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Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

Northwestern's mission is to provide the highest-quality education for its students, to develop innovative programs in research, and to sustain an academic community that embraces these enterprises

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 \$ 1,482,885,007 including grants of \$ 289,452,080) (Revenue \$ 1,000,323,932)

Education of students For the 2013 academic year, 8,446 undergraduates and 8,473 graduates and professional school students enrolled full-time at the University The exempt purpose of Northwestern University is to provide educational services to its students This includes superior undergraduate education for a diverse student body in a comprehensive range of academic and professional fields At the graduate level, Northwestern's role encompasses offerings in the major academic and professional fields, closely related to research, creative activities, and clinical services

4b

(Code) (Expenses \$ 430,651,000 including grants of \$ 87,714,070) (Revenue \$ 538,996,897)

Research activities The research program at Northwestern University is a major component of University efforts, assuring institutional leadership in scientific discovery, intellectual inquiry, and creative performance The character of this research shapes all areas of University endeavor, especially graduate education as well as undergraduate studies

4c

(Code) (Expenses \$ 102,521,000 including grants of \$) (Revenue \$ 76,980,241)

Auxiliary enterprises serve the educational mission by primarily providing residences and food services, and other various goods and services to support University student, faculty, and staff activities

4d

Other program services (Describe in Schedule O)

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






















4e

Total program service expenses

2,016,057,007

Form 990 (2012)

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

Part IV

Checklist of Required Schedules (continued)

| | | | | |
|-----|--|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | Yes | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | Yes | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> | 24a | Yes | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | No |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | No |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | No |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <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 | Yes | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 | Yes | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | Yes | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | 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 | | No |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | Yes | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <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: QA, UK See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | No |
| 5b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | No |
| 5c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | | No |
| 6b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | |
| 7a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | Yes | |
| 7b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | Yes | |
| 7c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | No |
| 7d | If "Yes," indicate the number of Forms 8282 filed during the year. | | |
| 7e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | No |
| 7f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | No |
| 7g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | |
| 7h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | No |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| 9a | Did the organization make any taxable distributions under section 4966? | | No |
| 9b | Did the organization make a distribution to a donor, donor advisor, or related person? | | No |
| 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 | 1a | 36 | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 25 | |
| 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 | | No |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | No |
| 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 | | No |

Section C. Disclosure

| | | |
|----|--|--|
| 17 | List the States with which a copy of this Form 990 is required to be filed | AK , AZ , KY , MD , MI , NH , NY , OH , 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 | Karl Turro Controller 619 Clark St Evanston, IL (847) 491-4722 |

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 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 | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 1b Sub-Total | | | | | | | | | | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | | | |
| d Total (add lines 1b and 1c) | | | | | | | | 11,820,925 | 7,426,295 | 2,582,178 |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **2,393**

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

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------|---------------------|
| LBR Consolidated Services 440 Bonner Rd Wauconda IL 60084 | Custodial services | 6,914,963 |
| Northwestern Memorial Hospital 251 East Huron Chicago IL 60611 | Clinical services | 3,843,305 |
| Free Enterprise System One Sodrel Drive Jeffersonville IN 47130 | Transportation services | 2,501,440 |
| Yorktown Energy Partners 150 East 42nd St 8th Fl New York NY 10017 | Investment management | 1,931,208 |
| Midwest Moving & Storage Inc 1255 Tonne Rd Elk Grove Village IL 60007 | Moving services | 1,888,206 |

| | | |
|---|--|-----|
| 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 | 510 |
|---|--|-----|

Part VIII

Statement of Revenue

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

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|---|-----------------------|---|----------------------|--|---|---|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a | Federated campaigns 1a | | | | |
| | b | Membership dues 1b | | | | |
| | c | Fundraising events 1c | 1,727,405 | | | |
| | d | Related organizations 1d | | | | |
| | e | Government grants (contributions) 1e | 9,441,660 | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above 1f | 319,937,260 | | | |
| | g | Noncash contributions included in lines 1a-1f \$ | 28,281,762 | | | |
| | h | Total. Add lines 1a-1f | 331,106,325 | | | |
| Program Service Revenue | Business Code | | | | | |
| | 2a | Tuition and fees | 900099840,247,388 | 840,247,388 | | |
| | b | Research activities | 900099538,996,897 | 538,996,897 | | |
| | c | Educational activities | 900099123,051,360 | 123,051,360 | | |
| | d | Auxilliary enterprises | 90009976,980,241 | 76,980,241 | | |
| | e | Medical departments | 90009926,638,314 | 26,638,314 | | |
| | f | All other program service revenue | 7,752,529 | 7,752,529 | | |
| | g | Total. Add lines 2a-2f | 1,613,666,729 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | 120,848,440 | 5,592,352 | | 115,256,088 |
| | 4 | Income from investment of tax-exempt bond proceeds | | | | |
| | 5 | Royalties | 412,859,502 | | | 412,859,502 |
| | 6a | (i) Real | | | | |
| | | Gross rents | | | | |
| | | 5,277,930 | | | | |
| | | (ii) Personal | | | | |
| | b | Less rental expenses | 1,689,946 | | | |
| | c | Rental income or (loss) | 3,587,984 | | | |
| | d | Net rental income or (loss) | 3,587,984 | | 22,907 | 3,565,077 |
| | 7a | (i) Securities | | | | |
| | | Gross amount from sales of assets other than inventory | | | | |
| | | 1,276,656,799 | | | | |
| | | (ii) Other | | | | |
| | b | Less cost or other basis and sales expenses | 950,652,670 | 682,294,558 | | |
| | c | Gain or (loss) | 326,004,129 | 63,123,989 | | |
| | d | Net gain or (loss) | 389,128,118 | -2,958,011 | | 392,086,129 |
| | 8a | Gross income from fundraising events (not including \$ 1,727,405 of contributions reported on line 1c) See Part IV, line 18 | | | | |
| | a | | | | | |
| | 305,032 | | | | | |
| | b | Less direct expenses b | 485,805 | | | |
| | c | Net income or (loss) from fundraising events | -180,773 | | | -180,773 |
| | 9a | Gross income from gaming activities See Part IV, line 19 | | | | |
| | a | | | | | |
| | b | Less direct expenses b | | | | |
| | c | Net income or (loss) from gaming activities | | | | |
| | 10a | Gross sales of inventory, less returns and allowances | | | | |
| | a | | | | | |
| | b | Less cost of goods sold b | | | | |
| | c | Net income or (loss) from sales of inventory | | | | |
| | Miscellaneous Revenue | | Business Code | | | |
| | 11a | Investment in partners | 52300014,103,919 | | 14,103,919 | |
| | b | Alumni affinity card | 900099415,094 | | | 415,094 |
| | c | Alumni travel study | 561520205,080 | | 205,080 | |
| | d | All other revenue | 192,608 | | 192,608 | |
| | e | Total. Add lines 11a-11d | 14,916,701 | | | |
| | 12 | Total revenue. See Instructions | 2,885,933,026 | 1,616,301,070 | 14,524,514 | 924,001,117 |

Part IX

Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21. | 78,241,350 | 78,241,350 | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22. | 293,060,069 | 293,060,069 | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16. | 5,864,731 | 5,864,731 | | |
| 4 | Benefits paid to or for members. | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees. | 14,134,622 | 6,457,047 | 7,195,596 | 481,979 |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). | | | | |
| 7 | Other salaries and wages. | 846,641,395 | 785,757,434 | 38,333,495 | 22,550,466 |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). | 61,566,676 | 56,449,927 | 3,187,281 | 1,929,468 |
| 9 | Other employee benefits. | 75,553,831 | 69,157,894 | 3,984,101 | 2,411,836 |
| 10 | Payroll taxes. | 53,240,674 | 48,763,518 | 2,788,871 | 1,688,285 |
| 11 | Fees for services (non-employees): | | | | |
| a | Management. | | | | |
| b | Legal. | 4,075,979 | | 4,075,979 | |
| c | Accounting. | 890,118 | | 890,118 | |
| d | Lobbying. | 628,390 | | 628,390 | |
| e | Professional fundraising services. See Part IV, line 17. | 301,025 | | | 301,025 |
| f | Investment management fees. | 38,954,167 | | 38,954,167 | |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O). | 158,166,989 | 150,629,770 | 5,399,017 | 2,138,202 |
| 12 | Advertising and promotion. | 19,088,336 | 12,430,371 | 1,143,653 | 5,514,312 |
| 13 | Office expenses. | 138,437,300 | 131,541,534 | 3,076,144 | 3,819,622 |
| 14 | Information technology. | 18,389,922 | 13,764,768 | 4,570,758 | 54,396 |
| 15 | Royalties. | 45,628,523 | 45,624,048 | 4,475 | |
| 16 | Occupancy. | 103,653,921 | 102,049,725 | 1,133,222 | 470,974 |
| 17 | Travel. | 43,935,048 | 42,356,009 | 522,744 | 1,056,295 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials. | | | | |
| 19 | Conferences, conventions, and meetings. | 25,477,521 | 23,995,230 | 648,833 | 833,458 |
| 20 | Interest. | 39,076,493 | | 39,076,493 | |
| 21 | Payments to affiliates. | | | | |
| 22 | Depreciation, depletion, and amortization. | 110,388,956 | 105,858,974 | 3,301,098 | 1,228,884 |
| 23 | Insurance. | | | | |
| 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 | Prizes and awards. | 28,083,322 | 28,083,322 | | |
| b | Revenue sharing/refunds. | 14,890,905 | 14,890,905 | | |
| c | Other. | 2,432,874 | 1,080,381 | 1,352,493 | |
| d | | | | | |
| e | All other expenses. | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e. | 2,220,803,137 | 2,016,057,007 | 160,266,928 | 44,479,202 |
| 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 | |
| | 2 | Savings and temporary cash investments | | 612,618,001 | 2 | 840,758,581 |
| | 3 | Pledges and grants receivable, net | | 99,289,000 | 3 | 116,395,000 |
| | 4 | Accounts receivable, net | | 275,488,106 | 4 | 260,712,558 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | 2,753,689 | 5 | 3,884,810 |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | | | 6 | |
| | 7 | Notes and loans receivable, net | | 73,008,377 | 7 | 85,904,426 |
| | 8 | Inventories for sale or use | | 1,997,899 | 8 | 2,696,962 |
| | 9 | Prepaid expenses and deferred charges | | 14,547,205 | 9 | 15,919,718 |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a | 2,937,661,056 | | |
| | b | Less accumulated depreciation | 10b | 1,254,022,184 | 1,576,024,652 | 10c 1,683,638,872 |
| | 11 | Investments—publicly traded securities | | 559,049,053 | 11 | 719,753,814 |
| | 12 | Investments—other securities See Part IV, line 11 | | 6,624,131,379 | 12 | 7,159,848,113 |
| | 13 | Investments—program-related See Part IV, line 11 | | 166,565 | 13 | 7,946 |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | 8 | 15 | 2,281 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | 9,839,073,934 | 16 | 10,889,523,081 |
| Liabilities | 17 | Accounts payable and accrued expenses | | 233,685,946 | 17 | 208,102,470 |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | 252,332,777 | 19 | 260,684,481 |
| | 20 | Tax-exempt bond liabilities | | 602,309,819 | 20 | 598,966,207 |
| | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 170,000,000 | 23 | 150,000,000 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24) Complete Part X of Schedule D | | 481,637,861 | 25 | 536,577,559 |
| | 26 | Total liabilities. Add lines 17 through 25 | | 1,739,966,403 | 26 | 1,754,330,717 |
| 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 | | 4,926,357,531 | 27 | 5,727,500,364 |
| | 28 | Temporarily restricted net assets | | 2,047,109,000 | 28 | 2,226,495,000 |
| | 29 | Permanently restricted net assets | | 1,125,641,000 | 29 | 1,181,197,000 |
| | 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 | | 8,099,107,531 | 33 | 9,135,192,364 |
| | 34 | Total liabilities and net assets/fund balances | | 9,839,073,934 | 34 | 10,889,523,081 |

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 | 2,885,933,026 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 2,220,803,137 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 665,129,889 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 8,099,107,531 |
| 5 | Net unrealized gains (losses) on investments | 5 | 328,451,000 |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 42,503,944 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 9,135,192,364 |

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID:

Software Version:

