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DLN: 93493072007107

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service foundations) ▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

Open to Public Inspection

			. '						
			lendar year, or tax year b	eginning 05-01-2015 , and ending	04-30-201	16	D Emple	over id	entification number
	ck if app Idress ch		American University					-	
	me char	-	% NICOLE BRESNAHAN CON	ITROLLER				19654	19
In	tial retur	rn	Doing business as						
Fir	nal terminat	ted	Number and street (or P O	box if mail is not delivered to street addres	ss) Room/su	ııte	E Teleph	one nui	mber
	ended re		c/o Controllers Office Suite 3	357			(202) 885-	2822
Apt	olication	pending	City or town, state or provir Washington, DC 20016802	ice, country, and ZIP or foreign postal code	:				
			washington, DC 20016802				G Gross	receipts	\$ 840,098,810
			F Name and address of	principal officer		H(a)	Is this a grou	retur	
			Douglas Kudravetz c/o Controllers Office				subordinates?	1	☐ Yes 🗸
			Washington, DC 20016	8020		н(ь)	No Are all subord	ınates	□Yes □ No
[Tax	<-exemp	t status	√ 501(c)(3)	() ◀ (insert no)	527		included?		·
J W	ebsite:	► www	w american edu				·		(see instructions)
							Group exemp		ımber ► ¶ State of legal domicile De
K Forn	n of orga	nızatıon	✓ Corporation Trust	Association Other ►		-	ii oi ioiiiiddoii 1		- State of legal dofficier by
Pa	rt I	Sum	mary						
				nission or most significant activitie					
			AN UNIVERSITY IS AN II GTON,DC	NDEPENDENT, COEDUCATIONAL	_ UNIVER:	SITYLO	CATEDONA	N 85-	ACRE CAMPUS IN
e S			·						
191									
e e	2 CI	heck th	us box • 🗀 if the organiza	ition discontinued its operations or	disposed	of more t	han 25% of it	s net a	issets
Activities & Governance		incen en	iis box F If the organize	action discontinued its operations of	аторозса	or more v		5 11000	.5500
ರ ^	3 N	umber	of voting members of the g	governing body (Part VI, line 1a) $$.				3	21
<u> </u>	4 Nu	umber	of independent voting mer	nbers of the governing body (Part V	I, line 1b)			4	21
	5 To	otal nur	mber of individuals employ		5	9,053			
ğ			•	ate if necessary)				6	475
				from Part VIII, column (C), line 12				7a	1,139,918
	b Ne	t unrela	ated business taxable inco	ome from Form 990-T, line 34 .			· · ·	7b	-559,196
		C	hadaaa ahaa dhaana ka (Daab)	ATTT Location			Prior Year	622	Current Year
<u>a</u>	8 9		ibutions and grants (Part \ am service revenue (Part '	· · · · · · · · · · · · · · · · · · ·			36,430 593,705		35,569,694 615,233,574
Ravenue	10			VIII, line 2g)		' <u> </u>	42,759		35,203,478
Ŗŝ	11			nn (A), lines 5, 6d, 8c, 9c, 10c, and			72,733	0	33,203,476
	12			ugh 11 (must equal Part VIII, colu		e -	672.005		606 006 746
		12)					672,895	,460	686,006,746
	13	Grants	s and similar amounts pai	d (Part IX, column (A), lines 1-3)			115,847	,077	122,030,696
	14		•	(Part IX, column (A), line 4)				0	(
82	15	Saları 5-10	•	mployee benefits (Part IX, column	(A), lines		310,525	,821	316,727,322
Expenses	16a		,	art IX, column (A), line 11e) .				0	(
xb∈	ь	Total fu	undraising expenses (Part IX, co	lumn (D), line 25) ▶9,982,434					
ш	17	Other	expenses (Part IX, colum	in (A), lines 11a-11d, 11f-24e) .			181,983	,783	190,538,150
	18	Total	expenses Add lines 13-1	7 (must equal Part IX, column (A)	, line 25)		608,356	,681	629,296,168
	19	Reven	ue less expenses Subtra	ct line 18 from line 12			64,538	,779	56,710,578
Net Assets or Fund Balances						Begini	ning of Current	Year	End of Year
sets afan	20	Total	assets (Part X, line 16)				1,714,106	790	1,724,755,967
AB B	21		liabilities (Part X, line 26)				657,186	_	669,979,892
Fear	22		·	btract line 21 from line 20		-	1,056,920	_	1,054,776,075
Par	t II		ature Block				, ,		· · · ·
ny kr	nowled <u>c</u>	ge and		ave examined this return, including nd complete Declaration of prepar					
	Г	,							
٠.		**** Signa	ature of officer				2017-03-01 Date		
Sign Here		, -		DEACHDED			_ 400		
	-		GLAS KUDRAVETZ CFO, VP & Ti or print name and title	NEADUKEK					
			Print/Type preparer's name	Preparer's signature		Date	Check I if	PTIN	.7054
Paic	ł	__\	MARY TORRETTA	MARY TORRETTA			self-employed	P0084	17851
	- parer	- ⊢	irm's name ► GRANT THORN				Firm's EIN ▶		
	Only	1 -	Firm's address > 1000 WILSON I	BOULEVARD SUITE 1400			Phone no (70	3) 847-	7500
	7	'	ARLINGTON, V	A 22209					

