DEPT OF ENGINEERING	50 0					X		525,935		43,220
MICHAEL LONERGAN MEN'S BASKETBALL COACH	50 0					X		520,226		70,488
ROBERT A CHERNAK FORMER SR VP SAAS	40 0						X	2,040,577		39,069
JOHN F WILLIAMS FORMER SR V PROV/VP HLTH AFFRS	0 0						X	1,028,997		
STEPHEN J TRACHTENBERG FORMER PRESIDENT	40 0						X	394,624		38,069
JAMES L SCOTT FORMER DEAN,SCHOOL OF MED/HLTH	40 0						X	444,134		33,418
GREGORY E MAGGS FORMER INTRM DEAN, LAW SCHOOL	40 0						X	245,760	0	36,185
JOHN KUDLESS FORMER INTERIM VP FOR DEV	20 0						X	166,110		17,946

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 The George Washington University	Employer identification number 53-0196584
--	--

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 33¹/₃% 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 33¹/₃% 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 IIIPart III

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 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 The George Washington University	Employer identification number 53-0196584
--	--

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)		4,488													
c Total lobbying expenditures (add lines 1a and 1b)		4,488													
d Other exempt purpose expenditures		1,319,301,268													
e Total exempt purpose expenditures (add lines 1c and 1d)		1,319,305,756													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<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)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the 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	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	1,906	3,824	1,469	4,488	11,687
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

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?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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
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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 The George Washington University	Employer identification number 53-0196584
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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

▶\$ 5,710,000

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ 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	1,305,891,938	1,331,100,652	1,143,581,701	1,011,192,217	1,256,432,040
b Contributions	21,777,666	12,722,014	20,048,815	14,550,663	21,256,721
c Net investment earnings, gains, and losses	125,522,204	37,171,754	239,647,928	187,659,517	-200,350,848
d Grants or scholarships	8,429,072	8,196,187	7,817,598	7,874,781	8,010,461
e Other expenditures for facilities and programs	59,890,790	58,511,818	56,012,499	54,920,355	50,425,422
f Administrative expenses	9,670,229	8,394,477	8,347,695	7,025,560	7,709,813
g End of year balance	1,375,201,717	1,305,891,938	1,331,100,652	1,143,581,701	1,011,192,217

2

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

a

Board designated or quasi-endowment ▶ 71 379 %

b

Permanent endowment ▶ 13 844 %

c

Temporarily restricted endowment ▶ 14 777 %

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	561,105	151,675,693		152,236,798
b Buildings	790,613,481	1,563,623,778	508,472,957	1,845,764,302
c Leasehold improvements		15,962,254	8,835,458	7,126,796
d Equipment		211,959,719	135,024,844	76,934,875
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,082,062,771

Part XIReconciliation of Revenue per Audited Financial Statements With Revenue per Return				
1	Total revenue, gains, and other support per audited financial statements	1	1,177,984,172	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a	82,710,285	
b	Donated services and use of facilities	2b	122,860	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	1,724,890	
e	Add lines 2a through 2d	2e	84,558,035	
3	Subtract line 2e from line 1	3	1,093,426,137	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	9,670,229	
b	Other (Describe in Part XIII)	4b	203,417,034	
c	Add lines 4a and 4b	4c	213,087,263	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,306,513,400	

Part XIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements	1	1,119,771,792	
2	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	25,952,312	
e	Add lines 2a through 2d	2e	25,952,312	
3	Subtract line 2e from line 1	3	1,093,819,480	
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	9,670,229	
b	Other (Describe in Part XIII)	4b	229,031,145	
c	Add lines 4a and 4b	4c	238,701,374	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,332,520,854	

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

Additional Data

Software ID:
Software Version:
EIN: 53-0196584
Name: The George Washington University

Form 990, Schedule D, Part VII - Investments— Other Securities

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

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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
The George Washington University

Employer identification number

53-0196584

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

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

SCHEDULE 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
The George Washington University

Employer identification number
53-0196584

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	4	137			213,995,000
b Total from continuation sheets to Part I					50,000
c Totals (add lines 3a and 3b)	4	137			214,045,000

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 ▶

3 Enter total number of other organizations or entities 12

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can 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)
STUDY ABROAD SCHOLARSHIPS	Central America and the Caribbean	10	113,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	East Asia and the Pacific	80	1,246,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Europe (Including Iceland and Greenland)	470	6,931,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Middle East and North Africa	50	678,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	North America	1	21,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Russia and the Newly Independent States	10	153,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	South America	50	820,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	South Asia	20	198,000	STUDENT ACCT			
STUDY ABROAD SCHOLARSHIPS	Sub-Saharan Africa	50	781,000	STUDENT ACCT			

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

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).

Schedule F (Form 990) 2012

Additional Data

Software ID:
Software Version:
EIN: 53-0196584
Name: The George Washington University

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		129,468,000
East Asia and the Pacific			Investments		51,208,000
South Asia			Investments		1,719,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean		9	Program Services	EDUCATION AND RESEARCH	355,000
East Asia and the Pacific		16	Program Services	EDUCATION AND RESEARCH	4,435,000
Europe (Including Iceland and Greenland)	3	46	Program Services	EDUCATION AND RESEARCH	16,294,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa		11	Program Services	EDUCATION AND RESEARCH	1,912,000
North America		8	Program Services	EDUCATION AND RESEARCH	898,000
Russia and the Newly Independent States		24	Program Services	EDUCATION AND RESEARCH	471,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America	1	12	Program Services	EDUCATION AND RESEARCH	1,856,000
South Asia		5	Program Services	EDUCATION AND RESEARCH	757,000
Sub-Saharan Africa		6	Program Services	EDUCATION AND RESEARCH	3,609,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Fundraising		867,000
Europe (Including Iceland and Greenland)			Fundraising		95,000
Middle East and North Africa			Fundraising		42,000

Form 990 Schedule F 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			Fundraising		4,000
South America			Fundraising		5,000
South Asia			Fundraising		50,000

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	SUBAWARD	728,000	EFT			
		East Asia and the Pacific	SUBAWARD	282,000	EFT			
		East Asia and the Pacific	SUBAWARD	447,000	EFT			
		Sub-Saharan Africa	SUBAWARD	183,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	SUBAWARD	118,000	EFT			
		East Asia and the Pacific	SUBAWARD	106,000	EFT			
		Europe (Including Iceland and Greenland)	SUBAWARD	21,000	EFT			
		North America	SUBAWARD	319,000	EFT			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	SUBAWARD	43,000	EFT			
		East Asia and the Pacific	SUBAWARD	109,000	EFT			
		Sub-Saharan Africa	SUBAWARD	7,000	EFT			
		Europe (Including Iceland and Greenland)	SUBAWARD	85,000	EFT			

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
The George Washington University