EIN: 36-2167817

Name: Northwestern 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 | | | |
| Peter J Barns Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| John A Canning Jr Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Nicholas D Chabraja Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| A Steven Crown Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Richard H Dean Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Deborah L DeHaas Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Charles W Douglas Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| D Cameron Findlay Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Dennis J FitzSimons Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| T Bondurant French Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Christopher B Galvin Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| J Douglas Gray Trustee | 1 00 | X | | | | | | 0 | 12,250 | 0 |
| Philip L Harris Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Jay C Hoag Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Ellen Philips Katz Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Lester B Knight Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Timothy K Krauskopf Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Edward M Liddy Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| J Landis Martin Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Lee M Mitchell Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Wendy M Nelson Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| William A Osborn Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Jane DiRenzo Pigott Trustee | 1 00 | X | | | | | | 0 | 3,850 | 0 |
| JB Pritzker Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| M Jude Reyes Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Patrick G Ryan Jr Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Paul L Sagan Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| William E Sagan Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| D Gideon Searle Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Andrew E Senyer MD Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Benjamin W Slivka Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Timothy P Sullivan Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Jeffrey W Ubben Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Frederick H Waddell Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| David B Weinberg Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Miles D White Trustee | 1 00 | X | | | | | | 0 | 0 | 0 |
| Morton O Schapiro President | 40 00 | | | X | | | | 940,027 | 0 | 392,219 |
| Daniel I Linzer Provost | 40 00 | | | X | | | | 572,969 | 0 | 196,437 |
| Eugene S Sunshine Senior VP for Business | 40 00 | | | X | | | | 782,652 | 0 | 66,880 |
| Thomas G Cline VP and General Counsel | 40 00 | | | X | | | | 458,227 | 0 | 91,712 |
| Alan K Cubbage VP University Relations | 40 00 | | | X | | | | 251,233 | 0 | 25,416 |
| Manlyn McCoy VP for Administration | 40 00 | | | X | | | | 294,786 | 0 | 43,671 |
| William H McLean VP and Chief Investment Of | 40 00 | | | X | | | | 1,892,865 | 0 | 979,306 |
| Robert E McQuinn VP for Development | 40 00 | | | X | | | | 428,435 | 0 | 53,544 |
| Eric G Neilson VP Medical School | 30 00 | | | X | | | | 570,962 | 564,229 | 69,292 |
| Sean Reynolds VP Information Technology | 30 00 40 00 | | | X | | | | 389,750 | 0 | 30,753 |
| Patricia Telles-Irvin VP Student Affairs | 40 00 | | | X | | | | 348,099 | 0 | 41,877 |
| Joseph T Walsh Jr VP for Research | 40 00 | | | X | | | | 308,793 | 0 | 76,619 |
| James J Phillips VP Athletics | 40 00 | | | X | | | | 829,400 | 0 | 101,485 |
| Ronald Naylor Assoc VP Facilities Mgmnt | 40 00 | | | | X | | | 334,840 | 0 | 38,251 |

| 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 | | | |
| Patrick M McCarthy Professor, Medical School | 6 00 | | | | | | | 198,428 | 1,791,190 | 59,002 |
| | 54 00 | | | | | X | | | | |
| Tyler Robert Koski Assoc Professor, Medical School | 30 | | | | | | | 6,500 | 1,510,991 | 53,856 |
| | 59 70 | | | | | X | | | | |
| Patrick W Fitzgerald II Head Coach | 40 00 | | | | | | | 2,434,005 | 0 | 46,982 |
| | | | | | | X | | | | |
| Murad Alam Asst Professor, Medical S | 10 | | | | | | | 1,000 | 1,566,078 | 38,805 |
| | 59 90 | | | | | X | | | | |
| Jayesh Mehta Professor, Medical School | 6 00 | | | | | | | 156,329 | 1,326,202 | 53,679 |
| | 54 00 | | | | | X | | | | |
| William J Banis Former VP Student Affairs | 0 00 | | | | | | X | 185,886 | 0 | 27,649 |
| | | | | | | | | | | |
| Jeffrey Glassroth Former Interim VP Medical | 18 00 | | | | | | X | 274,800 | 651,505 | 63,242 |
| | 42 00 | | | | | | | | | |
| Morteza A Rahimi Former VP Information Tech | 40 00 | | | | | | X | 160,939 | 0 | 31,501 |
| | | | | | | | | | | |

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 Northwestern University | Employer identification number 36-2167817 |
|---|--|

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

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

- 1

☐

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

☒

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

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

☐

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

☐

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

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

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

(iii)

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

☐

Provide the following information about the supported organization(s)

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

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

Part II

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

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

| Section B. Total Support | | | | | | |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 11 Total support (Add lines 7 through 10) | | | | | | |
| 12 Gross receipts from related activities, etc (see instructions) | | | | | 12 | |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶ | | | | | | |

| Section C. Computation of Public Support Percentage | | | |
|---|----|--|---|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | | |
| 15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 | | |
| 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | ▶ |
| b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | ▶ |
| 17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization | | | ▶ |
| b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization | | | ▶ |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | ▶ |

Part 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 Northwestern University | Employer identification number 36-2167817 |
|---|--|

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) | | 829,965 | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | 829,965 | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | 2,221,915,905 | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | 2,222,745,870 | | | | | | | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns | | 1,000,000 | | | | | | | | | | | | | |
| <table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000 | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | 250,000 | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- | | 0 | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- | | 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 | 785,982 | 764,514 | 748,516 | 829,965 | 3,128,977 |
| 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 |
|------------|------------------|-------------|
|------------|------------------|-------------|

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 Northwestern University | Employer identification number 36-2167817 |
|---|--|

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 | 1 | |
| 2 Aggregate contributions to (during year) | 286,887 | |
| 3 Aggregate grants from (during year) | 739,550 | |
| 4 Aggregate value at end of year | 15,695,353 | |
| 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? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

Part II

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

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

☐ Preservation of land for public use (e g , recreation or 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 | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |

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

\$

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

\$

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

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 | 5,574,319,000 | 5,474,935,000 | 4,726,940,000 | 4,398,200,000 | 5,378,142,000 |
| b Contributions | 393,797,000 | 210,535,000 | 146,273,000 | 61,037,000 | 49,755,000 |
| c Net investment earnings, gains, and losses | 594,849,000 | 204,262,000 | 856,610,000 | 400,914,000 | -902,883,000 |
| d Grants or scholarships | 59,645,003 | 41,493,408 | 52,624,971 | 11,750,000 | 15,536,000 |
| e Other expenditures for facilities and programs | 220,189,997 | 273,919,592 | 202,263,029 | 121,461,000 | 110,979,000 |
| f Administrative expenses | | | | | 299,000 |
| g End of year balance | 6,283,130,000 | 5,574,319,000 | 5,474,935,000 | 4,726,940,000 | 4,398,200,000 |

2

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

a

Board designated or quasi-endowment ▶ 50 000 %

b

Permanent endowment ▶ 18 000 %

c

Temporarily restricted endowment ▶ 32 000 %

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

(ii) related organizations

| | Yes | No |
|--------|-----|----|
| 3a(i) | | No |
| 3a(ii) | | 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 | | 28,388,669 | | 28,388,669 |
| b Buildings | | 2,417,212,090 | 912,767,728 | 1,504,444,362 |
| c Leasehold improvements | | 12,076,573 | 4,919,496 | 7,157,077 |
| d Equipment | | 479,983,724 | 336,334,960 | 143,648,764 |
| e Other | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ | | | | 1,683,638,872 |

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| | | | | |
|---|--|----|----|--|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | |
| a | Net unrealized gains on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | | 5 | |

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

Part XIII

Supplemental Information

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

| Identifier | Return Reference | Explanation |
|---|-------------------|--|
| | Part III, Line 1a | The University does not capitalize collections. As stated in the University notes to the financial statements, the accounting policy for library collections is to expense all purchases. Museum purchases are accounted for similarly. Gifts of art and similar tangible personal property are accounted for as gifts-in-kind. |
| Description of Intended Use of Endowment Funds | Part V, Line 4 | The University's endowment funds purposes include instruction, research, library collections, scholarships and awards, and building construction. |
| Description of Uncertain Tax Positions Under FIN 48 | Part X, Line 2 | The University makes an assessment of individual tax positions and follows a process for recognition and measurement of uncertain tax positions. Tax positions are evaluated on whether they meet the "more likely than not" standard for sustainability on examination by tax authorities. |
| | | Part X, line 5, Asset Retirement Obligations. The University records all known asset retirement obligations (ARO) for which the fair value of the liability can be reasonably estimated, including certain obligations relating to regulatory remediation. ARO covered include those for which an entity has a legal obligation to perform an asset retirement activity, however, the timing and/or method of settling the obligation are conditional on a future event that may or may not be within the control of the entity. |

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
Northwestern University

Employer identification number

36-2167817

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?
- If you answered "No" to any of the above, please explain If you need more space, use Part II

- 5 Does the organization discriminate by race in any way with respect to
- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?
- If you answered "Yes" to any of the above, please explain If you need more space, use Part II

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- b Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" to either line 6a or line 6b, explain on Part II
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

| | YES | NO |
|----|-----|----|
| 1 | Yes | |
| 2 | Yes | |
| 3 | Yes | |
| 4a | Yes | |
| 4b | Yes | |
| 4c | Yes | |
| 4d | Yes | |
| 5a | | No |
| 5b | | No |
| 5c | | No |
| 5d | | No |
| 5e | | No |
| 5f | | No |
| 5g | | No |
| 5h | | No |
| 6a | Yes | |
| 6b | | No |
| 7 | Yes | |

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

| Identifier | Return Reference | Explanation |
|---|----------------------------|---|
| Explanation of Nondiscriminatory Policy Publication | Schedule E, Part I, Line 3 | Policies are included in student, faculty, and staff handbooks. Policies are also annually reprinted in the school newspaper. |
| Explanation of Government Financial Assistance | Schedule E, Part I, Line 6 | The University receives financial support from agencies of the federal government for research purposes and for financial aid to students; additional financial aid support for students is received from agencies of the State of Illinois. |
| Explanation of Racial Nondiscrimination Compliance | Schedule E, Part I, Line 7 | Northwestern University does not discriminate or permit discrimination by any member of its community against any individual on the basis of race, color, religion, national origin, sex, sexual orientation, gender identity, gender expression, parental status, marital status, age, disability, citizenship, or veteran status, or genetic information in matters of admissions, employment, housing, or services or in the educational programs or activities it operates. |

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
Northwestern University

Employer identification number
36-2167817

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 | 1 | 165 | | | 38,609,754 |
| b Total from continuation sheets to Part I | 0 | 0 | | | 1,883,630,879 |
| c Totals (add lines 3a and 3b) | 1 | 165 | | | 1,922,240,633 |

Part II

1

2

3

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.

[illegible]

Part IV Foreign Forms

- 1

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

☒ Yes ☐ No
- 2

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

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☒ Yes ☐ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☒ Yes ☐ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☒ Yes ☐ No

Supplemental Information

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

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 36-2167817
Name: Northwestern 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 |
|--|-------------------------------------|---|--|--|-----------------------------------|
| Middle East and North Africa | 1 | 165 | Maintaining offices, employees or agents | International campus in Doha, Qatar for students in journalism and communications | 38,237,634 |
| East Asia and the Pacific | | | Fundraising | | 166,989 |
| Europe (Including Iceland & Greenland) - | | | Fundraising | | 14,247 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|--|-------------------------------------|---|--|---|-----------------------------------|
| Middle East and North Africa | | | Fundraising | | 7,581 |
| North America - Canada and Mexico, but | | | Fundraising | | 1,590 |
| South America - Argentina, Bolivia, | | | Fundraising | | 6,323 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|---------------------------|-------------------------------------|---|--|---|-----------------------------------|
| South Asia | | | Fundraising | | 3,942 |
| East Asia and the Pacific | | | Program services | Research | 171,448 |
| Europe | | | Program services | Research | 2,376,450 |

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 | | | Program services | Research | 180,507 |
| North America | | | Program services | Research | 1,448,122 |
| South Asia | | | Program services | Research | 44,877 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|-----------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Sub-Saharan Africa | | | Program services | Research | 4,500 |
| Central America and the Caribbean | | | Program services | Study abroad programs and courses abroad | 216,515 |
| East Asia and the Pacific | | | Program services | Study abroad programs and courses abroad | 2,348,625 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Europe | | | Program services | Study abroad programs and courses abroad | 2,793,285 |
| Middle East and North Africa | | | Program services | Study abroad programs and courses abroad | 1,723,981 |
| North America | | | Program services | Study abroad programs and courses abroad | 567,179 |

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 | | | Program services | Study abroad programs and courses abroad | 263,833 |
| South Asia | | | Program services | Study abroad programs and courses abroad | 81,033 |
| Sub-Saharan Africa | | | Program services | Study abroad programs and courses abroad | 746,743 |

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 |
|---------------------------|-------------------------------------|---|--|---|-----------------------------------|
| | | | Unrelated trade or business | | 998 |
| East Asia and the Pacific | | | Unrelated trade or business | | 4,380 |
| Europe | | | Unrelated trade or business | | 19,427 |

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 | | | Unrelated trade or business | | 1,004 |
| Russia & the Newly Independent States | | | Unrelated trade or business | | 4,528 |
| South America | | | Unrelated trade or business | | 2,097 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|-----------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Sub-Saharan Africa | | | Unrelated trade or business | | 7,026 |
| Central America and the Caribbean | | | Investments | | 1,539,500,000 |
| Europe | | | Investments | | 206,605,000 |

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 | | | Investments | | 47,517,000 |
| South America | | | Investments | | 13,894,000 |
| Sub-Saharan Africa | | | Investments | | 50,988,000 |

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 |
|-----------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 6,521 |
| Central America and the Caribbean | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 91,315 |
| East Asia and the Pacific | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 1,492,883 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Europe | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 3,146,155 |
| Middle East and North Africa | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 464,763 |
| North America | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 428,703 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|---------------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Russia & the Newly Independent States | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 50,891 |
| South America | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 266,619 |
| South Asia | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 236,267 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|-----------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Sub-Saharan Africa | | | Program services | Business travel abroad (includes travel to attend seminars and conferences) | 226,920 |
| Central America and the Caribbean | | | Grantmaking | | 69,716 |
| East Asia and the Pacific | | | Grantmaking | | 416,638 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|------------------------------|-------------------------------------|---|--|---|-----------------------------------|
| Europe | | | Grantmaking | | 3,456,169 |
| Middle East and North Africa | | | Grantmaking | | 246,249 |
| North America | | | Grantmaking | | 1,049,068 |

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 | | | Grantmaking | | 175,337 |
| South Asia | | | Grantmaking | | 32,884 |
| Sub-Saharan Africa | | | Grantmaking | | 409,671 |

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

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|--|-------------------------------------|---|--|---|-----------------------------------|
| Europe (Including Iceland & Greenland) | | | Program-related investments | | 25,000 |