May the IRS discuss this return with the preparer shown above? (see instructions)

	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
	7 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		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 2	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	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 2	11b		No
	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 2	11 c		No
	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 2	11 d		No
е	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 2	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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		

Form	990 (2015)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Pait I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Pait II	26		No
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? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28 a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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>	28 c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Pait I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No

Yes

Yes

Yes

Form 990 (2015)

Νo

Νo

Νo

33

34

35a

35b

36

37

38

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🗦 🕏 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization maintain an escrow account other than a refunding escrow at to defease any tax-exempt bonds?
Did the organization act as an "on behalf of" issuer for bonds outstanding at any ti
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified percomplete Schedule L, Part I
Is the organization aware that it engaged in an excess benefit transaction with a dyear, and that the transaction has not been reported on any of the organization's p If "Yes," complete Schedule L, Pait I
Did the organization report any amount on Part X, line 5, 6, or 22 for receivables fror former officers, directors, trustees, key employees, highest compensated employees, "complete Schedule L, Part II

37

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Note. All Form 990 filers are required to complete Schedule O

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		V			_
		eneak in seneaule o contains a response of note to any line in this	· ui c	<u> </u>	•	Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	1,492			
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
_	Did th	L ne organization comply with backup withholding rules for reportable payments to	Vend	lors and reportable			
٠		ig (gambling) winnings to prize winners?	•		1c	Yes	
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	2a	9,053			
L	•	s return		,	2b	Yes	
D		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file				103	
3a	Did th	ne organization have unrelated business gross income of \$1,000 or more during	the y	year?	3a	Yes	
ь	If "Yes	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatic</i>	on in S	Schedule O	3b	Yes	
4a	Atany	y time during the calendar year, did the organization have an interest in, or a sig	gnatu	re or other authority			
		a financial account in a foreign country (such as a bank account, securities acc	ount,	, or other financial	4a		
		int)?			70	Yes	
Ь		s," enter the name of the foreign country BE, SP					
	(FBAR	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank R)	and	Financial Accounts			
5a	,	· ' he organization a party to a prohibited tax shelter transaction at any time durin	a the	tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited t			5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			ວນ		
C	11 16	3, to fine 3a of 3b, and the organization file Form 8880-17			5c		
6a		the organization have annual gross receipts that are normally greater than \$10 ization solicit any contributions that were not tax deductible as charitable cont			6a		No
b		s," did the organization include with every solicitation an express statement th not tax deductible?	at su	ch contributions or gifts	6b		
7		nizations that may receive deductible contributions under section 170(c).					
а		ne organization receive a payment in excess of \$75 made partly as a contribution of the payor?		d partly for goods and	7a	Yes	
ь		s," did the organization notify the donor of the value of the goods or services pi		ed?	7b	Yes	
С		ie organization sell, exchange, or otherwise dispose of tangible personal proper	ty for	which it was required to			
_		orm 8282?	7d		7 c		No
u	II TE	s," indicate the number of Forms 8282 filed during the year \dots	/u				
е	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		No
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7 f		No
g	If the require	organization received a contribution of qualified intellectual property, did the ored?	rganız	zation file Form 8899 as	7 g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	, did	the organization file a	7h		
8		coring organizations maintaining donor advised funds.	-				
		donor advised fund maintained by the sponsoring organization have excess bus the year?	sines	s holdings at any time	_		