Employer identification number
53-0196584

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

1

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

a

☒

Mail solicitations

b

☒

Internet and email solicitations

c

☒

Phone solicitations

d

☒

In-person solicitations

e

☒

Solicitation of non-government grants

f

☒

Solicitation of government grants

g

☒

Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

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

(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			
GRENZEBACH GLIER AND ASSOC 401 NORTH MICHIGAN AVE SUITE 2800 CHICAGO, IL 60611	OVERALL STRATEGY		No		290,577	-290,577
ADVANCEMENT RESOURCES LLC 3349 SOUTHGATE COURT SW CEDAR RAPIDS, IA 52404	FUNDRAISER TRAINING		No		184,250	-184,250
HARRIS CONNECT LLC 1511 ROUTE 22 SUITE C-25 BREWSTER, NY 10509	STRATEGY DIRECT SOLI		No	17,084	94,636	-77,552
THE STELTER COMPANY 10435 NEW YORK AVE DES MOINES, IA 50322	PLANNED GIVING CAMP		No		79,899	-79,899
RUFFALOCODY LLC 65 KIRDWOOD NORTH RD SW CEDAR RAPIDS, IA 52404	TELE FUNDRAISING		No	103,256	77,093	26,163
PENTERA INC 8650 COMMERCE PARK PLACE STE G INDIANAPOLIS, IN 46268	PLANNED GIVING CAMP		No		44,938	-44,938
LEGACY LEADERS INC 425 UNIVERSITY AVE SUITE 700 TORONTO, ONTARIO CA M5G 1T6	PLANNED GVG DIRECT SOLI		No	12,563	26,446	-13,883
Total ▶				132,903	797,839	-664,936

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.

AK, AR, CT, DC, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NY, ND, OH, OK, OR, SC, VA, WA

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 (add col (a) through col (c))	
			<u>Event #1</u> (event type)	<u>Event #2</u> (event type)	<u>4</u> (total number)		
	1	Gross receipts	37,868	36,275	70,008	144,151	
	2	Less Contributions . . .	36,183		22,900	59,083	
	3	Gross income (line 1 minus line 2)	1,685	36,275	47,108	85,068	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes . . .		3,413	2,874	6,287	
	6	Rent/facility costs . . .	12,719	27	1,770	14,516	
	7	Food and beverages .		15,746	1,877	17,623	
	8	Entertainment			240	240	
	9	Other direct expenses .			5,294	5,294	
	10	Direct expense summary Add lines 4 through 9 in column (d) ►					(43,960)
	11	Net income summary Combine line 3, column (d), and line 10 ►					41,108

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

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

2012

Open to Public Inspection

■ Attach to Form 990

Employer identification number

53-0196584

Part I General Information on Grants and 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.

[illegible]

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **123**

3 Enter total number of other organizations listed in the line 1 table **54**

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)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) UNIV-AWARDED GRANTS, SCHOLARSHIPS, AND ALLOCATIONS	9000	218,090,000			
(2) STIPENDS, PRIZES, AND AWARDS	3000	19,378,000			
(3) SUBAWARD	1	131,000			

Part IV

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

Software ID:

Software Version:

EIN: 53-0196584

Name: The George Washington University

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
ACKCO INC1326 N CENTRAL AVENUE PHOENIX,AZ 85004	46-0316645		267,000				SUBAWARD
AFRICAN WOMENS CANCER AWARENESS ASSOCIATION8701 GEORGIA AVE SILVER SPRING,MD 20910	73-1704355	501(C)(3)	10,000				SUBAWARD

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
ALBERT EINSTEIN COLL OF MEDICINE OF YESHIVA UNIV1300 MORRIS PARK AVE BRONX,NY 10461	13-1624225	501(C)(3)	43,000				SUBAWARD
ALLIANCE FOR HEALTH 1345 MONROE AVE NW GRAND RAPIDS,MI 49505	38-2004919	501(C)(3)	37,000				SUBAWARD

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
AMERICAN BOARD OF MEDICAL SPECIALTIES222 NORTH LASALLE ST CHICAGO,IL 60601	23-7304902	501(C)(3)	574,000				SUBAWARD
AMERICAN INSTITUTE FOR RESEARCH1000 THOMAS JEFF ST NW WASHINGTON,DC 20007	25-0965219	501(C)(3)	708,000				SUBAWARD

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
AMERICA'S PROMISE THE ALLIANCE OF YOUTH1110 VERMONT AVE NW WASHINGTON,DC 20005	54-1848713	501(C)(3)	77,000				SUBAWARD
ASSOCIATION OF IMMUNIZATION MANAGERS620 HUNGERFORD DRIVE ROCKVILLE,MD 20850	52-2346043	501(C)(3)	41,000				SUBAWARD

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
BAILIT HEALTH PURCHASING LLC56 PICKERING STREET NEEDHAM,MA 02492	04-3340991		78,000				SUBAWARD
BARRERA ASSOCIATES INC1025 CONN AVE NW WASHINGTON,DC 20036	75-2285168		24,000				SUBAWARD

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 MEDICINEP O BOX 201361 HOUSTON,TX 77216	74-1613878	501(C)(3)	552,000				SUBAWARD
BAYLOR RESEARCH INSTITUTE3310 LIVE OAK STREET DALLAS,TX 75204	75-1921898	501(C)(3)	6,000				SUBAWARD

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
BETH ISRAEL DEACONESS MED CTR330 BROOKLINE AVE BOSTON,MA 02215	04-2103881	501(C)(3)	10,000				SUBAWARD
BOSTON MEDICAL CENTER CORPORATION660 HARRISON AVE ROOM 262 BOSTON,MA 02118	04-3314093	501(C)(3)	62,000				SUBAWARD

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
BREAD FOR THE CITY1525 SEVENTH ST NW 2ND FLOOR WASHINGTON,DC 20001	52-1138207	501(C)(3)	8,000				SUBAWARD
BRIDGES TO EXCELLENCE 13 SUGAR STREET NEWTOWN,CT 06470	51-0461495	501(C)(3)	280,000				SUBAWARD

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
BRIGHAM AND WOMENS HOSPITALPO BOX 3887 BOSTON,MA 02241	04-2312909	501(C)(3)	221,000				SUBAWARD
BRONX LEBANON HOSPITAL CENTER1276 FULTON AVE AT 169TH ST BRONX,NY 10456	11-3125823	501(C)(3)	356,000				SUBAWARD

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
BROOKINGS INSTITUTION 1775 MASS AVE NW WASHINGTON,DC 20036	53-0196577	501(C)(3)	24,000				SUBAWARD
CAMUY HEALTH SERVICES INCPO BOX 660 CAMUY,PR 00627	66-0428652	501(C)(3)	10,000				SUBAWARD

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
CAPITAL CITY AREA HEALTH EDU CTR1224 M ST NW WASHINGTON,DC 20005	26-3301051	501(C)(3)	115,000				SUBAWARD
CARNEGIE MELLON UNIVERSITYPO BOX 371032 STE 201 PITTSBURGH,PA 15250	25-0969449	501(C)(3)	31,000				SUBAWARD

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
CASE WESTERN RESERVE UNIVERSITY10900 EUCLID AVE CLEVELAND, OH 44106	34-1018992	501(C)(3)	647,000				SUBAWARD
CENTER FOR APPLIED LINGUISTICS4640 40TH STREET NW WASHINGTON,DC 20016	52-0807619	501(C)(3)	20,000				SUBAWARD

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
CENTER FOR FAMILY HEALTH505 N JACKSON ST JACKSON,MI 49201	38-3251354	501(C)(3)	20,000				SUBAWARD
CENTER FOR HEALTH CARE STRATEGIES200 AMERICAN METRO BLVD HAMILTON,NJ 08619	22-3375015	501(C)(3)	292,000				SUBAWARD