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) |
|--------------------------|---|---------------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | East Asia and the Pacific | Grant subaward from sponsored research funds | 25,885 | ACH direct deposit or Check | | | |
| | | Europe | Grant subaward from sponsored research funds | 924,818 | ACH direct deposit or Check | | | |
| | | Europe | Grant subaward from sponsored research funds | 43,090 | ACH direct deposit or Check | | | |
| | | Europe | Grant subaward from sponsored research funds | 82,165 | ACH direct deposit or Check | | | |

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

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|------------------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe | Grant subaward from sponsored research funds | 102,380 | ACH direct deposit or Check | | | |
| | | Middle East and North Africa | Grant subaward from sponsored research funds | 119,014 | ACH direct deposit or Check | | | |
| | | North America | Grant subaward from sponsored research funds | 911,612 | ACH direct deposit or Check | | | |
| | | North America | Grant subaward from sponsored research funds | 5,960 | ACH direct deposit or Check | | | |

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

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|--------------------------|---|--|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | North America - Canada and Mexico, but | Grant subaward from sponsored research funds | 5,252 | ACH direct deposit or Check | | | |
| | | North America - Canada and Mexico, but | Grant subaward from sponsored research funds | 26,429 | ACH direct deposit or Check | | | |
| | | North America - Canada and Mexico, but | Grant subaward from sponsored research funds | 23,636 | ACH direct deposit or Check | | | |
| | | Middle East and North Africa | Grant subaward from sponsored research funds | 30,908 | ACH direct deposit or Check | | | |

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 | Grant subaward from sponsored research funds | 70,450 | ACH direct deposit or Check | | | |
| | | North America - Canada and Mexico, but | Grant subaward from sponsored research funds | 8,900 | ACH direct deposit or Check | | | |
| | | Sub-Saharan Africa | Grant subaward from sponsored research funds | 9,558 | ACH direct deposit or Check | | | |
| | | North America | Grant subaward from sponsored research funds | 7,300 | ACH direct deposit or Check | | | |

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) |
|--------------------------|---|------------------------------|--|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Middle East and North Africa | Grant subaward from sponsored research funds | 44,034 | ACH direct deposit or Check | | | |
| | | East Asia and the Pacific | Grant subaward from sponsored research funds | 11,902 | ACH direct deposit or Check | | | |
| | | North America | Grant subaward from sponsored research funds | 59,979 | ACH direct deposit or Check | | | |
| | | Sub-Saharan Africa | Grant subaward from sponsored research funds | 262,899 | ACH direct deposit or Check | | | |

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 | Grant subaward from sponsored research funds | 84,946 | ACH direct deposit or Check | | | |
| | | Europe (Including Iceland & Greenland) | Grant subaward from sponsored research funds | 46,648 | ACH direct deposit or Check | | | |
| | | Europe (Including Iceland & Greenland) | Grant subaward from sponsored research funds | 59,841 | ACH direct deposit or Check | | | |
| | | East Asia and the Pacific | Grant subaward from sponsored research funds | 14,884 | ACH direct deposit or Check | | | |

Form 990 Schedule F - Supplemental Information

| Identifier | ReturnReference | Explanation |
|---|-----------------|---|
| Procedure for Monitoring Grants Outside the U S | | Schedule F, Part I, Line 2 Grants or other assistance are awarded to foreign organization s or entities pursuant to the University policies and procedures for all grant subawards Such subawards are monitored through the University's Office for Sponsored Research (OSR) and the University's Office of Accounting Services for Research and Sponsored Programs (AS RSP) All subaward documentation including purchase orders, related charges and invoices a re reviewed and monitored by ASRSP and confirmed with the principal investigator The prin cipal investigator must certify that the subaward costs are in accordance with OMB A-21 co st principles, also, ASRSP requests and collects audit reports from subaward recipients to monitor compliance If the information is not furnished to ASRSP , payment may be withheld Grants and other assistance are awarded to students on the basis of financial need follo wing University policies developed to meet regulatory requirements (federal methodology) a nd guided by the College Board (institutional methodology) Merit scholarships are awarded based upon talent (eg, academic, music, and athletic) All of these awarded grants are al lowed to be used by the students towards any type of costs, no subsequent monitoring is re quired |

Form 990 Schedule F - Supplemental Information

| Identifier | ReturnReference | Explanation |
|------------|--------------------|--|
| | Schedule F, Part I | The program services listed in Part I reflect international educational programs in which the University had material involvement in the design, development and/or control of the program and/or curriculum. While Northwestern University provides its students with access to a multitude of study abroad programs and exchanges located throughout the world, the University does not administer or operate the educational courses taught by all of these programs. Rather, under reciprocity and affiliation agreements, the University helps facilitate its student access to such international programs and recognizes credit earned by students at such foreign educational institutions, and such exchange programs are excluded from Schedule F, Part I. Under Northwestern University's current accounting procedures, all expenses associated with study abroad international programs are not separately tracked, and therefore some expenditures per program are not listed in Part I, column (f) of Schedule F. Program-related investments represent student loans disbursed during student's enrollment in international program. |

Form 990 Schedule F - Supplemental Information

| Identifier | ReturnReference | Explanation |
|------------|--|--|
| | Schedule F, Part I, column (f), line 3 | Expenditures reported in the Form 990, Schedule F, Part I are prepared using the accrual method of accounting. University activities are assigned a unique identifying number. Direct expenses are recorded with respect to each activity in the University's electronic financial recording system. Such direct expenses, for the relevant tax year, are reflected in column (f). |

Form 990 Schedule F - Supplemental Information

| Identifier | ReturnReference | Explanation |
|------------|--|---|
| | Schedule F, Part II, line 1 and line 3 | In connection with the monitoring of subawards through OSR, approved purchase orders and invoices are documented and accounted for in the University's electronic financial recording system, and such amounts are reflected in Part II, line 1. Twenty-one foreign recipient organizations are universities, colleges, and hospitals. Three are research centers and a research company. |

Form 990 Schedule F - Supplemental Information

| Identifier | ReturnReference | Explanation |
|------------|----------------------|--|
| | Schedule F, Part III | Cash grants given to individuals are recorded in an electronic reporting tool The data re corded includes information as to participation by undergraduate students in study abroad programming Individual recipients of cash grants are coded with unique identifying number s Grants associated with undergraduate students coded as participating in a study abroad are reviewed to assess whether there is an overlap between the grant disbursement date and the dates of the applicable study abroad program The number of such students, based on t heir unique identifying numbers, are summed and reflected in Part III, column (c) |

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
Northwestern University

Employer identification number
36-2167817

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 | | | |
| RuffaloCODY 65 Kirkwood North Rd SW Cedar Rapids, IA 52406 | Phone solicitation | | No | 128,313 | 41,629 | 86,684 |
| Foley Consulting 2405 Essington Rd 98 Joliet, IL 60435 | Fundraising Campaign Consultant | | No | 0 | 84,971 | 0 |
| Anne Reusche 2433 Simpson St Evanston, IL 60201 | Fundraising Consultant | | No | 0 | 5,400 | 0 |
| Campbell and Company 1 E Wacker Dr 3350 Chicago, IL 60601 | Fundraising Consultant | | No | 0 | 7,000 | 0 |
| Lipman Hearne 200 S Michigan Ave 2600 Chicago, IL 60604 | Fundraising Consultant | | No | 0 | 119,640 | 0 |
| Stelter 10435 New York Ave Des Moines, IA 50322 | Fundraising Marketing Consultant | | No | 0 | 7,290 | 0 |
| Syndio Social 800 W Huron 301 Chicago, IL 60642 | Fundraising Consultant | | No | 0 | 6,000 | 0 |
| Kelly Anderson & Assoc 424 N Washington Alexandria, VA 22314 | Services for Grant Application | | No | 0 | 10,140 | 0 |
| Commonwealth Partners Inc 704 E California Blvd Pasadena, CA 91106 | Fundraising Consultant | | No | 0 | 18,955 | 0 |
| | | | | | | |
| Total ▶ | | | | 128,313 | 301,025 | 86,684 |

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.

AZ, AK, AR, CT, GA, IL, KS, NM, NC, ND, PA, RI, TN, TX, UT, WV, WI, AL, CA, FL, HI, KY, MD, ME, MI, MO, MN, NH, MS, NY, OR, OK, OH, SC, WA, VA

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

| Revenue | | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events | |
|-----------------|---------------------------------------|--|-----------------------|-----------------------------|------------------|----------------------|-----------|
| | | | <u>Dance Marathon</u> | <u>Brain Tumor</u> | <u>7</u> | (add col (a) through | |
| | | | (event type) | <u>Institute Fundraiser</u> | (total number) | col (c)) | |
| | | | | | | | |
| 1 | Gross receipts | . . . | 903,282 | 402,790 | 726,365 | 2,032,437 | |
| 2 | Less Contributions | . . | 831,282 | 349,670 | 546,453 | 1,727,405 | |
| 3 | Gross income (line 1 minus line 2) | . . . | 72,000 | 53,120 | 179,912 | 305,032 | |
| Direct Expenses | 4 | Cash prizes | . . . | | | | |
| | 5 | Noncash prizes | . . | | | | |
| | 6 | Rent/facility costs | . . | 82,813 | 5,879 | 27,089 | 115,781 |
| | 7 | Food and beverages | . | | 58,620 | 172,438 | 231,058 |
| | 8 | Entertainment | . . . | | 6,000 | 8,245 | 14,245 |
| | 9 | Other direct expenses | . | 20,094 | 40,379 | 64,248 | 124,721 |
| | 10 | Direct expense summary Add lines 4 through 9 in column (d) ▶ | | | | | (485,805) |
| | 11 | Net income summary Combine line 3, column (d), and line 10 ▶ | | | | | -180,773 |

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

| | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col (a) through col (c)) |
|-----------------|---|---|--|--|--|
| | | | | | |
| Revenue | 1 | Gross revenue | | | |
| Direct Expenses | 2 | Cash prizes | | | |
| | 3 | Non-cash prizes | | | |
| | 4 | Rent/facility costs | | | |
| | 5 | Other direct expenses . . . | | | |
| | 6 | Volunteer labor | <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 |
|-------------------------------------|---|--|
| Explanation of Fundraising Payments | Schedule G, Part I, Line 2b, Column (v) | The following professional fundraisers received reimbursements for expenses associated with their services to the University (the amount of expenses reimbursed are reflected) RuffaloCODY (\$1,560) in accordance with the agreement with professional fundraiser which permits reimbursement for direct expenses such as mailing and shipping, Foley Consulting (\$272) as agreed for travel |
| State charitable solicitation | Schedule G, Part I, Line 3 | No registration is required in Delaware, Idaho, Indiana, Iowa, Montana, Nebraska, Nevada, South Dakota, Vermont or Wyoming University has requested confirmation of exemption from New Jersey |

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

2012

Open to Public Inspection

Name of the organization
Northwestern University

Employer identification number

36-2167817

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes

No

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

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

[illegible]

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **198**

3 Enter total number of other organizations listed in the line 1 table **30**

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) Student grants, scholarships, stipends, and fellowships are financial aid that can be used towards any type of educational related costs | 11608 | 265,281,198 | | | |
| (2) Prizes and awards reflect prizes and awards to non-employees in recognition of an accomplishment, activity, or event | 282 | 620,348 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part IV

Supplemental Information.

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

| Identifier | Return Reference | Explanation |
|--|------------------|--|
| Procedure for Monitoring Grants in the U S | Part I, Line 2 | Schedule I, Part I, Line 2 Grants given to support of charitable community organizations Such grants are extended only for charitable purposes to organizations that are exempt under Code Section 501(c)(3) After qualifications for the grant are met and the grant is disbursed to the charitable organization there is no subsequent monitoring by the University Grants or other assistance are awarded to organizations or entities in the U S pursuant to the University policies and procedures for all grant subawards Such subawards are monitored through the University's Office for Sponsored Research (OSR) and the University's Office of Accounting Services for Research and Sponsored Programs (ASRSP) All subaward documentation including purchase orders, related charges and invoices are reviewed and monitored by ASRSP and confirmed with the principal investigator The principal investigator must certify that the subaward costs are in accordance with OMB A-21 cost principles, also, ASRSP requests and collects audit reports from subaward recipients to monitor compliance If the information is not furnished to ASRSP, payment may be withheld Grants and other assistance are awarded to students on the basis of financial need following University policies developed to meet regulatory requirements (federal methodology) and guided by the College Board (institutional methodology) Merit scholarships are awarded based upon talent (eg, academic, music, and athletic) All of these awarded grants are allowed to be used by the students towards any type of costs, no subsequent monitoring is required |
| Schedule I | | Part III Prizes and awards reflect prizes and awards extended to non-employees in recognition of an accomplishment, activity, or event Prizes and awards given to employees are included as compensation and reported on an employee's Form W-2 |

Software ID:

Software Version:

EIN: 36-2167817

Name: Northwestern 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| Evanston Community Foundation Inc1007 Church St Ste 108 Evanston,IL 60201 | 36-3466802 | 501(c)(3) | 108,387 | | | | Charitable fundraising conducted by student org & support of charitable community organization |
| Danny Did FoundationPO Box 46576 Chicago,IL 60646 | 27-1642251 | 501(c)(3) | 719,905 | | | | Charitable fundraising conducted by student organization |