_		,	•		8		
		ne sponsoring organization make any taxable distributions under section 49667			9a		
		ne sponsoring organization make a distribution to a donor, donor advisor, or rela on 501(c)(7) organizations . Enter	itea p	erson/	9b		
10		tion fees and capital contributions included on Part VIII, line 12	10a	1			
		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
_	facılıtı						
11	Section	on 501(c)(12) organizations. Enter		1			
		income from members or shareholders	11a				
b		s income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts.Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		
b		s," enter the amount of tax-exempt interest received or accrued during the	12b				
13	year Sectio	on 501(c)(29) qualified nonprofit health insurance issuers.	-20				
а	[s the	organization licensed to issue qualified health plans in more than one state? N o	ote S	See the instructions for			
	addıtı	onal information the organization must report on Schedule O)		13a		
D		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
c	Enter	the amount of reserves on hand	13 c				
14a	Dıd th	e organization receive any payments for indoor tanning services during the tax	year	?	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? If "No," provide an explana	tion ir	Schedule O	14b		

Form 990 (2015) Page 6 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 or note to any line 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 **1**a 21 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 Enter the number of voting members included in line 1a, above, who are ındependent 1b 21 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Νo supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Νo Did the organization have members or stockholders? 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Νo 7a Nο

Se	ection B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ue Cod	e.)
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
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
а	The governing body?	8a	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	or persons other than the governing body?	,,,		110

Yes No 10a Νo

10a Did the organization have local chapters, branches, or affiliates? . . **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 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 12h Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes 13 Yes Did the organization have a written document retention and destruction policy? 14 Yes 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 15b Yes

organization's exempt status with respect to such arrangements? Section C. Disclosure

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

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

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

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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

Own website Another's website Upon request Other (explain in Schedule O) 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 State the name, address, and telephone number of the person who possesses the organization's books and records ▶NICOLE BRESNAHAN CONTROLLER 4400 MASSACHUESETTS AVENUE NW Washington, DC 20016 (202) 885-2822

16a

16b

Yes

Yes

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See 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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	indradual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)	organization and related organizations
See Additional Data Table										

(A) Name and Title	(B) Average hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)					5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)		related organizations
See Additional Data Table										
						<u> </u>			1	
1b Sub-Total	 neets to Part VII. S	 ection A	٠.	•						
d Total (add lines 1b and 1c)				٠.		▶		6,484,526	0	485,995

- Did the organization list any former officer, director or trustee, key employee, or highest compensated employee 3 Yes For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the
- organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for 5 Νo

Section B. Independent Contractors		
Complete this table for your five highest compensated independent co- compensation from the organization. Report compensation for the cale.		
(A) Name and business address	(B) Description of services	(C) Compensation
SKANSKA USA BUILDING INC, 1633 LITTLETON ROAD PARSIPPANY, NJ 07054	CONSTRUCTION	40,394,145
WHITING TURNER CONTRACTING COMPANY, 300 EAST JOPPA ROAD TOWSON, MD 21286	CONSTRUCTION	38,779,561
ARAMARK, 1101 MARKET STREET PHILADELPHIA, PA 19107	FOOD & CLEANING	6,881,178
2U Inc, 8201 Corporate Drive Suite 900 LANDOVER, MD 20785	Online edu Services	4,237,079
Wileyedu LLC, 1415 West 22nd Street Suite 800 OAK BROOK, IL 60523	Online edu Services	3,191,956
2 Total number of independent contractors (including but not limited to th \$100,000 of compensation from the organization ► 42	ose listed above) who received more than	