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
CERNER CORPORATION 2800 ROCKCREEK PKWY KANSAS CITY,MO 64117	43-1196944		443,000				SUBAWARD
CHILDRENS HOSP OF PHILADELPHIA34 CIVIC CTR BLVD PHILADELPHIA,PA 19104	23-1352166	501(C)(3)	579,000				SUBAWARD

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 LOS ANGELES4650 SUNSET BLVD LOS ANGELES,CA 90027	95-1690977	501(C)(3)	562,000				SUBAWARD
CHILDRENS HOSPITAL MEDICAL CENTER OF AKRON3333 BURNET AVENUE CINCINNATI,OH 45229	34-0714357	501(C)(3)	34,000				SUBAWARD

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 MERCY HOSPITAL2401 GILHAM ROAD KANSAS CITY,MO 64108	44-0605373	501(C)(3)	7,000				SUBAWARD
CHILDRENS NATL MEDICAL CENTER111 MICHIGAN AVE WASHINGTON,DC 20010	52-1640403	501(C)(3)	37,000				SUBAWARD

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 RESEARCH INSTITUTE111 MICHIGAN AVE NW WASHINGTON,DC 20010	52-1654453	501(C)(3)	328,000				SUBAWARD
CINCINNATI CHILDRENS HOSPITAL3333 BURNET AVE CINCINNATI,OH 45229	31-0833936	501(C)(3)	36,000				SUBAWARD

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 ST RM 458 NEW YORK,NY 10027	13-5598093	501(C)(3)	2,713,000				SUBAWARD
COOPER HEALTH SYSTEM3 EXECUTIVE CAMPUS CHERRY HILL,NJ 08002	21-0634462	501(C)(3)	408,000				SUBAWARD

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
D H LLOYD AND ASSOC INC1625 K ST NW WASHINGTON,DC 20006	52-1370661		13,000				SUBAWARD
DC PRIMARY CARE ASSOCIATION1411 K ST NW STE 300 STE 330 WASHINGTON,DC 20005	52-1999196	501(C)(3)	35,000				SUBAWARD

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
DENVER HEALTH AND HOSPITAL AUTHORITY AUTHORITY PO BOX 17093 DENVER, CO 80217	84-1343242		442,000				SUBAWARD
DUKE UNIVERSITY2200 W MAIN STREET DURHAM,NC 27705	56-0532129	501(C)(3)	306,000				SUBAWARD

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
EDVANTIA INCPO BOX 1348 SUITE 820 CHARLESTON,WV 25325	55-0484812	501(C)(3)	72,000				SUBAWARD
EHR INTEGRATION SERVICES2689 PINE GROVE RD SKANEATELES,NY 13152	20-5368952		86,000				SUBAWARD

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
EL RIO HEALTH CENTER 839 W CONGRESS ST TUCSON,AZ 85745	86-0285857	501(C)(3)	135,000				SUBAWARD
EMORY UNIVERSITY1599 CLIFTON RD NE 4TH FL ATLANTA,GA 30322	58-0566256	501(C)(3)	693,000				SUBAWARD

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
FAMILY AND MED COUNSELLING SERV INC 2041 MLK JR AVE WASHINGTON,DC 20020	52-1073362	501(C)(3)	149,000				SUBAWARD
FRED HUTCHINSON CANCER RSCH CTR1100 FAIRVIEW AVE NORTH SEATTLE,WA 98109	23-7156071	501(C)(3)	336,000				SUBAWARD

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
GALLAUDET UNIVERSITY 800 FLORIDA AVE NE WASHINGTON,DC 20002	53-0199507	501(C)(3)	11,000				SUBAWARD
GEORGE MASON UNIVERSITY4400 UNIVERSITY DR FAIRFAX,VA 22030	54-0836354	VIRGINIA	65,000				SUBAWARD

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
GEORGETOWN UNIVERSITY37TH O ST NW WASHINGTON,DC 20057	53-0196603	501(C)(3)	502,000				SUBAWARD
GREATER DETROIT AREA HEALTH COUNCIL407 E FORT ST DETROIT,MI 48226	38-1360904	501(C)(3)	39,000				SUBAWARD

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
GREATER KC LINC INC 6000 N OAK 6TH FLOOR KANSAS CITY,MO 64118	43-1676730	501(C)(3)	35,000				SUBAWARD
GROUP HEALTH COOPERATIVEPO BOX 34587 SUITE 300 SEATTLE,WA 98124	91-0511770	501(C)(3)	77,000				SUBAWARD

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
HARVARD UNIVERSITYPO BOX 415649 BOSTON,MA 02241	04-2103580	501(C)(3)	34,000				SUBAWARD
HEALTH IMPROVEMENT COLLAB OF GREATER CINCINNATI2649 ERIE AVE CINCINNATI,OH 45208	31-1449807	501(C)(3)	29,000				SUBAWARD

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
HEALTHCARE QUALITY INSTITUTE9483 RANCH PARK WAY ELK GROVE,CA 95624	27-0655513		380,000				SUBAWARD
HEALTHY MEMPHIS COMMON TABLE6027 WALNUT GROVE RD MEMPHIS,TN 38120	62-1820264	501(C)(3)	25,000				SUBAWARD

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
HENRY FORD HEALTH SYSTEMONE FORD PLACE 5EF DETROIT,MI 20422	38-1357020	501(C)(3)	411,000				SUBAWARD
HENRY L STIMSON CENTER 1111 19TH ST 12TH FL WASHINGTON,DC 20036	52-1640938	501(C)(3)	267,000				SUBAWARD

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
HILLEL AT THE GEORGE WASHINGTON UNIVERSITY INC2300 H STREET NW WASHINGTON,DC 20037	52-6081729	501(C)(3)	175,000				JNT FUND CAMP
HOWARD UNIVERSITY525 BRYANT ST NW WASHINGTON,DC 20059	53-0204707	501(C)(3)	404,000				SUBAWARD

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
HUMBOLDT STATE UNIV SPONSORED PROGRAMS FOUNDATIONPO BOX 1185 ARCATA,CA 95518	94-6050071	501(C)(3)	39,000				SUBAWARD
IDENTITY414 EAST DIAMOND AVE GAITHERSBURG,MD 20877	52-2120012	501(C)(3)	319,000				SUBAWARD

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

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IMMUNIZATION ACTION COALITION1573 SELBY AVE STE 234 SAINT PAUL,MN 55104	41-1768237	501(C)(3)	55,000				SUBAWARD
INDIANA UNIVERSITY620 UNION DR RM 518 INDIANAPOLIS,IN 46202	35-6001673	INDIANA	6,000				SUBAWARD

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

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INSTITUTE FOR CLINICAL RESEARCHPO BOX 29545 WASHINGTON,DC 20017	52-1336656	501(C)(3)	770,000				SUBAWARD
INSTITUTE FOR FAMILY CENTERED CARE7900 WISCONSIN AVE BETHESDA,MD 22301	52-1777133	501(C)(3)	7,000				SUBAWARD

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

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IOWA STATE UNIVERSITY 3609 ADMIN SERVS BLDG AMES,IA 50011	42-6004224	IOWA	36,000				SUBAWARD
JOHNS HOPKINS UNIVERSITY12529 COLLECTIONS CTR DR CHICAGO,IL 60693	52-0595110	501(C)(3)	149,000				SUBAWARD