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 Promise Chicago North ShorePO Box 484 Glencoe,IL 60022 | 27-0288849 | 501(c)(3) | 7,389 | | | | Charitable fundraising conducted by student organization |
| Shanti Bhavan Children's Project121 Hawkins Pl Pmb 192 Boonton,NJ 07005 | 26-4188445 | 501(c)(3) | 11,000 | | | | Charitable fundraising conducted by student organization |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|--|
| Ladder-up (City-Wide Tax Assistance Program)233 S Wacker Drive Suite 9100 Chicago,IL 60606 | 36-4070692 | 501(c)(3) | 23,277 | | | | Charitable fundraising conducted by student organization |
| EGBOK Mission226 N Clinton St Apt 328 Chicago,IL 60661 | 27-1492346 | 501(c)(3) | 29,597 | | | | Charitable fundraising conducted by student organization |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|--|
| Youth Job Center of Evanston 1114 Church St Evanston,IL 60201 | 36-3252809 | 501(c)(3) | 23,377 | | | | Charitable fundraising conducted by student organization |
| Habitat for Humanity Lake County IL 315 N Martin Luther King Jr Ave Waukegan,IL 60085 | 36-3659288 | 501(c)(3) | 8,000 | | | | Charitable fundraising conducted by student organization |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Chicago's North Shore Convention & Visitor's Bureau8001 Lincoln Avenue Skokie,IL 60077 | 36-4449110 | 501(c)(6) | 25,000 | | | | Support of community organization |
| American Jewish Committee Jacob Blaustein Building 165 East 56th Street New York,NY 10022 | 13-5563393 | 501(c)(3) | 10,000 | | | | Support of charitable organization |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| IBIO Institute65 E Wacker Pl Ste 1600 Chicago,IL 60601 | 32-0092551 | 501(c)(3) | 10,500 | | | | Support of charitable organization |
| Holocaust Memorial Foundation of Illinois9603 Woods Drive Skokie,IL 60077 | 36-3156154 | 501(c)(3) | 9,000 | | | | Support of charitable organization |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Lynn Sage Cancer Research Foundation251 E Huron St Chicago,IL 60611 | 36-3727715 | 501(c)(3) | 8,500 | | | | Support of charitable organization |
| Biotechnology Industry Organization1201 Maryland Ave Sw Ste 900 Washington,DC 20024 | 52-1224577 | 501(c)(6) | 25,000 | | | | Convention sponsorship |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| Natural Resources Defense Council Inc40 West 20th Street New York, NY 10011 | 13-2654926 | 501(c)(3) | 8,000 | | | | Support of charitable organization |
| Chicago Academy of Sciences2430 N Cannon Dr Chicago,IL 60614 | 36-0895575 | 501(c)(3) | 25,000 | | | | Support of charitable community organizations |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| Chicago Botanic Garden (Chicago Horticultural Society)1000 Lake Cook Rd Glencoe,IL 60022 | 36-2225482 | 501(c)(3) | 115,000 | | | | Support of charitable community organizations |
| Lyric Opera of Chicago20 North Wacker Drive Ste 860 Chicago,IL 60606 | 36-6008929 | 501(c)(3) | 22,500 | | | | Support of charitable community organizations |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| The Art Institute of Chicago 111 S Michigan Ave Chicago,IL 60603 | 36-2167725 | 501(c)(3) | 10,000 | | | | Support of charitable community organizations |
| Ravinia Festival418 Sheridan Road Highland Park,IL 60035 | 36-6002273 | 501(c)(3) | 12,500 | | | | Support of charitable community organizations |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| United Way of Metropolitan Chicago560 W Lake St Chicago,IL 60661 | 36-0200478 | 501(c)(3) | 15,000 | | | | Support of charitable community organizations |
| Health for Humanity415 Linden Ave Ste B Wilmette,IL 60091 | 36-3820640 | 501(c)(3) | 10,000 | | | | Support of charitable community organizations |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| Millennium Park IncDT 111 S Wacker Drive Chicago,IL 60602 | 36-4244167 | 501(c)(3) | 10,000 | | | | Support of charitable community organizations |
| Field Museum1400 S Lake Shore Drive Chicago,IL 60605 | 36-2167011 | 501(c)(3) | 20,000 | | | | Support of charitable community organizations |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| Northwestern University Settlement House1400 West Augusta Blvd Chicago,IL 60642 | 36-2167818 | 501(c)(3) | 25,000 | | | | Support of charitable community organizations |
| Juvenile Protective Association1707 N Halstead St Chicago,IL 60614 | 36-2167765 | 501(c)(3) | 25,000 | | | | Support of charitable community organizations |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|--|
| EVMark1560 Sherman Ave Evanston,IL 60201 | 36-3571291 | 501(c)(6) | 23,000 | | | | Support of charitable community organization |
| Allergy Asthma and Immunology Education and Research555 E Wells St Ste 1100 Milwaukee,WI 53202 | 45-1495723 | 501(c)(3) | 15,000 | | | | Support of charitable organization |

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 Spinal Injury AssociationShepherd Center 2020 Atlanta,GA 30309 | 84-0660449 | 501(c)(3) | 7,500 | | | | Support of charitable organization |
| Friends of Prentice251 East Huron St Galter Pavilion Chicago,IL 60611 | 36-3930139 | 501(c)(3) | 7,500 | | | | Support of charitable community organization |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Northwestern Medical Faculty Foundation680 N Lakeshore Dr Chicago,IL 60611 | 36-3097297 | 501(c)(3) | 27,794,691 | | | | Support of research activities |
| Access Community Health Network222 N Canal St Chicago,IL 60606 | 36-3317058 | 501(c)(3) | 397,441 | | | | Support of research activities |