Yes

Form 99								Page 9
Part V	1 1	Statement of						_
		Check if Schedul	e O contains a respon	se or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
रु द	1a	Federated campa	aigns 1a					
Grants mounts	b	Membership due	s 1b	3,368,400				
ج ق آ	С	Fundraising ever	nts 1c					
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organiza	tions 1d					
	e	Government grants	(contributions) 1e	8,441,920				
	f	All other contribution similar amounts not		23,759,374				
	g	Noncash contribution 1a-1f \$	ns included in lines	2,484,647		İ		
	h	Total. Add lines	1a-1f		35,569,694			
<u>ə</u>				Business Code				
4.5	2a	STUDENT TUITION 8	k FEES	611710	507,647,720	507,647,720		
å	b	AUXILIARY SERVICES		713940	73,408,742	73,408,742		
Program Service Revenue	С	RESEARCH/TRAININ		611430	22,043,140	22,043,140		
₹	d	PUBLIC RADIO STAT		611710	10,283,730	10,283,730	1 101 010	
ran	e f	All other program	n service revenue	611710	1,850,242	748,302	1,101,940	
⊈ og	'							
	g 3		2a-2f		615,233,574			
	•		me (including dividenc ramounts)		24,624,036		37,978	24,586,058
	4		ment of tax-exempt bond p	proceeds >	0			
	5	Royalties	(ı) Real	(II) Personal	0			
	6a	Gross rents	(I) Real	(II) Personal				
	b	Less rental expenses						
	С	Rental income	0	0				
	d	or (loss) Net rental incom	ne or (loss)		o			
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	164,671,506					
	ь	Less cost or other basis and	154,092,064					
		sales expenses Gain or (loss)	10,579,442					
	d	· · · L	5)		10,579,442			10,579,442
Other Revenue	8a	Gross income fro events (not inclu \$	om fundraising uding reported on line 1c)					
Other F	ь	Less direct exp	а					
•	С	•	oss) from fundraising e r	events 🕨	0			
	9a	Gross income fro See Part IV, line	om gaming activities 19 a					
		Less direct exp	L		0			
	C	Net income or (Id	oss) from gamıng actıv _	vities	ď			
	10a	Gross sales of in returns and allow						
			oss) from sales of inve		0			
	11a	Miscellaneous	kevenue	Business Code				
	ь							
	c							
	d	All other revenue	e					
	е	Total. Add lines	11a-11d		0			
	12	Total revenue. S	ee Instructions		686,006,746	614,131,634	1,139,918	35,165,500
	1				550,550,740	01 1,101,004	1,133,310	55,105,500

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)