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

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KIMBALL DESIGN5505 CONN AVE NW WASHINGTON,DC 22015	52-2257825		27,000				SUBAWARD
LA CLINICA DEL PUEBLO INC2831 15TH ST NW WASHINGTON,DC 20009	52-1942551	501(C)(3)	61,000				SUBAWARD

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

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LATIN AMERICAN YOUTH CENTER1419 COLUMBIA RD NW WASHINGTON,DC 20009	52-1023074	501(C)(3)	255,000				SUBAWARD
LOS ANGELES BIOMEDICAL RESEARCHPO BOX 60637 LOS ANGELES,CA 90060	95-2138184	501(C)(3)	249,000				SUBAWARD

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

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LYNN ETHEREDGE GROUP 4805 DERUSSEY PKWY CHEVY CHASE,MD 20815	52-1580137		257,000				SUBAWARD
M&R STRATEGIC SERVICES 1901 L STREET NW WASHINGTON,DC 20036	13-3588025		35,000				SUBAWARD

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

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MAGEE WOMENS RESEARCH INST3339 WARD ST PITTSBURGH,PA 15213	25-1462312	501(C)(3)	36,000				SUBAWARD
MARYS CTR MATERNAL AND CHILD CARE2333 ONTARIO RD NW WASHINGTON,DC 20009	52-1594116	501(C)(3)	195,000				SUBAWARD

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

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MASSACHUSETTS GENERAL HOSPITALPO BOX 3829 BOSTON,MA 02241	04-2697983	501(C)(3)	948,000				SUBAWARD
MASSACHUSETTS HEALTH QUALITY42 PLEASANT ST STE 3 WATERTOWN,MA 02472	04-3542817	501(C)(3)	31,000				SUBAWARD

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

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MATHEMATICA POLICY RESEARCH INCPO BOX 2393 PRINCETON, NJ 08543	22-2112296		28,000				SUBAWARD
MAUTNER PROJECT1875 CONN AVE NW WASHINGTON,DC 20009	52-1703915	501(C)(3)	95,000				SUBAWARD

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

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MEDPHARMA PARTNERS LLC101 FEDERAL ST SUITE 1900 BOSTON,MA 02110	20-0271583		34,000				SUBAWARD
MEDSTAR HEALTH RESEARCH INSTITUTEPO BOX 418223 BOSTON,MA 02241	52-6056274	501(C)(3)	109,000				SUBAWARD

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

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METRO HEALTH INC1012 14TH STREET NW WASHINGTON,DC 20005	52-1556535	501(C)(3)	34,000				SUBAWARD
METROHEALTH MEDICAL CENTERPO BOX 73308 CLEVELAND,OH 44193	34-6004382		31,000				SUBAWARD

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

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METRO TEEN AIDS651 PENN AVE SE 1 WASHINGTON,DC 20003	52-1610088	501(C)(3)	10,000				LBGF AWARD
MIRIAM HOSPITAL164 SUMMIT ST PROVIDENCE,RI 02906	05-0258905	501(C)(3)	30,000				SUBAWARD

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

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MN COMMUNITY MEASUREMENT3433 BROADWAY ST NE MINNEAPOLIS,MN 55413	35-2246162	501(C)(3)	40,000				SUBAWARD
NATIONAL ACADEMY OF EDUCATION500 FIFTH STREET WASHINGTON,DC 20001	77-0415802	501(C)(3)	78,000				SUBAWARD

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

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NATIONAL DISABILITY INSTITUTE INC1667 K ST NW STE 640 WASHINGTON,DC 20006	20-4205838	501(C)(3)	161,000				SUBAWARD
NATL ASSN COMMUNITY HEALTH CTRS1330 NEW HAMP AVE NW BETHESDA,MD 20814	77-0415802	501(C)(3)	95,000				SUBAWARD

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

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NATL BUREAU OF ECONOMIC RESEARCH INC 1050 MASS AVE CAMBRIDGE,MA 02138	13-1641075	501(C)(3)	57,000				SUBAWARD
NATL BUSINESS COALITION HEALTH1015 18TH ST NW WASHINGTON,DC 20036	65-0328471	501(C)(6)	57,000				SUBAWARD

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

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NATL CENTER FOR CREATIVE AGING4125 ABLEMARLE ST NW 730 WASHINGTON,DC 20016	13-3135292		50,000				SUBAWARD
NATL CTR FOR MANUFACTURING SCIENCES3025 BOARDWALK ST ANN ARBOR,MI 48108	38-2761126	501(C)(3)	75,000				SUBAWARD

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

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NATL OPINION RESEARCH CENTER55 E MONROE AVE CHICAGO,IL 60603	36-2167808	501(C)(3)	88,000				SUBAWARD
NATL PARTNERSHIP FOR WOMEN AND FAMILIES 1875 CONN AVE NW WASHINGTON,DC 20009	23-7124915	501(C)(3)	544,000				SUBAWARD

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

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NEW MEXICO MEDICAL REVIEW ASSOCIATION 5801 OSUNA RD NE ALBUQUERQUE,NM 87109	23-7394943	501(C)(3)	22,000				SUBAWARD
NEW YORK UNIVERSITY18 WASHINGTON PLACE NEW YORK,NY 10003	13-5562308	501(C)(3)	32,000				SUBAWARD

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

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NORTHWESTERN UNIVERSITY750 N LAKE SHORE DR CHICAGO,IL 60611	36-2167817	501(C)(3)	754,000				SUBAWARD
NUEVA VIDA INC2000 P ST NW WASHINGTON,DC 20036	54-1943145	501(C)(3)	14,000				SUBAWARD

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NWRPCA6512 23RD AVE NW STE 300 SEATTLE,WA 98117	91-1252785	501(C)(3)	44,000				SUBAWARD
OHIO STATE UNIV RSCH FOUNDATION1960 KENNY RD SUITE 305 COLUMBUS,OH 43210	31-6401599	501(C)(3)	650,000				SUBAWARD

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OREGON HEALTH SCIENCES UNIVERSITY 2525 SW 1ST AVE STE 220 PORTLAND,OR 97201	93-1176109	OREGON	13,000				SUBAWARD
OREGON HEALTHCARE QUALITY CORPORATION 520 SW 6TH AVE PORTLAND,OR 97204	93-1293103	501(C)(3)	40,000				SUBAWARD

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OREGON SOCIAL LEARNING CENTER INC10 SHELTON MCMURPHEY BLVD STE 830 EUGENE,OR 97401	93-0679478	501(C)(3)	112,000				SUBAWARD
P2 COLLABORATIVE OF WNY INC6225 SHERIDAN DR WILLIAMSVILLE,NY 14221	42-1604185	501(C)(3)	40,000				SUBAWARD

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

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PACIFIC BUSINESS GROUP ON HEALTH221 MAIN STREET SAN FRANCISCO ,CA 94105	94-3093623	501(C)(3)	29,000				SUBAWARD
PACIFIC HEALTH RESEARCH & EDUCATION INSTITUTE3375 KOAPAKA STREET HONOLULU,HI 96819	99-0312283	501(C)(3)	92,000				SUBAWARD