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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Access DuPage511 Thornhill Dr M Carol Stream,IL 60188 | 36-4448208 | 501(c)(3) | 226,925 | | | | Support of research activities |
| Adler Planetarium & Astronomy Museum1300 S Lake Shore Dr Chicago,IL 60605 | 36-6210902 | 501(c)(3) | 17,143 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Advocate Hope Childrens Hospital4440 W 95th St Oak Lawn,IL 60453 | 36-2169147 | 501(c)(3) | 49,726 | | | | Support of research activities |
| Advocate Lutheran General Hospital1775 W Dempster St Park Ridge,IL 60068 | 36-2169147 | 501(c)(3) | 49,726 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| AIDS Arms Inc219 Sunset Ave Dallas, TX 75208 | 75-2306145 | 501(c)(3) | 324,877 | | | | Support of research activities |
| Alliance of Chicago Community Health Service 215 W Ohio St 4th Floor Chicago, IL 60654 | 36-4444309 | 501(c)(3) | 418,525 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Ann & Robert H Lurie Children's Hospital of Chicago225 E Chicago Avenue Chicago,IL 60611 | 36-2170833 | 501(c)(3) | 3,699,962 | | | | Support of research activities |
| Arizona State UniversityPO BOX 876011 Tempe,AZ 85287 | 86-0196696 | 501(c)(3) | 331,599 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Arkansas Children's Hospital ResearchOne Childrens Way Little Rock,AR 77202 | 71-0568795 | 501(c)(3) | 158,309 | | | | Support of research activities |
| Arkansas Site Management Services7 Shakelford West Blvd Little Rock,AR 72211 | 46-0743932 | | 8,000 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Aurasense Therapuetics LLC 1801 Maple Ave Ste 4301 Evanston,IL 60201 | 45-2638444 | | 81,114 | | | | Support of research activities |
| Banner Alzheimer's Institute 901 E Wiletta Street Phoenix,AZ 85006 | 20-4862361 | 501(c)(3) | 8,692 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Baptist Hospital of Miami 8900 N Kendall Drive Miami, FL 33176 | 59-0910342 | 501(c)(3) | 14,245 | | | | Support of research activities |
| Battelle Memorial Institute 505 King Ave Columbus, OH 43201 | 31-4379427 | 501(c)(3) | 25,000 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Baylor College of Medicine1 Baylor Plaza Houston,TX 77030 | 74-1613878 | 501(c)(3) | 13,391 | | | | Support of research activities |
| Beth Israel Deaconess Center330 Brookline Ave Boston,MA 02115 | 04-2103881 | 501(c)(3) | 9,655 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Beth Israel Medical Center First Ave at 16th St New York, NY 10003 | 13-5564934 | 501(c)(3) | 29,008 | | | | Support of research activities |
| Black United Fund of Illinois Inc1809 E 71st Street Chicago,IL 60649 | 36-3397908 | 501(c)(3) | 13,125 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Board of Education City of Chicago125 S Clark Street Chicago, IL 60603 | 36-6005821 | 115 | 762,801 | | | | Support of research activities |
| Boston UniversityOne Silber Way Boston, MA 02215 | 04-2103547 | 501(c)(3) | 116,041 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Boys & Girls Clubs of Chicago 550 W Van Buren Street Suite 350 Chicago,IL 60607 | 36-2166997 | 501(c)(3) | 31,478 | | | | Support of research activities |
| Brookings Institution1775 Massachusetts Ave NW Washington,DC 20036 | 53-0196577 | 501(c)(3) | 58,968 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Brown University45 Prospect Street Providence,RI 02912 | 05-0258809 | 501(c)(3) | 73,814 | | | | Support of research activities |
| BUILD5100 W Harrison Chicago,IL 60644 | 23-7022085 | 501(c)(3) | 25,000 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| California Institute of Technology1200 East California Blvd Pasadena,CA 91125 | 95-1643307 | 501(c)(3) | 345,149 | | | | Support of research activities |
| Campbell-Kibler Associates Inc80 Lakeside Dr Groton,MA 01450 | 04-3297519 | | 65,787 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Cancer Help Institute Ltd 1000 Skokie Blvd Ste 100 Wilmette,IL 60091 | 36-3801000 | | 65,954 | | | | Support of research activities |
| Capital Health System Foundation750 Brunswick Avenue Trenton,NJ 08638 | 22-2230681 | 501(c)(3) | 8,090 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Case Western Reserve University10900 Euclid Ave Cleveland, OH 44106 | 34-1018992 | 501(c)(3) | 267,364 | | | | Support of research activities |
| Centerstone Research Institute565 S Park Ridge Rd 103 Bloomington, IN 47401 | 26-2505456 | 501(c)(3) | 22,825 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Chaddock205 S 24th St QUINCY,IL 62301 | 37-0661191 | | 46,460 | | | | Support of research activities |
| Chicago Association for Research and Education in ScienceBuilding One Rm C347 5000 S 5th Ave Ave Hines,IL 60141 | 36-3334177 | 501(c)(3) | 29,416 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Chicago Women's Health Center3435 N Sheffield Ave Chicago,IL 60657 | 36-2922469 | 501(c)(3) | 25,000 | | | | Support of research activities |
| Children's Hospital Los Angeles4650 Sunset Blvd MS 130 Los Angeles,CA 90027 | 95-1690977 | 501(c)(3) | 18,050 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Cincinnati Children's Hospital Medical Center 3333 Burnet Ave Cincinnati, OH 45229 | 31-0833936 | 501(c)(3) | 64,567 | | | | Support of research activities |
| City Colleges of Chicago226 W Jackson Blvd Chicago, IL 60606 | 36-2606236 | | 22,437 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Cleveland Clinic9500 Euclid Ave Cleveland,OH 44195 | 91-2153073 | 501(c)(3) | 50,647 | | | | Support of research activities |
| College of American Pathologists325 Waukegan Rd Northfield,IL 60039 | 36-2118323 | 501(c)(3) | 33,624 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Colorado State University 203 Administration Building Fort Collins,CO 80523 | 84-6000546 | 115 | 13,407 | | | | Support of research activities |
| Columbia University615 W 131st Street New York,NY 10027 | 13-1624202 | 501(c)(3) | 297,757 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Community Action Project of Tulsa County4606 S Garnett Ste 100 Tulsa,OK 74146 | 73-1019247 | | 26,878 | | | | Support of research activities |
| Consulting Radiologists Ltd 1221 Nicollet Mall Ste 600 Minneapolis,MN 55403 | 41-0974675 | | 10,450 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Cornell University222 Day Hall Ithaca, NY 14853 | 15-0532082 | 501(c)(3) | 420,599 | | | | Support of research activities |
| Dana-Farber Cancer Institute44 Binney St Boston, MA 02115 | 04-2263040 | 501(c)(3) | 115,506 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| David Ostrow & Associates 5455 N Sheridan Road Suite 2503 Chicago,IL 60640 | 20-5241516 | | 56,980 | | | | Support of research activities |
| Delve LLC11971 Westline Industrial Dr 200 St Louis,MO 63146 | 20-0684635 | | 613,847 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| DePaul University1 E Jackson Chicago,IL 60604 | 36-2167048 | 501(c)(3) | 12,773 | | | | Support of research activities |
| Development Alternatives Inc7600 Wisconsin Blvd Ste 200 Bethesda,MD 20814 | 52-0904808 | | 122,186 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Duke UniversityChapel Dr Durham,NC 27705 | 56-0532129 | 501(c)(3) | 373,910 | | | | Support of research activities |
| East Carolina University2200 Charles Blvd Rm 2906 Greenville,NC 27858 | 56-6000403 | 115 | 26,300 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Edward Hospital801 S Washington Street Naperville, IL 60540 | 36-3297173 | 501(c)(3) | 17,305 | | | | Support of research activities |
| Emory University201 Dowman Dr Atlanta,GA 30322 | 58-0566256 | 501(c)(3) | 215,041 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Erie Family Health Center Inc1701 W Superior ST Chicago,IL 60622 | 36-3088628 | 501(c)(3) | 1,464,226 | | | | Support of research activities |
| Executive Frameworks Ltd2705 W Agatitie Ave 1 Chicago,IL 60625 | 37-1450886 | | 19,438 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Florida International University11200 SW 8th Street Miami,FL 33174 | 65-0177616 | | 21,195 | | | | Support of research activities |
| Georgia State University Research Foundation Inc30 Courtland St NE Ste 217 Atlanta,GA 30303 | 58-1845423 | 501(c)(3) | 54,058 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Georgia Tech Research Corporation505 Tenth St Atlanta,GA 30332 | 58-0603146 | 501(c)(3) | 22,296 | | | | Support of research activities |
| GFK Custom Research North America420 Lower Wabash Ave Chicago,IL 60611 | 36-2948619 | | 222,383 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| H Lee Moffit Cancer Center & Research Institute12902 Magnolia Ave Tampa,FL 33612 | 59-2451713 | 501(c)(3) | 48,506 | | | | Support of research activities |
| Harvard University Massachusetts Hall Cambridge,MA 02138 | 04-2103580 | 501(c)(3) | 1,072,526 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Health Research Incorporated Roswell Park Cancer Institute DivisionElm Carlton Sts Buffalo, NY 14263 | 14-1402155 | 501(c)(3) | 763,103 | | | | Support of research activities |
| Heartland Health Outreach 2200 W Touhy Avenue Chicago,IL 60645 | 36-3775696 | 501(c)(3) | 42,784 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Hektoen Institute for Medical Research2240 W Ogden Ave Chicago,IL 60612 | 36-2244897 | 501(c)(3) | 711,078 | | | | Support of research activities |
| Horizon Research Inc326 Cloister Ct Chapel Hill,NC 27514 | 56-1550276 | | 50,949 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Indiana University107 S Indiana Ave Bloomington,IN 47405 | 35-6001673 | 115 | 310,029 | | | | Support of research activities |
| Inquire Learning LLC2625 Weston Rd Weston,FL 33331 | 26-0733745 | | 68,808 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Inspiration Corporation4554 N Broadway St Chicago,IL 60640 | 36-3673980 | 501(c)(3) | 25,000 | | | | Support of research activities |
| J Craig Venter Institute9704 Medical Center Drive Rockville,MD 20850 | 52-1842938 | 501(c)(3) | 475,439 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Jasculca Terman and Associates Inc730 N Franklin Street Suite 510 Chicago,IL 60654 | 36-3136983 | | 47,524 | | | | Support of research activities |
| Johns Hopkins University1101 E 33rd St Baltimore,MD 21218 | 52-0595110 | 501(c)(3) | 230,916 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Justice Resource Institute Inc545 Boylston St Ste 700 Boston,MA 02116 | 04-2526357 | 501(c)(3) | 50,924 | | | | Support of research activities |
| Kaiser Foundation Research Institute3800 N Interstate Ave Portland,OR 97227 | 94-1105628 | 501(c)(3) | 313,011 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Kidz Express NFP342 S Laramie Ave Chicago,IL 60644 | 20-0942452 | 501(c)(3) | 15,000 | | | | Support of research activities |
| La Rabida Children's Hospital 6501 South Promontory Dr Chicago,IL 60649 | 36-2170143 | 501(c)(3) | 13,275 | | | | Support of research activities |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Lahey Clinic Foundation Inc 41 Mall Rd Burlington, MA 01805 | 04-2704683 | 501(c)(3) | 79,651 | | | | Support of research activities |
| Louisiana State University 3848 W Lakeshore Dr Baton Rouge, LA 70808 | 72-6087770 | 115 | 186,612 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Loyola University Chicago 1032 W Sheridan Rd Chicago,IL 60660 | 36-1408475 | 501(c)(3) | 75,192 | | | | Support of research activities |
| Magee Women's Research Institute and Foundation 3339 Ward St Pittsburgh,PA 15132 | 25-1462312 | 501(c)(3) | 129,402 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Massachusetts General Hospital55 Fruit St Boston,MA 02114 | 04-1564655 | 501(c)(3) | 236,430 | | | | Support of research activities |
| Massachusetts Institute of Technology77 Massachusetts Ave Cambridge,MA 02142 | 04-2103594 | 501(c)(3) | 146,102 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Materials & Electrochemical Research Corporation7960 South Kolb Road Tucson,AZ 85706 | 86-0530946 | | 46,563 | | | | Support of research activities |
| Mayo Clinic Arizona13400 East Shea Blvd Scottsdale,AZ 85259 | 86-0800150 | 501(c)(3) | 181,986 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|--|
| Mayo Clinic Florida4500 San Pablo Rd Jacksonville,FL 32224 | 59-3337028 | 501(c)(3) | 7,150 | | | | Support of research activities |
| McGaw YMCA1420 Maple Ave Evanston,IL 60201 | 36-2169194 | 501(c)(3) | 28,236 | | | | Support of research activities and charitable community organization |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| McGuckin Methods International INC MMI115 East Athens Ave Ardmore,PA 19003 | 23-2642918 | | 55,000 | | | | Support of research activities |
| Medical College of Wisconsin 8701 Watertown Plank Rd Milwaukee,WI 53226 | 39-0806261 | 501(c)(3) | 40,166 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Medical University of South Carolina179 Ashley Ave Charleston,SC 29425 | 57-6000722 | 115 | 9,216 | | | | Support of research activities |
| Memorial Sloan-Kettering Cancer Center1275 York Avenue New York,NY 10065 | 13-1624182 | 501(c)(3) | 463,286 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Mental Health Cooperative Inc275 Cumberland Bend Nashville,TN 37228 | 58-2018687 | 501(c)(3) | 11,292 | | | | Support of research activities |
| Methodist Hospital Research Institute6670 Bertner St Houston,TX 77030 | 87-0721923 | 501(c)(3) | 38,610 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Metropolitan Asian Family Services Inc7541 N Western Avenue Chicago,IL 60645 | 36-3925432 | 501(c)(3) | 30,500 | | | | Support of research activities |
| Michigan State University 113 Angell Bldg East Lansing,MI 48824 | 38-6005984 | 115 | 238,043 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Missouri University of Science & Technology300 W 12th St 202 Centennial Hall Rolla, MO 65401 | 43-6003859 | 115 | 56,293 | | | | Support of research activities |
| Montana State University309 Montana Hall Bozeman, MT 59717 | 81-6010045 | 115 | 39,167 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Mount Sinai HospitalOne Gustave L Levy Pl New York, NY 10029 | 13-1624096 | 501(c)(3) | 40,378 | | | | Support of research activities |
| Mount Sinai School of MedicineOne Gustave L Levy Pl New York, NY 10029 | 13-6171197 | 501(c)(3) | 47,994 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MRIGlobal425 Volker Boulevard Kansas City, MO 64110 | 44-0545878 | 501(c)(3) | 9,865 | | | | Support of research activities |
| Multicare Health Systems 315 Martin Luther King Jr Way Tacoma, WA 98405 | 91-1352172 | 501(c)(3) | 7,880 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| National Kidney Foundation of Illinois215 W Illinois St Ste 1C Chicago,IL 60654 | 36-6009226 | 501(c)(3) | 47,433 | | | | Support of research activities |
| National Opinion Research Center1155 E 60th Street CHicago,IL 60637 | 36-2167808 | 501(c)(3) | 68,503 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Nationwide Children's Hospital700 Childrens Dr Columbus, OH 43201 | 31-1036372 | 501(c)(3) | 28,054 | | | | Support of research activities |
| Near North Health Service Corporation1276 N Clybourn Ave Chicago, IL 60610 | 36-3197647 | 501(c)(3) | 61,026 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| New York University70 Washington Square South New York, NY 10012 | 13-5562308 | 501(c)(3) | 320,959 | | | | Support of research activities |
| North Country Healthcare Inc2920 N Fourth St Flagstaff, AZ 86004 | 86-0663432 | 501(c)(3) | 71,312 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Northeastern Illinois University5500 North St Louis Ave Chicago,IL 60625 | 36-6009515 | 115 | 32,182 | | | | Support of research activities |
| NorthShore University HealthSystem Research Institute2650 Ridge Ave Evanston,IL 60201 | 36-4191793 | 501(c)(3) | 1,133,863 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Northwestern Memorial Hospital251 E Huron St Chicago,IL 60611 | 37-0960170 | 501(c)(3) | 2,115,719 | | | | Support of research activities |
| Northwestern Specialists in Plastic Surgery SC676 N St Clair St Ste 1525A Chicago,IL 60611 | 27-0491346 | | 121,981 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Norwegian American Hospital 1044 North Francisco Avenue Chicago,IL 60622 | 36-1564290 | 501(c)(3) | 17,760 | | | | Support of research activities |
| NOVA Scripts Central Inc 6400 Arlington Blvd Falls Church,VA 22042 | 65-1275162 | 501(c)(3) | 74,422 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Ohio State University154 W 12th Ave Columbus,OH 43210 | 31-6025986 | 115 | 14,632 | | | | Support of research activities |
| OhioHealth Research Institute3545 Olentangy River Road Suite 408 408 Columbus,OH 43214 | 31-6059784 | | 43,049 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Oklahoma State University 113 Student Union Stillwater,OK 74078 | 73-6017987 | 115 | 102,651 | | | | Support of research activities |
| Optimum Therapeutics LLC 9363 Towne Center Drive San Diego,CA 92121 | 06-1595427 | | 10,840 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Oregon Health & Science University3181 Southwest Sam Jackson Park Rd Portland,OR 97239 | 93-1176109 | 115 | 31,127 | | | | Support of research activities |
| Pennsylvania State University308 Old Main University Park,PA 16802 | 24-6000376 | 115 | 485,252 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Princeton UniversityOffice of Administration Princeton,NJ 08544 | 21-0634501 | 501(c)(3) | 49,609 | | | | Support of research activities |
| PTV America Inc9755 W Barnes Road Suite 550 Portland,OR 97225 | 93-1298868 | | 30,232 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Quest Clinical Research 2300 Sutter St Ste 202 San Francisco,CA 94115 | 94-3307206 | | 14,010 | | | | Support of research activities |
| Raytheon BBN Technologies 10 Moulton Atreet Cambridge,MA 02138 | 41-2126829 | | 66,000 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| Rehabilitation Institute Research Corporation345 E Superior St Chicago,IL 60611 | 36-3728711 | 501(c)(3) | 474,384 | | | | Support of research activities and support of charitable community organization |
| Research Foundation of the City University of New York 230 West 41st Street 7th Floor New York, NY 10036 | 13-1988190 | 501(c)(3) | 143,524 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Research Foundation SUNY 35 State Street Albany, NY 12207 | 14-1368361 | 501(c)(3) | 38,667 | | | | Support of research activities |
| Research Triangle Institute 12 Davis Dr Research Triangle Park, NC 27709 | 56-0686338 | 501(c)(3) | 17,380 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Rhode Island Hospital593 Eddy St Providence,RI 02903 | 05-0258954 | 501(c)(3) | 6,505 | | | | Support of research activities |
| Rice University6100 Main St Houston,TX 77005 | 74-1109620 | 501(c)(3) | 14,280 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Rockefeller University1230 York Avenue New York, NY 10065 | 13-1624158 | 501(c)(3) | 358,381 | | | | Support of research activities |
| Rush University Medical Center1653 W Congress Parkway Chicago,IL 60612 | 36-2174823 | 501(c)(3) | 1,397,867 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Sage Bionetworks1100 Fairview Ave North MI-C108 Seattle,WA 98109 | 26-4489946 | 501(c)(3) | 18,219 | | | | Support of research activities |
| Salk Institute10010 North Torrey Pines Road La Jolla,CA 92037 | 95-2160097 | 501(c)(3) | 83,172 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Sanford-Burnham Medical Research Institute10901 North Torrey Pines Rd La Jolla,CA 92037 | 51-0197108 | 501(c)(3) | 308,974 | | | | Support of research activities |
| Scripps Health4275 Campus Point Ct San Diego,CA 92121 | 95-1684089 | 501(c)(3) | 30,488 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Scripps Research Institute 10550 North Torrey Pines Road La Jolla, CA 92037 | 33-0435954 | 501(c)(3) | 725,222 | | | | Support of research activities |
| Society for Research on Educational Effectiveness 2040 Sheridan Rd Evanston, IL 60208 | 26-4739791 | 501(c)(3) | 451,058 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Society of Hospital Medicine 1500 Spring Garden Ste 501 Philadelphia, PA 19130 | 23-3057353 | 501(c)(3) | 376,500 | | | | Support of research activities |
| South Carolina Research Foundation 901 Sumter St Byrnes Bldg Ste 511 Columbia, SC 29208 | 57-0967350 | 501(c)(3) | 37,237 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| SRI International201 Washington Rd Princeton,NJ 08540 | 94-1160950 | 501(c)(3) | 124,575 | | | | Support of research activities |
| St Joseph's Hospital and Medical Center350 W Thomas Road Phoenix,AZ 85013 | 72-1561134 | | 6,012 | | | | Support of research activities |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Stanford University295 Galvez St Stanford,CA 94305 | 94-1156365 | 501(c)(3) | 756,651 | | | | Support of research activities |
| Teachers College525 W 120th St New York,NY 10027 | 13-1624202 | 501(c)(3) | 33,758 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Texas A&M Research Foundation400 Harvey Mitchell Pkwy South Ste 300 College Station,TX 77845 | 74-1238434 | 501(c)(3) | 19,926 | | | | Support of research activities |
| The Henry M Jackson Foundation for Advancement of Military Medicine Inc 6720-A Rockledge Dr Bethesda,MD 20817 | 52-1317896 | 501(c)(3) | 186,402 | | | | Support of research activities |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Thomas Jefferson University 1020 Walnut St Philadelphia, PA 19107 | 23-1352651 | 501(c)(3) | 10,450 | | | | Support of research activities |
| Tufts UniversityTufts University Medford,MA 02155 | 04-2103634 | 501(c)(3) | 72,217 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Tulane Educational Fund 6823 St Charles Ave New Orleans,LA 70118 | 72-0423889 | 501(c)(3) | 382,415 | | | | Support of research activities |
| United BioSource Corporation7501 Wisconsin Ave Ste 705 Bethesda,MD 20814 | 54-1759539 | | 76,119 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| University of Alabama at Birmingham1530 3rd Ave South Birmingham, AL 35294 | 63-6005396 | 115 | 96,775 | | | | Support of research activities |
| University of Arizona617 N Santa Rita Ave Tucson,AZ 85721 | 74-2652689 | 115 | 35,968 | | | | Support of research activities |