	ot include amounts reported on lines 6b, o, 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 domestic organizations and domestic governments See Part IV, line 21	1,721,447	1,721,447		
2	Grants and other assistance to domestic individuals See Part IV, line 22	119,606,037	119,606,037		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	703,212	703,212		
4	Benefits paid to or for members	0	·		
5	Compensation of current officers, directors, trustees, and key employees	6,131,901	3,098,291	2,439,818	593,792
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	250,713,941	231,970,140	14,301,810	4,441,991
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,182,072	14,810,028	1,054,774	317,270
9	Other employee benefits	27,576,696	20,349,883	5,869,641	1,357,172
10	Payroll taxes				
		16,122,712	14,755,702	1,050,904	316,106
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	1,034,028		1,034,028	
С	Accounting	936,056		936,056	
d	Lobbying	48	48		
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	1,459,678		1,459,678	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	62,761,272	60,395,764	1,162,521	1,202,987
12	Advertising and promotion	4,224,402	4,119,659	11,565	93,178
13	Office expenses	13,795,121	12,615,794	500,363	678,964
14	Information technology	11,582,452	11,573,514	5,120	3,818
15	Royalties	0			
16	Occupancy	17,903,930	16,529,622	1,364,187	10,121
17	Travel	9,980,032	9,394,266	91,319	494,447
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	14,953,136	14,953,136		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	34,766,383	34,766,383		
23	Insurance	8,202,601	8,202,601		
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)				
а	FOOD SERVICES	4,417,247	3,587,058	357,601	472,588
b	BAD DEBT EXPENSE	3,102,643	3,102,643		
c	ALL OTHER EXPENSES	1,419,121	1,419,121		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	629,296,168	587,674,349	31,639,385	9,982,434
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form	990 (2	2015)					Page 11
Par	t X	Balance Sheet					
		Check if Schedule O contains a response or note to a	ny line	ın thıs Part X			<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			35,228	1	37,028
	2	Savings and temporary cash investments			76,500,366	2	47,195,317
	3	Pledges and grants receivable, net			10,917,347	3	12,017,512
	4	Accounts receivable, net			21,723,086	4	21,161,772
Assets	5	Loans and other receivables from current and former trustees, key employees, and highest compensated II of Schedule L		0	_	0	
	6	Loans and other receivables from other disqualified psection 4958(f)(1)), persons described in section 4958 (f)(1), persons described in section 495 contributing employers and sponsoring organizations voluntary employees' beneficiary organizations (see Part II of Schedule L	(3)(B), and ction 501(c)(9)	U	5	0	
					0	6	0
	7	Notes and loans receivable, net			0	7	0
	8	Inventories for sale or use		33,013	8	36,294	
	9	Prepaid expenses and deferred charges			2,002,513	9	2,056,026
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,199,560,375			
	b	Less accumulated depreciation	10b	479,590,262	653,460,789	10 c	719,970,113
	11	Investments—publicly traded securities			832,261,790	11	793,265,608
	12	Investments—other securities See Part IV , line 11			44,139,346	12	48,995,204
	13	Investments—program-related See Part IV, line 11			14,245,118	13	14,481,348
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			58,788,194	15	65,539,745
	16	Total assets.Add lines 1 through 15 (must equal line	34)		1,714,106,790	16	1,724,755,967
	17	Accounts payable and accrued expenses			72,422,495	17	76,197,580
	18	Grants payable			0	18	0
	19	Deferred revenue			15,359,328	19	15,311,937
	20	Tax-exempt bond liabilities			422,375,000	20	422,375,000
	21	Escrow or custodial account liability Complete Part	IV of S	Schedule D	0	21	0
ilities	22	Loans and other payables to current and former offic key employees, highest compensated employees, ar	nd disq	ualified			
Liabilit		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated t			59,529,897	23	59,244,636
	24	Unsecured notes and loans payable to unrelated thir	•		0	24	0
	25	Other liabilities (including federal income tax, payab and other liabilities not included on lines 17-24) Complete Part X of Schedule D	les to i	related third parties,			
					87,499,684	25	96,850,739
	26	Total liabilities. Add lines 17 through 25			657,186,404	26	669,979,892
	1	6 ' ' ' ' I ' C II OFT 6 447 (4 00 0F0) I		-	ı		i

30

31

32

33

34

complete lines 30 through 34.

Total net assets or fund balances

Total liabilities and net assets/fund balances

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 843,576,355 27 853,759,788 27 Unrestricted net assets . 107,985,992 92,137,567 28 Temporarily restricted net assets 28 105,358,039 108,878,720 29 Permanently restricted net assets 29

1,724,755,967 Form 990 (2015)

30

31

32

33

34

1,056,920,386

1,714,106,790

1,054,776,075

686,006,746

629,296,168

56,710,578

1,056,920,386

-58,854,889

1,054,776,075

No

Νo

Yes

Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI							٠ [
 atal manager (and the small Part WIII) and manager (A) limit (A)								

Total revenue (must equal Part VIII, column (A), line 12)

Total expenses (must equal Part IX, column (A), line 25) . . .