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PENNSYLVANIA STATE UNIVERSITY227 BEAVER AVE STATE COLLEGE, PA 16802	24-6000376	PENNSYLVANIA	390,000				SUBAWARD
PHFE12801 CROSSROADS PKWY INDUSTRY,CA 91746	95-2557063	501(C)(3)	17,000				SUBAWARD

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PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE5100 WISCONSIN AVE NW WASHINGTON,DC 20016	52-1394893	501(C)(3)	6,000				SUBAWARD
PINELAND MHDDAD CSBPO BOX 745 STATESBORO ,GA 30459	58-2107992		64,000				SUBAWARD

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PRASAD ENGG LLC10406 MILLWOOD DRIVE PLYMOUTH,MI 48170	80-0237167		61,000				SUBAWARD
PROVIDENCE HEALTH FOUNDATION1150 VARNUM STREET NE WASHINGTON,DC 20017	52-1275583	501(C)(3)	55,000				SUBAWARD

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PUGET SOUND HEALTH ALLIANCE2003 WESTERN AVE STE 600 SEATTLE,WA 98121	47-0948895	501(C)(3)	22,000				SUBAWARD
QUALITY COUNTS30 ASSOCIATION DRIVE MANCHESTER,ME 04351	20-4935972	501(C)(3)	20,000				SUBAWARD

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QUILL RESEARCH ASSOCIATES LLC4777 N 33RD STREET ARLINGTON,VA 22207	27-0607639		30,000				SUBAWARD
RAND CORPORATIONFILE 53174 LOS ANGELES,CA 90074	95-1958142	501(C)(3)	17,000				SUBAWARD

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RESEARCH FOUNDATION OF SUNY750 EAST ADAMS ST CWB SYRACUSE, NY 13210	14-1368361	501(C)(3)	372,000				SUBAWARD
RESEARCH FOUNDATION OF THE CITY UNIV OF NEW YORK230 WEST 41 STREET NEWYORK,NY 10036	13-1988190	501(C)(3)	12,000				SUBAWARD

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RUSH UNIVERSITY MEDICAL CTR1700 WEST VAN BUREN CHICAGO,IL 60612	36-2174823	501(C)(3)	72,000				SUBAWARD
SECOND LANGUAGE TESTING INC6135 EXECUTIVE BLVD ROCKVILLE,MD 20852	52-1875192		7,000				SUBAWARD

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SECOND STORY INC714 N FREMONT STREET PORTLAND,OR 97227	93-1259389		25,000				SUBAWARD
SMITH FARM CENTER FOR HEALING1632 U STREET NW WASHINGTON,DC 20009	52-1977976	501(C)(3)	22,000				SUBAWARD

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SMITHSONIAN INSTITUTION24411 NETWORK PLACE CHICAGO,IL 60673	53-0206027	501(C)(3)	38,000				SUBAWARD
SOUTHERN REGIONAL EDUCATION BOARD592 10TH ST NW ATLANTA,GA 30318	58-0566141	501(C)(3)	58,000				SUBAWARD

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SRI INTERNATIONAL333 RAVENSWOOD AVE MENLO PARK,CA 94025	94-1160950	501(C)(3)	60,000				SUBAWARD
ST LOUIS UNIVERSITY 1100 SOUTH GRAND BLVD ST LOUIS,MO 63134	43-0654872	501(C)(3)	8,000				SUBAWARD

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STANFORD UNIVERSITYPO BOX 44253 SAN FRANCISCO,CA 94144	94-1156365	501(C)(3)	326,000				SUBAWARD
TRANSCEN INC451 HUNGERFORD DRIVE ROCKVILLE,MD 20850	52-1487462	501(C)(3)	40,000				SUBAWARD

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TRUSTEES OF UNIV OF PENNSYLVANIA3451 WALNUT ST PHILADELPHIA,PA 19104	23-1352685	501(C)(3)	232,000				SUBAWARD
TUFTS NEW ENGLAND MED CENTER750 WASHINGTON ST BOSTON,MA 02111	04-3400617	501(C)(3)	69,000				SUBAWARD

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UB FAMILY MEDICINE INC 77 GOODELL STREET BOX 453 BUFFALO, NY 14203	16-1280696	501(C)(3)	8,000				SUBAWARD
UNITED MEDICAL CTR FOUNDATION1310 SOUTHERN AVE SE WASHINGTON,DC 20032	26-3390159	501(C)(3)	33,000				SUBAWARD

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UNITY HEALTH CARE INC 1220 12TH ST SE WASHINGTON,DC 20003	52-1572431	501(C)(3)	98,000				SUBAWARD
UNIV OF CA DAVIS P O BOX 989062 WEST SACRAMENTO, CA 95798	94-6036494	CALIFORNIA	8,000				SUBAWARD

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UNIV OF CA IRVINE3200 EDUCATION BLDG IRVINE,CA 92697	95-2226406	CALIFORNIA	8,000				SUBAWARD
UNIV OF CA LOS ANGELES 1125 MURPHY HALL LOS ANGELES,CA 90095	95-6006143	CALIFORNIA	45,000				SUBAWARD

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(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
UNIV OF CA SAN FRANCISCOACC OFF-EMF BX 0897 SAN FRANCISCO ,CA 94143	94-6036493	CALIFORNIA	269,000				SUBAWARD
UNIV OF MEDICINE AND DENTISTRY OF NJPO BOX 2685 NEW BRUNSWICK, NJ 08903	22-1775306	NEW JERSEY	621,000				SUBAWARD

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
UNIV OF TEXAS SOUTHWESTERN5323 HARRY HINES BLVD DALLAS,TX 75390	75-6002868	TEXAS	1,048,000				SUBAWARD
UNIV TEXAS HEALTH SCIENCE CTR7703 FLOYD CURL DR SAN ANTONIO,TX 78229	74-1586031	TEXAS	9,000				SUBAWARD

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
UNIV TEXAS MEDICAL BRANCH IMHPO BOX 4786 LOCKBOX 750 HOUSTON,TX 77210	74-6000949	TEXAS	1,099,000				SUBAWARD
UNIVERSITY OF ALABAMA BIRMINGHAM1530 3RD AVE SOUTH BIRMINGHAM,AL 35294	63-6005396	ALABAMA	808,000				SUBAWARD

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 ARKANSAS PO BOX 1404 FAYETTEVILLE,AR 72701	71-6003252	ARKANSAS	192,000				SUBAWARD
UNIVERSITY OF COLORADO DEPARTMENT 238 DENVER,CO 80291	84-6000555	COLORADO	409,000				SUBAWARD

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 DC4200 CONN AVE NW F428 WASHINGTON,DC 20008	53-6001131	D C	29,000				SUBAWARD
UNIVERSITY OF DELAWARE 116 STUDENT SERVICES BLDG NEWARK,DE 19716	51-6000297	501(C)(3)	52,000				SUBAWARD

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 HOUSTON CBFPO BOX 988 HOUSTON,TX 77001	74-6001399	TEXAS	41,000				SUBAWARD
UNIVERSITY OF MARYLANDRM 4101 CHESAPK BLDG COLLEGE PARK,MD 20742	52-6002033	MARYLAND	120,000				SUBAWARD