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 California Berkeley200 California Hall Berkeley, CA 94720 | 94-6002123 | 115 | 98,979 | | | | Support of research activities |
| University of California DavisOne Shields Ave Davis, CA 95616 | 94-6036494 | 115 | 621,619 | | | | Support of research activities |

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 California Irvine Office of Administration Irvine, CA 92697 | 95-2226406 | 115 | 83,630 | | | | Support of research activities |
| University of California Los Angeles Hillgard Ave Los Angeles, CA 90095 | 95-6006143 | 115 | 606,456 | | | | Support of research activities |

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 California San Francisco505 Parnassus Ave San Francisco, CA 94143 | 56-6001393 | 115 | 238,795 | | | | Support of research activities |
| University of Chicago5801 S Ellis Ave Chicago,IL 60637 | 36-2177139 | 501(c)(3) | 5,232,580 | | | | Support of research activities |

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 Colorado at Boulder914 Broadway St Boulder, CO 80302 | 84-6000555 | 115 | 90,552 | | | | Support of research activities |
| University of Connecticut438 Whitney Rd Storrs, CT 06269 | 06-0772160 | 115 | 230,353 | | | | Support of research activities |

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 Connecticut Health Center263 Farmington Ave Farmington,CT 06030 | 52-1725543 | 115 | 32,538 | | | | Support of research activities |
| University of Florida201 Criser Hall Gainesville,FL 32611 | 59-6002052 | 115 | 16,510 | | | | Support of research activities |

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 Houston316 E Cullen Building Houston,TX 77204 | 74-6001399 | 115 | 30,800 | | | | Support of research activities |
| University of Illinois801 S Morgan St Chicago,IL 60607 | 37-6000511 | 115 | 2,359,628 | | | | Support of research activities |

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 Iowa100 Mossman Business Services Building Iowa City,IA 52245 | 42-6004813 | 115 | 24,814 | | | | Support of research activities |
| University of Kentucky100 Funkhouser Bldg Lexington,KY 40506 | 61-6001218 | 115 | 38,513 | | | | Support of research activities |

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 Maryland2108 Mitchell Bldg College Park,MD 20742 | 52-6002033 | 115 | 20,532 | | | | Support of research activities |
| University of Massachusetts Office of Administration Amherst,MA 01003 | 04-3167352 | 115 | 88,713 | | | | Support of research activities |

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 Miami1252 Memorial Drive Coral Gables, FL 33146 | 59-0624458 | 501(c)(3) | 43,989 | | | | Support of research activities |
| University of Michigan515 E Jefferson Ann Arbor, MI 48109 | 38-6000134 | 115 | 999,349 | | | | Support of research activities |

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 Minnesota101 Pleasant St Minneapolis, MN 55455 | 41-6007513 | 115 | 450,192 | | | | Support of research activities |
| University of Nebraska Lincoln1400 R St Lincoln,NE 68588 | 47-0049123 | 115 | 725,025 | | | | Support of research activities |

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 Nevada Reno 1664 N Virginia St Reno, NV 89557 | 88-6000024 | | 11,616 | | | | Support of research activities |
| University of North Carolina at Chappel Hill9201 University City Blvd Charlotte, NC 28223 | 56-6001393 | 115 | 404,234 | | | | Support of research activities |

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 Oklahoma660 Parrington Oval Norman, OK 73019 | 73-6017987 | 115 | 275,641 | | | | Support of research activities |
| University of Pennsylvania3451 Walnut Street Philadelphia, PA 19104 | 23-1352685 | 501(c)(3) | 457,901 | | | | Support of research activities |

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 Pittsburgh4227 Fifth Ave Pittsburgh, PA 15260 | 25-0965591 | 501(c)(3) | 755,829 | | | | Support of research activities |
| University of RochesterOffice of Administration Rochester, NY 14627 | 16-0743209 | 501(c)(3) | 42,515 | | | | Support of research activities |

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 Southern California1540 Alcazar St Los Angeles, CA 90089 | 95-1642394 | 501(c)(3) | 376,432 | | | | Support of research activities |
| University of Tennessee527 Andy Holt Tower Knoxville, TN 37996 | 62-6001636 | 115 | 225,672 | | | | Support of research activities |

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 Texas at Austin 2100 San Jacinto Blvd Austin,TX 78712 | 74-6000203 | 115 | 204,387 | | | | Support of research activities |
| University of Texas at San AntonioOne UTSA Circle San Antonio, TX 78249 | 74-1717115 | 115 | 337,083 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| University of Texas M D Anderson Cancer Center 1515 Holcombe Blvd Houston,TX 77030 | 76-0273984 | 115 | 33,830 | | | | Support of research activities |
| University of Texas Southwestern Med Ctr at Dallas5323 Harry Hines Blvd Dallas,TX 75390 | 75-6002868 | 115 | 140,863 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| University of Texas Arlington 701 S Nedderman Drive Arlington,TX 76019 | 75-6000121 | 115 | 32,194 | | | | Support of research activities |
| University of Utah201 S 1460 E Salt Lake City,UT 84112 | 87-6000525 | 115 | 145,348 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| University of Virginia1 College Park Wise,VA 24293 | 54-6001796 | 115 | 702,378 | | | | Support of research activities |
| University of Washington1410 NE Campus Parkway Seattle,WA 98195 | 91-6001537 | 115 | 631,561 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| University of Wisconsin716 Langdon St Madison, WI 53706 | 39-1805963 | 115 | 1,145,713 | | | | Support of research activities |
| Vanderbilt UniversityOffice of Administration Nashville, TN 37240 | 62-0476822 | 501(c)(3) | 346,691 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Virginia Commonwealth UniversityPO BOX 843035 Richmond, VA 23284 | 54-0757884 | 115 | 90,543 | | | | Support of research activities |
| Wake Forest University School of Medicine Medical Center Blvd WinstonSalem, NC 27157 | 56-0532138 | 501(c)(3) | 24,092 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Washington University in St LouisOne Brookings Dr St Louis,MO 63130 | 43-0653611 | 501(c)(3) | 356,254 | | | | Support of research activities |
| Winthrop-University Hospital259 First St Mineola,NY 11501 | 11-1633486 | 501(c)(3) | 10,275 | | | | Support of research activities |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Wright State University3640 Colonel Glenn Hwy Dayton, OH 45435 | 31-0732831 | 115 | 76,621 | | | | Support of research activities |
| Yale University140 Prospect St New Haven,CT 06511 | 06-0646973 | 501(c)(3) | 343,648 | | | | Support of research activities |

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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| YMCA of Greater Indianapolis615 N Alabama St Ste 200 Indianapolis,IN 46204 | 35-0868211 | 501(c)(3) | 5,525 | | | | Support of research activities |
| YMCA of Metropolitan Chicago824 N Hamlin Chicago,IL 60651 | 36-2179782 | 501(c)(3) | 14,264 | | | | Support of research activities |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| YMCA of the USA101 N Wacker Drive Suite 1600 Chicago,IL 60606 | 36-3258696 | 501(c)(3) | 37,952 | | | | Support of research activities |
| Youth Guidance1 N LaSalle St Suite 900 Chicago,IL 60602 | 36-2167032 | 501(c)(3) | 10,000 | | | | Support of research activities |

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
Northwestern University

Employer identification number
36-2167817

| 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><input checked="" 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 checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</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><input checked="" type="checkbox"/> Compensation committee</div> <div><input checked="" type="checkbox"/> Independent compensation consultant</div> <div><input type="checkbox"/> Form 990 of other organizations</div> | <div><input type="checkbox"/> Written employment contract</div> <div><input checked="" type="checkbox"/> Compensation survey or study</div> <div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div> | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | | |
| a | Receive a severance payment or change-of-control payment? | 4a | Yes | |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | Yes | |
| c | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | No |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | | |
| a | The organization? | 5a | | No |
| b | Any related organization? | 5b | | No |
| | If "Yes," to line 5a or 5b, describe in Part III | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | | |
| a | The organization? | 6a | | No |
| b | Any related organization? | 6b | | No |
| | If "Yes," to line 6a or 6b, describe in Part III | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | Yes | |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | Yes | |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? | 9 | Yes | |

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported as deferred in prior Form 990 |
|---------------------------|--|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| See Additional Data Table | | | | | | | | |

Part III Supplemental Information

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

| Identifier | Return Reference | Explanation |
|------------|--------------------|---|
| | Part I, Line 1a | Charter travel Charter airplane travel was provided to two listed persons as an annual round-trip travel service to attend the annual Bowl game, where the University student football team competes Pursuant to written University policy, the benefit was treated as a business expense and was not treated as taxable compensation Charter airplane travel was provided to one listed person and was treated as a business expense and was not treated as taxable compensation Travel for companions Family members accompanied three listed person to the annual Bowl game and such costs were either reimbursed by the listed person or imputed to taxable income following the event Spouses traveled with three listed persons to the annual Bowl game Pursuant to written University policy, the benefit was treated as a business expense and was not treated as taxable compensation The President's spouse has accompanied the President at development events for business purposes and such expenses were not treated as taxable compensation Spouses accompanied two listed persons for travel Spousal travel was treated as taxable compensation for one listed person Tax gross-up payments Three listed persons received gross up payments in connection with certain benefits and such amounts were treated as taxable compensation Housing allowance or residence for personal use The President is required to reside in University-owned housing which is provided for the convenience of the University and is not treated as a taxable compensation pursuant to Internal Revenue Code Section 119 The annual fair market rental value of the housing is included in nontaxable benefits listed on Schedule J, Part II, column (D) Five listed persons were provided with housing allowances and the amounts were treated as taxable compensation Health or social club dues or initiation fees The President was extended memberships in organizations that are held in the President's individual name but that reflect institutional business requirements and are not treated as taxable compensation Four listed persons received reimbursement for social club initiation fees and/or dues Club initiation fees were treated as taxable compensation Club dues were treated as taxable compensation for two listed persons Personal Services In connection with the University provided presidential housing, the University provides maid/cleaning services at the President's University residence The value of the benefit is apportioned between personal living quarters and public areas of the house, and the cleaning services associated with the personal living quarters are treated as taxable compensation |
| | Part I, Lines 4a-b | Former officer, W Banis, received \$154,794 in connection with separation and payments ceased on August 31, 2012 The following participated in a 457(f) nonqualified retirement plan and the amounts are subject to substantial risk of forfeiture and vest after a number of years Name Amount Contributed Morton O Schapiro \$183,333 Daniel I Linzer \$150,000 Eugene S Sunshine \$26,667 Thomas G Cline \$26,667 Robert E McQuinn \$6,667 James J Phillips \$60,000 William H McLean \$909,563 (short-term deferral) Name Amount Paid William H McLean \$122,329 |
| | Part I, Line 7 | The President, three officers, and one key employee received a non-fixed payment related to a recognition bonus One officer was offered non-fixed payment related to travel, domestic services, apparel and tickets |
| | Part I, Line 8 | One officer was extended loans pursuant to an initial contract with a portion forgiven that was treated as taxable compensation |

Software ID:
Software Version:
EIN: 36-2167817
Name: Northwestern 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 | | | | |
| Morton O Schapiro | (i) | 829,616 | 50,000 | 60,411 | 208,333 | 183,886 | 1,332,246 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Daniel I Linzer | (i) | 529,929 | 25,000 | 18,040 | 175,000 | 21,437 | 769,406 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Eugene S Sunshine | (i) | 699,235 | 0 | 83,417 | 51,667 | 15,213 | 849,532 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Thomas G Cline | (i) | 439,795 | 0 | 18,432 | 51,667 | 40,045 | 549,939 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Alan K Cubbage | (i) | 243,249 | 0 | 7,984 | 24,333 | 1,083 | 276,649 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Marilyn McCoy | (i) | 251,430 | 25,000 | 18,356 | 25,000 | 18,671 | 338,457 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| William H McLean | (i) | 670,497 | 1,031,892 | 190,476 | 934,563 | 44,743 | 2,872,171 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Robert E McQuinn | (i) | 402,966 | 0 | 25,469 | 31,667 | 21,877 | 481,979 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Eric G Neilson | (i) | 561,458 | 0 | 9,504 | 16,250 | 6,569 | 593,781 | 0 |
| | (ii) | 345,407 | 200,000 | 18,822 | 30,000 | 16,473 | 610,702 | 0 |
| Sean Reynolds | (i) | 363,432 | 0 | 26,318 | 25,000 | 5,753 | 420,503 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Patricia Telles-Irvin | (i) | 310,729 | 0 | 37,370 | 25,000 | 16,877 | 389,976 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Joseph T Walsh Jr | (i) | 303,681 | 0 | 5,112 | 25,000 | 51,619 | 385,412 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| James J Phillips | (i) | 527,609 | 103,750 | 198,041 | 85,000 | 16,485 | 930,885 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Ronald Nayler | (i) | 309,792 | 5,000 | 20,048 | 25,000 | 13,251 | 373,091 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Patrick M McCarthy | (i) | 196,396 | 0 | 2,032 | 13,589 | 770 | 212,787 | 0 |
| | (ii) | 1,132,896 | 640,000 | 18,294 | 30,000 | 14,643 | 1,835,833 | 0 |
| Tyler Robert Koski | (i) | 6,500 | 0 | 0 | 650 | 20 | 7,170 | 0 |
| | (ii) | 568,274 | 834,481 | 108,236 | 30,000 | 23,186 | 1,564,177 | 0 |
| Patrick W Fitzgerald II | (i) | 1,969,820 | 200,000 | 264,185 | 25,000 | 21,982 | 2,480,987 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Murad Alam | (i) | 1,000 | 0 | 0 | 60 | 5 | 1,065 | 0 |
| | (ii) | 347,152 | 1,218,651 | 275 | 30,000 | 8,740 | 1,604,818 | 0 |
| Jayesh Mehta | (i) | 5,079 | 151,250 | 0 | 508 | 27 | 156,864 | 0 |
| | (ii) | 574,391 | 751,428 | 383 | 30,000 | 23,144 | 1,379,346 | 0 |
| William J Banis | (i) | 0 | 0 | 185,886 | 18,055 | 9,594 | 213,535 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