Revenue less expenses Subtract line 2 from line 1 . . . Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

Net unrealized gains (losses) on investments . . Donated services and use of facilities .

Investment expenses Prior period adjustments .

Other changes in net assets or fund balances (explain in Schedule O) .

column (B))

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, Part XIII Financial Statements and Reporting

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

1 Accounting method used to prepare the Form 990 Cash 🗸 Accrual Cother 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

Separate basis Consolidated basis **b** Were the organization's financial statements audited by an independent accountant?

basis, consolidated basis, or both

Separate basis

Schedule O

c 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?

Single Audit Act and OMB Circular A-133?

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

✓ Consolidated basis

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Both consolidated and separate basis

Both consolidated and separate basis

1

2

3

4

5

6

7

8

9

10

2c

3a

3b

Yes

Yes

Yes Form 990 (2015)

2a

2b Yes

Additional Data

(Code

Student Services

Software ID: Software Version:

EIN: 53-0196549

including grants of \$

Name: American University

) (Revenue \$

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	60,320,149	ıncludıng grants of \$) (Revenue \$
	_				

44,765,397

A cademic Support

) (Expenses \$

(Code) (Expenses \$ 55,995,456 including grants of \$) (Revenue \$)
Institutional Support

(Code) (Expenses \$	76,788,321 including grants of \$	2,424,659) (Revenue \$	33,075,172)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Research & Public Service

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

Compensated Employees, and Inde	pendent co	illiac	.tor:	3				ı	i .	i .
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jack C Cassell Chair	2 0	×						0	0	0
Marc N Duber Vice Chair	0 0 2 0	х						0	0	0
Gary M Abramson Trustee	2 0	×						0	0	C
Gına F Adams Trustee	2 0	x						0	0	0
Stephanie M Bennett-Smith Trustee	2 0	x						0	o	c
Gary D Cohn Trustee	2 0	х						0	0	C
Pamela M Deese	2 0				\vdash	\vdash				

0 0 20

0 0

Х

Χ

Trustee

Trustee

Trustee

Trustee

Hani MS Farsi

Thomas A Gottschalk

Gisela B Huberman

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

Compensated Employees, and Inde	pendent co	illiac	LOIS	3				i i	1	ı
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	officer and a					(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	,	organization and related organizations
C Nicholas Keating Jr	2 0									
Trustee	0 0	X						0	0	0
Marana Karasa	2 0									
Margery Kraus		х						0	0	О
Trustee	0 0									
Gerald Bruce Lee Trustee	2 0	x						0	0	0
Ross B Levinsohn	2 0									
Trustee	0 0	X						0	0	0
Charles H Lydecker	2 0									
Trustee	0 0	Х						0	0	0
Betsy A Mangone	2 0									
Trustee	0 0	Х						0	0	0
Robyn Rafferty Mathias	2 0									

0 0 20

0 0

Х

Χ

Trustee

Trustee

Trustee

Peter L Scher Trustee

Alan L Meltzer

Arthur J Rothkopf

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

28,645

49,459

42,622

525

37,058

ol

0

0

403,383

256,647

346,081

95,635

530,541

Compensated Employees, and Inde					rus	stee	s, F	(ey Employee	as, Hignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos mo unles	sition nore tl ss pe	(C) n (do than ersoi icer i	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jeffrey A Sine	2 0	x						0	0	С
Trustee	0 0	↓ '	<u>ш</u> ′	Щ'	 	↓ '	<u>↓</u> _'	<u> </u>	 /	
Cornelius M Kerwin	50 0		'	x		'	'	1,030,811	. 0	46,299
President	0.0	1 1	1 '	'	1	'	'	1	1	1
Scott A Bass Provost	50 0			х				620,584	0	51,685
Mary E Kennard VP & University Counsel	50 0			x				519,136	0	36,626
Douglas Kudravetz CFO/VP Finance/Treasurer	50 0			x				543,790	0	46,472
Gail Short Hanson	50 0									