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 MIAMI 1800 NW 10TH AVE MIAMI,FL 33136	59-0624458	501(C)(3)	51,000				SUBAWARD
UNIVERSITY OF MICHIGAN BOX 223131 PITTSBURGH,PA 15251	38-6006309	MICHIGAN	61,000				SUBAWARD

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 MINNESOTA NW 5957/ PO BOX 1450 MINNEAPOLIS,MN 55485	41-6007513	MINNESOTA	445,000				SUBAWARD
UNIVERSITY OF NEBRASKA 312 N 14TH ST ALEXANDER W LINCOLN,NE 68588	47-0491233	NEBRASKA	43,000				SUBAWARD

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 NORTH CAROLINA104 AIRPORT DR CHAPEL HILL,NC 27599	56-6001393	NORTH CAROLINA	914,000				SUBAWARD
UNIVERSITY OF OKLAHOMAPO BOX 26901 OKLAHOMA CITY,OK 73190	73-6017987	OKLAHOMA	701,000				SUBAWARD

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 PITTSBURGHPO BOX 371220 PITTSBURGH,PA 15251	25-0965591	501(C)(3)	433,000				SUBAWARD
UNIVERSITY OF SOUTH CAROLINA516 1/2 MAIN ST COLUMBIA,SC 29208	57-6001153	SOUTH CAROLINA	66,000				SUBAWARD

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 TEXASPO BOX 203382 HOUSTON,TX 77216	74-1761309	TEXAS	2,135,000				SUBAWARD
UNIVERSITY OF UTAH201 PRESIDENTS CR SALT LAKE CITY,UT 84112	87-6000525	UTAH	2,695,000				SUBAWARD

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 WASHINGTON12455 COLLECTIONS DR CHICAGO,IL 60693	91-6001537	WASHINGTON	1,991,000				SUBAWARD
UNIVERSITY OF WISCONSINPROGRAMS DRAWER 538 MILWAUKEE,WI 53278	39-1805963	WISCONSIN	428,000				SUBAWARD

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
URBAN INSTITUTE INC DEPT 950 2100 M ST NW WASHINGTON,DC 20042	52-0880375	501(C)(3)	105,000				SUBAWARD
VA POLYTECHNIC INST AND STATE UNIV1880 PRATT DR STE 2006 BLACKSBURG,VA 24060	54-6001805	VIRGINIA	7,000				SUBAWARD

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
VANDERBILT UNIVERSITY 2200 CHILDRENS WAY NASHVILLE,TN 37232	62-0476822	501(C)(3)	190,000				SUBAWARD
VIRGINIA COMMONWEALTH UNIVERSITYPO BOX 843039 RICHMOND,VA 23284	54-6001758	VIRGINIA	660,000				SUBAWARD

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
VISIONARY CONSULTING PARTNERS LLC4031 UNIVERSITY DRIVE FAIRFAX, VA 22030	26-2736634		50,000				SUBAWARD
WAKE FOREST UNIVERSITY MEDICAL CENTER BLVD WINSTON SALEM, NC 27157	56-0532138	501(C)(3)	30,000				SUBAWARD

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
WAKE FOREST UNIVERSITY HEALTHMEDICAL CTR BLVD WINSTONSALEM, NC 27157	22-3849199	501(C)(3)	215,000				SUBAWARD
WASHINGTON HOSPITAL CENTER110 IRVING ST NW WASHINGTON,DC 20010	52-1272129	501(C)(3)	103,000				SUBAWARD

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
WASHINGTON UNIVERSITY 700 ROSEDALE AVE CAMPUS ST LOUIS,MO 63130	43-0653611	501(C)(3)	320,000				SUBAWARD
WAYNE STATE UNIVERSITY 3750 WOODWARD AVE DETROIT,MI 48201	38-6028429	MICHIGAN	378,000				SUBAWARD

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
WELLSPAN HEALTHPO BOX 2767 YORK, PA 17401	22-2517863	501(C)(3)	16,000				SUBAWARD
WHITMAN WALKER HEALTH 1701 14TH ST NW WASHINGTON,DC 20009	52-1122122	501(C)(3)	120,000				SUBAWARD

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
WISCONSIN COLLABORATIVE FOR HEALTHCARE QUALITY INC PO Box 628051 MIDDLETON,WI 53562	55-0848113	501(C)(3)	40,000				SUBAWARD
WOMEN & INFANTS HOSPITAL OF RI101 DUDLEY ST PROVIDENCE,RI 02905	05-0258937	501(C)(3)	690,000				SUBAWARD

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
YALE UNIVERSITY155 WHITNEY AVENUE NEW HAVEN, CT 06520	06-0646973	501(C)(3)	410,000				SUBAWARD

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
The George Washington University