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

| (A) Name | | (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 | | | | |
| Jeffrey Glassroth | (i) | 266,880 | 0 | 7,920 | 15,417 | 15,530 | 305,747 | 0 |
| | (ii) | 308,000 | 325,000 | 18,505 | 30,000 | 2,295 | 683,800 | 0 |
| Morteza A Rahimi | (i) | 157,058 | 0 | 3,881 | 16,500 | 15,001 | 192,440 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Supplemental Information on Tax Exempt Bonds

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

▶ **Attach to Form 990.** ▶ **See separate instructions.**

2012

Open to Public Inspection

Name of the organization
Northwestern University

| | |
|--------------------------------|--|
| Employer identification number | |
|--------------------------------|--|

36-2167817

Part I Bond Issues

| | (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeased | | (h) On behalf of issuer | | (i) Pool financing | |
|---|---|----------------|-------------|-----------------|-----------------|---|--------------|----|-------------------------|----|--------------------|----|
| | | | | | | | Yes | No | Yes | No | Yes | No |
| A | Illinois Educational Facilities Authority | 52-1297563 | 4520018K9 | 10-29-2003 | 183,530,698 | Refund bonds issued 5/13/97, acquire, construct or renovate Univ facilities | | X | | X | | X |
| B | Illinois Finance Authority | 86-1091967 | 45200BFC7 | 09-09-2004 | 135,800,000 | Acquire, construct or renovate University facilities | | X | | X | | X |
| C | Illinois Finance Authority | 86-1091967 | 45200BH50 | 10-03-2006 | 150,740,726 | Refund bonds issued 12/3/97 | | X | | X | | X |
| D | Illinois Finance Authority | 86-1091967 | 45200FKZ1 | 06-25-2008 | 125,000,000 | Acquire, construct or renovate University facilities | | X | | X | | X |

Part II Proceeds

| | | A | | B | | C | | D | |
|----|--|-------------|----|-------------|----|-------------|----|-------------|----|
| 1 | Amount of bonds retired | | | | | | | | |
| 2 | Amount of bonds legally defeased | | | | | | | | |
| 3 | Total proceeds of issue | 194,022,795 | | 144,677,217 | | 150,740,726 | | 126,815,680 | |
| 4 | Gross proceeds in reserve funds | | | | | | | | |
| 5 | Capitalized interest from proceeds | | | | | | | | |
| 6 | Proceeds in refunding escrows | | | | | | | | |
| 7 | Issuance costs from proceeds | 1,092,348 | | 1,039,400 | | 1,518,234 | | 1,250,000 | |
| 8 | Credit enhancement from proceeds | | | | | | | | |
| 9 | Working capital expenditures from proceeds | | | | | | | | |
| 10 | Capital expenditures from proceeds | 158,297,067 | | 143,637,817 | | | | 125,565,680 | |
| 11 | Other spent proceeds | | | | | | | | |
| 12 | Other unspent proceeds | | | | | | | | |
| 13 | Year of substantial completion | 2008 | | 2008 | | 2011 | | | |
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 14 | Were the bonds issued as part of a current refunding issue? | X | | | X | | X | | X |
| 15 | Were the bonds issued as part of an advance refunding issue? | | X | | X | X | | | X |
| 16 | Has the final allocation of proceeds been made? | X | | X | | X | | X | |
| 17 | Does the organization maintain adequate books and records to support the final allocation of proceeds? | X | | X | | X | | X | |

Part III Private Business Use

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

Part III Private Business Use (Continued)

| | | A | | B | | C | | D | |
|----|--|----------|----|----------|----|----------|----|-----|----|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 3a | Are there any management or service contracts that may result in private business use of bond-financed property? | X | | X | | X | | | X |
| b | If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | X | | X | | X | | |
| c | Are there any research agreements that may result in private business use of bond-financed property? | X | | X | | X | | | X |
| d | If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | X | | X | | X | | |
| 4 | Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government | 0 00000% | | 0 00000% | | 0 00000% | | % | |
| 5 | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government | 0 00000% | | 0 00000% | | 0 00000% | | % | |
| 6 | Total of lines 4 and 5 | 0 00000% | | 0 00000% | | 0 00000% | | % | |
| 7 | Does the bond issue meet the private security or payment test? | | X | | X | | X | | X |
| 8a | Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? | | X | | X | | X | | X |
| b | If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of | % | | % | | % | | % | |
| c | If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? | | | | | | | | |
| 9 | Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? | X | | X | | X | | X | |

Part IV Arbitrage

| | | A | | B | | C | | D | |
|---|--|--------------------------------|----|--------------------------------|----|-----|----|-------------------------|----|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 | Has the issuer filed Form 8038-T? | | X | | X | | X | | X |
| 2 | If "No" to line 1, did the following apply? | | | | | | | | |
| a | Rebate not due yet? | X | | X | | X | | | X |
| b | Exception to rebate? | | X | | X | | X | | X |
| c | No rebate due? | | X | | X | | X | X | |
| If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed | | | | | | | | | |
| 3 | Is the bond issue a variable rate issue? | | X | X | | | X | X | |
| 4a | Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | X | X | | | X | X | |
| b | Name of provider | Morgan Stanley and other banks | | Morgan Stanley and other banks | | | | other banks other banks | |
| c | Term of hedge | 1 000000000000 | | 1 000000000000 | | | | 33 000000000000 | |
| d | Was the hedge superintegrated? | | X | | X | | | | X |
| e | Was a hedge terminated? | | X | | X | | | | X |

Part IV

Arbitrage (Continued)

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

Part V

Procedures To Undertake Corrective Action

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

Part VI

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

| Identifier | Return Reference | Explanation |
|---------------------------|------------------|-------------|
| See Additional Data Table | | |
| | | |
| | | |
| | | |
| | | |

Software ID:

Software Version:

EIN: 36-2167817

Name: Northwestern University

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|---|-----------------------------------|--|
| Schedule K Part IV , Arbitrage, Line 2c | Date Rebate Computation Performed | Issuer Name Illinois Finance Authority Date the Rebate Computation was Performed 06/25/2 013 |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|--------------------|---------------------------|---|
| Part I, column (c) | Bond issues,CUSIP numbers | The following bond issuances are associated with additional CUSIP numbers as noted (B)IFA -Series 2004 CUSIP #45200BFD5, (D)IFA-Series 2008 CUSIP #45200FLA5 and #45200FLB3 |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|-----------------|---|---|
| Part II, line 3 | Issue price and proceeds of bonds (A), (B), (D) | The difference between issue price and proceeds of bonds (A), (B), and (D)are due to investment income earned on unspent proceeds of IEFA-Series 2003, IFA-Series 2004, and IFA-Series 2006 bonds, respectively |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|-------------------|----------------------|--|
| Part III, line 3b | Private Business Use | The University engages bond counsel and performs a review of management or services contracts at the time of any new bond issuances, generally every two years. At that time all existing bond issuances and private use are re-examined and re-documented. The University monitors changes in private use on an ongoing basis internally. |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|-------------------|------------------|---|
| Part III, line 3d | | The University engages bond counsel and performs a review of research agreements at the time of any new bond issuances, generally every two years. At that time all existing bond issuances and private use are re-examined and re-documented. The University monitors changes in private use on an ongoing basis internally. |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|------------------|-----------------------------------|--|
| Part III, line 4 | Funding Sources and Private Usage | The University finances acquisition, construction and renovation of University facilities with multiple funding sources including tax exempt bond issues. There is a small amount of monitored private use within the facilities partially funded by bonds, however, such use was financed from other sources. |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|------------------|-----------------------------|---|
| Part IV, line 4b | Arbitrage, name of provider | Hedge providers are Morgan Stanley Capital Services, Bank of America, and JP Morgan for bo th(B) IFA-Series 2004 and (D)IFA-Series 2008 bonds |

Form 990 Schedule K, Part VI - Supplemental Information

| Identifier | Return Reference | Explanation |
|-----------------|-------------------------|--|
| Part IV, line 6 | Gross Proceeds Invested | In November 2009 the University filed Form 8038-T for IFA-Series 2006 bonds and disclosed gross proceeds were invested beyond an available temporary period, the University calculated and made a yield reduction payment in the amount of \$310,118 |

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2012

Open to Public Inspection

| | |
|---|--|
| Name of the organization Northwestern University | Employer identification number 36-2167817 |
|---|--|

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) Patrick Fitzgerald II | | Compensation package | | X | 2,500,000 | 2,567,080 | | No | Yes | | Yes | |
| (2) Robert McQuinn | | Compensation package | | X | 130,000 | 137,424 | | No | Yes | | Yes | |
| (3) Robert McQuinn | | Compensation package | | X | 50,000 | 52,528 | | No | Yes | | Yes | |
| (4) James Phillips | | Compensation package | | X | 1,100,000 | 1,100,000 | | No | Yes | | Yes | |
| (5) James Phillips | | Compensation package | | X | 350,000 | 27,778 | | No | Yes | | Yes | |
| | | | | | | | | | | | | |
| Total ▶ \$ | | | | | 3,884,810 | | | | | | | |

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 |
| See Additional Data Table | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part V Supplemental Information

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

| Identifier | Return Reference | Explanation |
|---------------------|------------------|---|
| Schedule L, Part IV | | Amounts reflected with respect to the business transaction to Technology Crossover Ventures represent venture capital gains less capital purchases during the tax year |
| Schedule L, Part IV | | Amounts reflected with respect to the business transaction to Roundtable Healthcare Partners represent fees, expenses, and private equity purchases less return of capital during the tax year |
| Schedule L, Part IV | | Amounts reflected with respect to the business transaction to Thoma Cressey Funds represent return of capital, capital gains and income less fees, expenses and private equity purchases during the tax year |
| Schedule L, Part IV | | Amounts reflected with respect to the business transaction to Madison Dearborn represent fees, expenses, and private equity purchases less return of capital and capital gains during the tax year |
| Schedule L, Part IV | | Amounts reflected with respect to the business transaction to New Enterprise Associates represent return of capital and capital gains less venture capital purchases and capital losses during the tax year |
| Schedule L, Part IV | | Investment of University assets are monitored by an Investment Committee of the Board of Trustees and governed by an Investment Policy, which includes a conflict of interest policy That policy establishes criteria under which any investments will be made Among other things, affected Trustees must recuse themselves of any vote related to the investment |

Additional Data

Software ID:
Software Version:
EIN: 36-2167817
Name: Northwestern University

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

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-----------------------------------|---|---------------------------|---|---|----|
| | | | | Yes | No |
| (1) Northern Trust | Nicholas D Chabreja,Trustee, was serving as a bank director | 1,081,157 | Bank and investment transaction fees less interest earned from bank | | No |
| (2) Northern Trust | Frederick H Waddell, Trustee, was serving as a bank director | 1,081,157 | Bank and investment transaction fees less interest earned from bank | | No |
| (3) Technology Crossover Ventures | Jay C Hoag, Trustee, partner w/ ownership interest over 5% | 6,086,053 | Investment in two venture capital funds Technology Crossover Ventures VI and VIIA | | No |
| (4) Rndtable Hlthcare Ptnrs | Lester B Knight, Trustee, was serving as a director | 2,668,355 | Investment in three private equity funds Roundtable Healthcare Partners, Roundtable Healthcare Partners II and III | | No |
| (5) Aon Corporation | Lester B Knight, Trustee, was serving as a director | 2,973,456 | Insurance broker | | No |
| (6) Thoma Cressey Fd | Lee M Mitchell, Trustee, partner w/ ownership interest over 5% | 5,441,075 | Investment in five private equity funds Thoma Cressey Fund VI, VII, and VIII, and Thoma Bravo Fund IX and X-A | | No |
| (7) Madison Dearborn | John A Canning, Jr , Trustee, partner w/ ownership interest over 5% | 4,549,722 | Investment in four private equity funds Madison Dearborn III, IV, V and VI, and two private investments MDCP Co-Investors (SP), LP and MDCP Co-Investors Varietal | | No |
| (8) Madison Dearborn | Timothy P Sullivan, Trustee, was serving as managing director | 4,549,722 | Investment in four private equity funds Madison Dearborn III, IV, V and VI, and two private investments MDCP Co-Investors (SP), LP and MDCP Co-Investors Varietal | | No |
| (9) New Enterprise Associates | Peter J Barris, Trustee, partner w/ ownership interest over 5% | 2,449,225 | Investment in four venture capital funds NEA X, XI, XII, and XIV | | No |
| (10) VWR International Inc | Timothy P Sullivan, Trustee, was serving as board member | 7,073,840 | Sale of labratory equipment | | No |
| (11) RCPI Landmark Properties LLC | A Steven Crown, Trustee, indirect ownership interest over 5% | 390,352 | Lease of office space | | No |
| (12) Charlotte Cubbage | Family member of Alan K Cubbage, Officer | 74,240 | Employment | | No |
| (13) Jennifer Linzer | Family member of Daniel I Linzer, Officer | 25,646 | Employment | | No |
| (14) Kristen Novelline | Family member of William A Osborn, Trustee | 29,902 | Employment | | No |