Employer identification number
53-0196584

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

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII
Note. The sum of columns (B)(i)-(iii) 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
SCHEDULE J, PART I, LINE 1A		TRAVEL FOR COMPANIONS THE UNIVERSITY REIMBURSES REASONABLE AND NECESSARY BUSINESS TRAVEL EXPENSES FOR THE SPOUSE OF AN OFFICER THE UNIVERSITY ALSO REIMBURSES 1 KEY EMPLOYEE AND 1 HIGHEST COMPENSATED EMPLOYEE FOR REASONABLE TRAVEL COSTS FOR THEIR SPOUSES TO ATTEND CERTAIN MEETINGS AND NATIONAL CONFERENCES RELATED TO UNIVERSITY BUSINESS TAX INDEMNIFICATION AND GROSS-UP PAYMENTS THE UNIVERSITY PROVIDED GROSS-UPS FOR LIMITED TYPES OF PAYMENTS TO 2 OFFICERS AND 1 FORMER OFFICER HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE THE PRESIDENT AND THE PROVOST AND EXECUTIVE VICE PRESIDENT FOR ACADEMIC AFFAIRS RESIDE IN ON-CAMPUS HOUSING AS A CONDITION OF THEIR EMPLOYMENT FOR THE CONVENIENCE OF THE UNIVERSITY THE RESIDENCES ARE USED FOR UNIVERSITY-RELATED BUSINESS AND ENTERTAINMENT PURPOSES ON A REASONABLE AND CONTINUAL BASIS THE VP FOR DEVELOPMENT, PER AGREEMENT, IS PROVIDED CAMPUS HOUSING THE DEAN OF THE LAW SCHOOL, PER AGREEMENT, WAS PROVIDED A HOUSING ALLOWANCE FOR A PORTION OF THE YEAR CLUB DUES CLUB DUES ARE PAID ON BEHALF OF 1 OFFICER, 2 KEY EMPLOYEES, AND 2 FORMER OFFICERS THE MEMBERSHIPS ARE USED PREDOMINANTLY FOR UNIVERSITY BUSINESS PURPOSES THE ABOVE BENEFITS WERE TREATED AS TAXABLE COMPENSATION WHEN APPROPRIATE
SCHEDULE J, PART I, LINE 4A		NOZER SINGPURWALLA, IRA LUPU, ROBERT CHERNAK, AND JOHN WILLIAMS RECEIVED SEVERANCE PAYMENTS IN THE AMOUNTS OF \$461,260, \$523,202, \$998,400, AND \$1,010,000, RESPECTIVELY
SCHEDULE J, PART I, LINE 4B		IN RECOGNITION OF THE FACT THAT THE UNIVERSITY'S CONTRIBUTIONS TO QUALIFIED RETIREMENT PLAN ('401(a) PLAN') ARE LIMITED BY AN IRS CAP ON COMPENSATION (\$250,000 FOR 2012) AND THE CONTRIBUTION LIMITS FOR DEFINED CONTRIBUTION PLANS (\$50,000 IN 2012), THE UNIVERSITY PROVIDES ALL EMPLOYEES WHO PARTICIPATE IN THE 401(a) PLAN AND WHO EARN COMPENSATION IN EXCESS OF THE CAP WITH CONTRIBUTIONS TO A NONQUALIFIED DEFERRED COMPENSATION PLAN ('457 (f) RESTORATION PLAN') EQUAL TO THE DIFFERENCE BETWEEN THE BENEFIT THE INDIVIDUAL WOULD HAVE RECEIVED UNDER THE 401(a) PLAN IF NO COMPENSATION OR CONTRIBUTION LIMITS APPLIED AND THE AMOUNT ACTUALLY ACCRUED UNDER THE 401(a) PLAN, LESS ANY EMPLOYER CONTRIBUTION TO THE GEORGE WASHINGTON UNIVERSITY ELIGIBLE DEFERRED COMPENSATION PLAN THE AMOUNTS REPORTED IN THIS SECTION ARE ALREADY INCLUDED IN THE COMPENSATION REPORTED IN SCHEDULE J, PART II STEVEN KNAPP - \$184,155 (\$38,640 current year) LOUIS H KATZ - \$27,300 STEVEN LERMAN - \$31,482 BETH NOLAN - \$102,443 (\$21,305 current year) LEO M CHALUPA - \$15,456 MICHAEL MORSBERGER - \$12,590 DONALD W LINDSEY - \$5,488 PAUL SCHIFF BERMAN - \$3,675 SHAHRAM SARKANI - \$52,706 NOZER SINGPURWALLA - \$7,237 THOMAS A MAZZUCHI - \$8,471 MICHAEL LONERGAN - \$26,000 ROBERT A CHERNAK - \$7,920 JOHN F WILLIAMS - \$18,997 JAMES L SCOTT - \$13,063
SCHEDULE J, PART I, LINE 7		GW OFFERED AN ANNUAL INCENTIVE COMPENSATION PLAN FOR CERTAIN SENIOR OFFICIALS THE ANNUAL AWARD OPPORTUNITY IS CAPPED AT A PERCENTAGE OF THEIR SALARY THE PLAN INCLUDES PROGRAMMATIC GOALS AND OBJECTIVES FOR THE YEAR THAT ARE SPECIFIC TO THEIR DEPARTMENT OR DIVISION, AS WELL AS THE INSTITUTIONAL GOALS THE PLAN IS APPROVED ANNUALLY BY THE BOARD OF TRUSTEES' COMMITTEE ON GOVERNANCE, COMPENSATION AND NOMINATIONS (THE "COMMITTEE") PRIOR TO THE PAYOUT, THE COMMITTEE REVIEWS THE PERFORMANCE OF SENIOR OFFICIALS ON THEIR GOALS AND OBJECTIVES AND AWARDS THE INCENTIVE PAYMENTS BASED ON COMPARABLE MARKET DATA THE UNIVERSITY ALSO ENGAGES ITS INTERNAL AUDITORS TO PERFORM SPECIFIC PROCEDURES TO DETERMINE WHETHER (1) MANAGEMENT'S REVIEW OF THE COMPENSATION PROCESS FOLLOWED INTERNAL POLICIES AND PROCEDURES, AND (2) CALCULATIONS AND SOURCE DATA USED TO DETERMINE THE INCENTIVE PAYMENTS COMPLY WITH THE PLAN BEFORE THE DATA IS PROVIDED TO THE COMMITTEE FOR CONSIDERATION
SCHEDULE J, PART II		ALL OF JEFFREY S AKMAN'S COMPENSATION REPORTED IN PART VII AND SCHEDULE J WERE RECEIVED FROM MEDICAL FACULTY ASSOCIATES FOR SERVICES PROVIDED TO GW
SCHEDULE J, PART II, COLUMN (B) (III)		NOTE THAT PART II, COLUMN (B)(III), OTHER REPORTABLE COMPENSATION, INCLUDES A PAYOUT OF DEFERRED COMPENSATION FOR LOUIS H KATZ AND ROBERT A CHERNAK THE DEFERRED COMPENSATION ARRANGEMENTS DATE BACK TO THE OFFICERS' HIRE DATES AT GW OVER TWO DECADES AGO, EVP&T KATZ IN 1990 AND FORMER SENIOR VICE PRESIDENT CHERNAK IN 1988 THE BOARD-APPROVED DEFERRED COMPENSATION ARRANGEMENTS ARE REPORTED AS TAXABLE INCOME IN CALENDAR YEAR 2012

Software ID:

Software Version:

EIN: 53-0196584

Name: The George Washington University

Form 990, Schedule J, Part 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				
STEVEN KNAPP	(i) (ii)	800,202	114,509	265,823	25,000	82,500	1,288,034	123,450
LOUIS H KATZ	(i) (ii)	688,000	103,950	589,160	25,000	7,997	1,414,107	
STEVEN LERMAN	(i) (ii)	538,710	84,735	20,564	56,482	91,652	792,143	
BETH NOLAN	(i) (ii)	441,053	59,459	122,722	25,000	11,203	659,437	66,600
JEFFREY S AKMAN	(i) (ii)	682,500	102,375				784,875	
LEO M CHALUPA	(i) (ii)	383,649	60,684	22,410	40,456	10,382	517,581	
MICHAEL MORSBERGER	(i) (ii)	344,965	47,351	72,137	37,590	20,664	522,707	
DONALD W LINDSEY	(i) (ii)	467,083	94,976	23,661	25,000	21,032	631,752	
DAVID P STEINOUR	(i) (ii)	294,123	39,973	5,292	25,000	7,671	372,059	
MARGUERITE E BARRATT	(i) (ii)	319,914		9,824	25,000	10,305	365,043	
PAUL SCHIFF BERMAN	(i) (ii)	455,180		64,100	28,675	27,714	575,669	
SHAHRAM SARKANI	(i) (ii)	754,504		70,948	25,000	20,875	871,327	
NOZER SINGPURWALLA	(i) (ii)	307,878		489,437	25,000	13,489	835,804	
IRA LUPU	(i) (ii)	241,050		524,997	14,533	6,008	786,588	
THOMAS A MAZZUCHI	(i) (ii)	498,181		27,754	25,000	19,794	570,729	
MICHAEL LONERGAN	(i) (ii)	482,323	10,000	27,903	51,000	21,074	592,300	
ROBERT A CHERNAK	(i) (ii)	492,893		1,547,684	25,000	17,270	2,082,847	
JOHN F WILLIAMS	(i) (ii)			1,028,997			1,028,997	
JAMES L SCOTT	(i) (ii)	357,374	55,000	31,760	25,000	9,798	478,932	
STEPHEN J TRACHTENBERG	(i) (ii)	330,085		64,539	25,000	14,194	433,818	

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

(A) Name		(B) Breakdown 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				
GREGORY E MAGGS	(i)	245,436		324	22,917	14,394	283,071	
	(ii)	0	0	0	0	0	0	
JOHN KUDLESS	(i)	143,227	5,000	17,883	14,710	3,836	184,656	
	(ii)							