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
Northwestern University

Employer identification number
36-2167817

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 | 6 | 1,175,575 | FMV on date of gift |
| 2 Art—Historical treasures | | | | |
| 3 Art—Fractional interests | | | | |
| 4 Books and publications | X | | 30,498 | FMV on date of gift |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities—Publicly traded | X | 485 | 26,746,738 | Proceeds from sale |
| 10 Securities—Closely held stock | | | | |
| 11 Securities—Partnership, LLC, or trust interests | | | | |
| 12 Securities—Miscellaneous | | | | |
| 13 Qualified conservation contribution—Historic structures | | | | |
| 14 Qualified conservation contribution—Other | | | | |
| 15 Real estate—Residential | | | | |
| 16 Real estate—Commercial | | | | |
| 17 Real estate—Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ► (<u>Event/tickets</u>) | X | 134 | 216,788 | FMV on date of gift |
| 26 Other ► (<u>Equip/software</u>) | X | 4 | 112,163 | FMV on date of gift |
| 27 Other ► (<u> </u>) | | | | |
| 28 Other ► (<u> </u>) | | | | |

29

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

29

3

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

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

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

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

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 Northwestern University | Employer identification number 36-2167817 |
|---|--|

| Identifier | Return Reference | Explanation |
|------------|---|---|
| | Form 990, Part VI, Section A, line 1 | Executive Committee of the Board of Trustees is comprised of 19 members of the governing body The Executive Committee may exercise the power of the Board of Trustees between meetings with respect to ordinary business transactions |

| Identifier | Return Reference | Explanation |
|------------|--------------------------------------|---|
| | Form 990, Part VI, Section A, line 2 | Business Relationships Christopher B Galvin and D Gidean Searle Christopher B Galvin and Patrick G Ryan Jr Christopher B Galvin and John A Canning, Jr John A Canning, Jr and Eugene S Sunshine John A Canning, Jr and Timothy P Sullivan Eugene S Sunshine and Timothy P Sullivan Lester B Knight and John A Canning, Jr Lester B Knight and Frederick H Waddell Lester B Knight and William A Osborn Lester B Knight and T Bondurant French Lester B Knight and M Jude Reyes Lester B Knight and D Gidean Searle Lester B Knight and Christopher B Galvin |

| Identifier | Return Reference | Explanation |
|------------|--------------------------------------|--|
| | Form 990, Part VI, Section A, line 2 | Business Relationships continued Edward M Liddy and D Cameron Findlay Edward M Liddy and D Gideon Searle Edward M Liddy and Miles D White William A Osborn and Edward M Liddy William A Osborn and Nicholas D Chabreja William A Osborn and Miles D White M Jude Reyes and A Steven Crown M Jude Reyes and Frederick H Waddell Frederick H Waddell and Nicholas D Chabreja |

| Identifier | Return Reference | Explanation |
|------------|---|---|
| | Form 990, Part VI, Section A, line 4 | The University made the following changes to its governing documents since the prior Form 990 was filed (i) The Bylaws further formalized existing practices by the Committee on Audit, Risk and Compliance, including that such committee shall oversee the integrity of the University's financial statements and the management of and process by which significant risks are brought to the Committee's attention, (ii) Prior Bylaws provided that special committees may be appointed by the Chairman of the Board, and a Committee on Innovation and Entrepreneurship was formed to have oversight of the technology transfer and work with the Board and administration on issues relating to patents, inventions, innovation, and new venture strategies, (iii) The ByLaws now address resignation and removal of a Trustee A Trustee must offer resignation to the Chairman of the Board should the Trustee be unable or unwilling to fulfill Trustee responsibilities and in the event of a significant change in personal circumstances including a change in employer or principal responsibilities A Trustee may be removed by a two-thirds vote of the Board, (iv) An increase in the number of National Trustees from 30 to 31 and an increase of one Ex Officio Trustee |

| Identifier | Return Reference | Explanation |
|------------|---------------------------------------|--|
| | Form 990, Part VI, Section B, line 11 | A hard copy of the University's final Form 990 (including all required schedules), was provided to each voting member of the University's governing body prior to filing. That version of the Form 990 is identical to the one ultimately filed with the IRS. Prior to providing a copy to the governing body, a draft of the Form 990 was reviewed by the Committee on Audit of the Board of Trustees, which is comprised of a subset of members from the governing body who review the accounting procedures and controls of the University. |

| Identifier | Return Reference | Explanation |
|------------|---|--|
| | Form 990, Part VI, Section B, line 12c | <p>University ByLaws and Statutes, which have been adopted by the Board of Trustees, require that any conflict of interest of any Trustee, Officer or their immediate families be disclosed to the Board of Trustees in writing. An Officer shall call any conflict of interest to the attention of the President. If the matter is being considered by the Board of Trustees or one of its committees, such Officer is not permitted to participate in or make recommendations about the conflict of interest under discussion, except to the extent the Officer is required by the Trustees or other officers to answer pertinent questions related to the conflict. A Trustee having a conflict of interest shall call it to the attention of the Board or committee and shall abstain on voting on the subject. The Trustee is encouraged to answer pertinent questions when the his/her knowledge of the subject will assist the Board or any of its committees. Potential conflicts of interest of Trustees and Officers are reviewed by the University's General Counsel. Pursuant to the University's staff and faculty Conflict of Interest Policies, employees are required to disclose potential conflicts of interest to the University on an annual basis. Employees receive annual reminders to complete a conflict of interest questionnaire and responses are submitted electronically and reviewed by each employee's supervisor. Potential conflicts are further reviewed by the University's Department of Human Resources and action taken by senior management as needed.</p> |

| Identifier | Return Reference | Explanation |
|------------|--|---|
| | Form 990, Part VI, Section B, line 15 | <p>The Compensation Committee of the Board includes members of the University's governing body who are not related or controlled by the employees whose compensation they are reviewing. To assess the reasonableness of employee compensation, the Compensation Committee of the Board relies on formal surveys and comparability data prepared and compiled by outside consultants who have expertise in the field of executive compensation assessment and benchmarking. The Compensation Committee of the Board met in June 2011 to review and approve fiscal year 2012 (September 1, 2011 to August 31, 2012) salaries and met in June 2012 to review and approve fiscal year 2013 (September 1, 2012 to August 31, 2013) salaries. Actions undertaken by the Compensation Committee of the Board are contemporaneously documented in the minutes of each meeting. Compensation Committee of the Board reviewed and approved compensation of all current officers listed in Part VII, Section A.</p> |

| Identifier | Return Reference | Explanation |
|------------|---------------------------------------|--|
| | Form 990, Part VI, Section C, line 19 | Governing documents The University maintains an Office for University Relations where information requests from the public are processed The organizing document by which the University was created, its charter, is available upon request Conflict of Interest Policies The University's conflict of interest policies for faculty and staff are available on the University's website Financial Statements The University's annual audited consolidated financial statements are available on the University's website |

| Identifier | Return Reference | Explanation |
|---|----------------------------|---|
| Local chapters, branches, or affiliates | Form 990, Part VI, Line 10 | The University does not have local chapters, branches, lodges, units or similar affiliates. As described in Schedule F, the University has one international campus, located in Doha, Qatar. The University has a number of affiliation agreements and arrangements with other research and educational institutions but the University does not have authority to exercise supervision and control of such institutions. |

| Identifier | Return Reference | Explanation |
|----------------|-------------------------------|--|
| Whistleblow er | Form 990, Part VI, Line 13 | The University's w histleblow er policy is applicable to staff and faculty for the reporting tax year and was adopted by the Board of Trustees after the close of the tax year |

| Identifier | Return Reference | Explanation |
|---|----------------------------|--|
| Document Retention and Destruction Policy | Form 990, Part VI, Line 14 | The University's written document retention and destruction policy is applicable to staff and faculty for the reporting tax year and has been adopted by the Board of Trustees after the close of the tax year |

| Identifier | Return Reference | Explanation |
|----------------------------|-----------------------------|--|
| Joint Venture Arrangements | Form 990, Part VI, Line 16b | The University does not have a written policy regarding joint ventures in general. However, joint venture agreements are reviewed by the University's Office of General Counsel to evaluate whether the arrangement furthers the mission of the University and to ensure the safeguarding of University's assets. The University also has guidelines concerning joint ventures in its technology transfer and investment policies. |

| Identifier | Return Reference | Explanation |
|---|--------------------|--|
| Average hours per week devoted to related organizations | Form 990, Part VII | The individuals listed in column A who have hours associated with a related organization have duties at Northw estern Medical Faculty Foundation, which bases hours devoted to that organization on a 60-hour w ork w eek. |

| Identifier | Return Reference | Explanation |
|--|---------------------------|--|
| Changes in Net Assets or Fund Balances | Form 990, Part XI, line 9 | Change in value of derivative instruments 40334000 Change in value of nonoperating items 2169944 |

| Identifier | Return Reference | Explanation |
|------------|-----------------------------|---|
| | Form 990, Part XII, Line 2c | The Audit, Risk and Compliance Committee that assumes responsibility for oversight of the audit review , compilation of financial statements and selection of an independent accountant approved an increase in its membership from ten to twelve members |

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
Northwestern University

Employer identification number
36-2167817

| 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) Northwestern Student Holdings LLC 1800 Sherman Ave Suite 504 Evanston, IL 60201 | Student enterprises | IL | 70,000 | 0 | Northwestern University |
| | | | | | |
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| 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 |
| See Additional Data Table | | | | | | | |
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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) Disproporionate 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 | |
| (1) Bensell US Feeder LP 50 Lothian Rd Festival Square Edinburgh EH3 9WJ UK 98-0492320 | Investments | UK | | Investment | | 13,243,423 | | No | | | No | 56 000 % |
| (2) Conquest Managed Futures Select Fund III Ltd 45 Market Street Suite 3205 Camana Bay, Grand Cayman KYI-9003 CJ | Investments | CJ | | Investment | | 55,000,000 | | No | | | No | 100 000 % |
| | | | | | | | | | | | | |
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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) Charitable Remainder UniTrusts (119) | | IL | | T | | | | | No |
| (2) Charitable Remainder Annuity Trusts (22) | | IL | | T | | | | | No |
| | | | | | | | | | |
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Part V

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

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

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

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

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

| | Yes | No |
|----|-----|----|
| | | |
| 1a | | No |
| 1b | | No |
| 1c | Yes | |
| 1d | | No |
| 1e | | No |
| 1f | | No |
| 1g | | No |
| 1h | | No |
| 1i | | No |
| 1j | Yes | |
| | | |
| 1k | | No |
| 1l | | No |
| 1m | | No |
| 1n | | No |
| 1o | Yes | |
| | | |
| 1p | Yes | |
| 1q | Yes | |
| | | |
| 1r | Yes | |
| 1s | Yes | |

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

| (a) Name of other organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|-----------------------------------|----------------------------------|------------------------|--|
| See Additional Data Table | | | |
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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: 36-2167817
Name: Northwestern 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 |
|---|---------------------|--|
| Related Tax-Exempt Organization | Schedule R, Part II | SON Consortium Inc applied for Section 501(c)(3) tax-exemption in November 2013 |
| Identification of Related Tax-Exempt Organization | Schedule R, Part II | Northwestern Medical Faculty Foundation is included as a "related organization" because under its current bylaws, its clinical department chairs comprise a majority of its directors. These individuals are also employed as chairs of the corresponding academic departments within the Feinberg School of Medicine of Northwestern University. However, the two organizations do not stand in the roles of parent and subsidiary. They are separate legal entities, and Northwestern Medical Faculty Foundation is not subject to control by Northwestern University or vice-versa. |
| Charitable Remainder Trusts | Schedule R, Part IV | The Charitable Remainder Unitrusts and Charitable Remainder Annuity Trusts are predominantly domiciled in Illinois. |

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

| (a) Name of other organization | (b) Transaction type(a-s) | (c) Amount Involved | (d) Method of determining amount involved |
|--|------------------------------|------------------------|--|
| Rubicon Insurance Company | P | 3,952,061 | cash |
| Rubicon Insurance Company | R | 4,978,678 | cash |
| Northwestern Medical Faculty Foundation | A | 4,364,216 | cash |
| Northwestern Medical Faculty Foundation | P | 4,064,941 | cash |
| Northwestern Medical Faculty Foundation | R | 785,114 | cash |
| Northwestern Medical Faculty Foundation | C | 60,774,840 | cash |
| Northwestern Global Health Foundation | S | 1,535,759 | cash |
| Student Publishing Company | R | 175,728 | cash |
| Northwestern University Employees Benefit Trust Health | R | 40,865,978 | cash |
| Northwestern University Employees Benefit Trust Dental | R | 3,119,800 | cash |