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
The George Washington University

Employer identification number

53-0196584

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) PAUL SCHIFF BERMAN	KEY EMPLOYEE	SEE PART V		X	100,000	78,853		No	Yes		Yes	
Total												

Part III

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

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) FAMILY MEMBER OF PAUL SCHIFF BERMAN	SEE PART V	299,017	EMPLOYMENT OF SPOUSE		No

Part V Supplemental Information

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

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

SCHEDULE 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
The George Washington University

Employer identification number
53-0196584

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	12		
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		977,229	FMV - APPR OR EST
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	180	3,562,251	AVG HI/LOW GIFT DATE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential	X	1	629,183	SELLING PRICE
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 ► (ARCHIVES)	X	1	5,280,390	APPRAISAL
26 Other ► (EQUIPMENT)	X	10	442,128	FMV - APPR OR EST
27 Other ► (OTHER)	X	48	57,466	RECEIPTS
ADJ TO LIFE INS				
28 Other ► (POLICIES)	X	1	34,644	NET CASH VALUE

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

2

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

Yes

No

b

If "Yes," describe the arrangement in Part II

31

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

Yes

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
SCHEDULE M, PART I, COLUMN (B)		GW IS REPORTING THE NUMBER OF CONTRIBUTIONS
SCHEDULE M, LINE 32B		MORGAN STANLEY SMITH BARNEY RECEIVES AND SELLS DONATED SECURITIES
SCHEDULE M, LINE 33		THERE ARE NO REVENUES REPORTED ON PART I, LINE 1, COLUMN (C) BECAUSE THE ORGANIZATION DOES NOT RECORD THESE AS CONTRIBUTIONS EXCEPT FOR CERTAIN COLLECTIONS

SCHEDULE 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 The George Washington University	Employer identification number 53-0196584
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Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A		THE EXECUTIVE COMMITTEE, DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, HAS ALL OF THE POWERS AND DUTIES OF THE BOARD OF TRUSTEES EXCEPT THE POWER TO ELECT TRUSTEES, TO AMEND THE BYLAWS, OR TO APPROVE THE MERGER OF ANY CORPORATION WITH THE UNIVERSITY

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

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

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

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

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15		<p>THE COMMITTEE ON GOVERNANCE, COMPENSATION AND NOMINATIONS (THE "COMMITTEE") OF THE UNIVERSITY'S BOARD OF TRUSTEES WAS DELEGATED THE AUTHORITY BY THE BOARD TO SET EXECUTIVE COMPENSATION. THE COMMITTEE, SERVING AS THE COMPENSATION COMMITTEE, ANNUALLY REVIEWS AND DETERMINES THE COMPENSATION FOR THE PRESIDENT, AND REVIEWS AND APPROVES THE COMPENSATION RECOMMENDED BY THE PRESIDENT FOR THE OFFICERS AND KEY EMPLOYEES. IN MAKING ITS ASSESSMENTS, THE COMMITTEE OBTAINS COMPENSATION INFORMATION PREPARED BY AN INDEPENDENT COMPENSATION CONSULTING FIRM THAT INCLUDES MARKET DATA FROM COMPARABLE UNIVERSITIES FOR COMPARABLE POSITIONS. BEGINNING IN FY2014, THE RESPONSIBILITY FOR THIS PROCESS IS DELEGATED TO THE EXECUTIVE COMMITTEE. IN DETERMINING THE PRESIDENT'S COMPENSATION, THE COMMITTEE CONSIDERS THE CONSULTANT'S REPORT AND MARKET DATA IN ADDITION TO THE TERMS OF HIS EMPLOYMENT CONTRACT. THE COMMITTEE ALSO TAKES INTO CONSIDERATION ACCOMPLISHMENTS FOR THE CURRENT FISCAL YEAR AS WELL AS GOALS FOR THE UPCOMING FISCAL YEAR. WHEN REVIEWING THE REASONABLENESS OF THE SENIOR OFFICIALS' COMPENSATION, IN ADDITION TO CONSIDERING THE CONSULTANT'S REPORT AND MARKET DATA, THE COMMITTEE ALSO REVIEWS SENIOR OFFICIALS' PERFORMANCE, TAKING INTO ACCOUNT THE PRESIDENT'S RECOMMENDATIONS AND OTHER INFORMATION AS IT DEEMS APPROPRIATE FROM TIME TO TIME, SUCH AS GOALS AND ACCOMPLISHMENTS, LENGTH OF SERVICE, AND PRIOR SALARY HISTORY. IF ANY SENIOR OFFICIAL'S COMPENSATION IS ABOVE MARKET DATA, THE COMMITTEE CONSIDERS ALL RELEVANT FACTORS AND, IF IT APPROVES THE COMPENSATION, EXPLAINS ITS RATIONALE AND INCLUDES ITS EXPLANATION IN THE MINUTES. THE COMMITTEE KEEPS MINUTES OF ALL FINAL ACTIONS AT EACH MEETING.</p>

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

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

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

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

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

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
The George Washington University

Employer identification number
53-0196584

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
(1) DYNAMO BRASIL VII LLC CORP TST CTR 1209 ORANGE ST WILMINGTON, DE 19801	INVESTMENTS	DE		61,138,762	GW
(2) GEORGE WASHINGTON WORLDWIDE LLC 2121 EYE STREET NW WASHINGTON, DC 20052	INTL EDUC	DC		179,752	GW

Part II Identification of Related Tax-Exempt 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) THE GEORGE WASHINGTON ALUMNI ASSOCIATION 1918 F STREET NW WASHINGTON, DC 20052 52-1437464	ALUM ACTIVITY	DC	501(C)(3)	TYPE III	NA		No
(2) MOUNT VERNON COLLEGE TAX DEPT 45155 RESEARCH PLACE STE ASHBURN, VA 20147 53-0196635	EDUC/SUPP GW	DC	501(C)(3)	TYPE I	GW	Yes	
(3) WASHINGTON RESEARCH LIBRARY CONSORTIUM 901 COMMERCE DRIVE UPPER MARLBORO, MD 20774 52-1559828	LIBRARY SVCS	DC	501(C)(3)	TYPE II	NA		No

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) Dispropportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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) 37 CHARITABLE TRUSTS	CHARITABLE GIV		NA	TRUST				Yes	
(2) QIAOHUA MGMT CONSULTING (SUZHOU) CO LTD KAI TAI BLDG NO 158 RENAI RD SUZHOU, JIANGSU CH	CONSULTING SVCS	CH	GWWW LLC	C CORP	407,599	274,745	100 000 %	Yes	

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

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

No

No

No

No

No

No

No

No

No

No

No

No

Yes

No

No

No

No

No

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
(1) THE GEORGE WASHINGTON ALUMNI ASSOCIATION	S	80,000	INVOICES
(2) QIAOHUA MGMT CONSULTING (SUZHOU) CO LTD	B	200,000	REG CAPITAL
(3) QIAOHUA MGMT CONSULTING (SUZHOU) CO LTD	M	250,200	INVOICES
(4) WASHINGTON RESEARCH LIBRARY CONSORTIUM	M	1,065,335	INVOICES

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: 53-0196584
Name: The George Washington 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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