0.0 50 0

0 0 50 0

0 0

Х

Х

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VP Campus Life

Teresa Flannery

David G Swartz

Courtney Surls

Claudio Grossman

Dean & Professor

VP & CIO

VP of Communication

VP Development & Alumni Rel

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

(A)

(B)

(C)

(D)

(E)

Reportable

Reportable

(F)

11,058

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer tor/t	one n is and rust	tee)	Reportable compensation from the organization (W- 2/1099- MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
	50 0					-			
Richard D Breitman	50 0					l _x	352,625	0	12,616
Assistant Professor	0 0					^	332,023	0	12,010
Robert D Dinerstein	50 0					х	330,978	0	45,200
Professor	0 0								
Jeffrey H Harns	50 0					l			
Professor	0 0					X	352,537	0	31,936
Nicholas N Kittne	50 0								
Professor	0 0					×	406,922	0	24,003
Richard J Wilson	50 0								
Professor	0.0					х	453,346	0	21,791

241,510

50 0

0 0

Thomas J Minar

VP Development & Alumni Rel

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE A

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

(Form 990 or

Internal Revenue Service Name of the organization

990EZ)

Treasury

Department of the

American University

✓

Part I

1

2

3

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

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. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

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

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

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

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

www.irs.gov/form990.

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

OMB No 1545-004

DLN: 93493072007107

Employer identification number

53-0196549

Open to Public Inspection

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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes No Total

Schedule A (Form 990 or 990-EZ) 2015 Page 2 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 (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total 20

(OI	fiscal year beginning in) 🕨 📗	(4)2011	(5)2012	(6)2013	(4)2011	(6)2013	(1)1 otal
1	Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	32,204,484	31,666,868	35,321,051	36,430,623	35,569,694	171,192,720
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	32,204,484	31,666,868	35,321,051	36,430,623	35,569,694	171,192,720
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)						0
6	Public support. Subtract line 5 from line 4						171,192,720
S	ection B. Total Support						

Calendar year **(b)**2012 (c)2013 (d)2014 (e)2015 (a)2011 (f)Total (or fiscal year beginning in) ▶ 32,204,484 31,666,868 35,321,051 36,430,623 35,569,694 171,192,720 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, 0 royalties and income from similar sources 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 24,497,900 19,350,741 19,998,439 19.453.966 24.624.036 107,925,082 capital assets (Explain in Part VI) 11 Total support. Add lines 7 279,117,802 through 10

Gross receipts from related activities, etc. (see instructions) 12 2,881,664,999 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage

Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 61 333 % Public support percentage for 2014 Schedule A, Part II, line 14 15 15 0 %

16a 33 1/3% support test - 2015. 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-2014. 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 - 2015. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□

b 10%-facts-and-circumstances test - 2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) ⊤otal
•	iscal year beginning in) ▶	(-)	(-)	(0)_00	(-)	(-)	(1)
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 Total. Add lines 1 through 5						
6	Amounts included on lines 1, 2,						
/a	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 Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
٥	from line 6)						
Se	ction B. Total Support		•		•		•
	Calendar year						757
(or f	iscal year beginning in) ▶	(a)2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
b	and income from similar sources Unrelated business taxable						
U	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b						
L1	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						
	VI)						
L3	Total support. (Add lines 9, 10c, 11, and 12)						
L4	First five years.If the Form 990 is	cor the organizati	n's first, second	, third, fourth, or	I fifth tax vear as a	section 501(c)(3) organization
	check this box and stop here		,	,,,	,		▶ □
Se	ction C. Computation of Pub	lic Support P	ercentage				-
15	Public support percentage for 2015			13 column (f))		45	
		•		15, column (1))		15	
L6	Public support percentage from 20		<u> </u>			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
L7	Investment income percentage for	2015 (line 10c, c	olumn (f) dıvıded	by line 13, colun	nn (f))	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	17		18	
L9a	33 1/3% support tests—2015.If the				l line 15 is more t		nd line 17 is not
-	more than 33 1/3%, check this box	=					▶ □
b	33 1/3% support tests—2014.If the					-	•
_	18 is not more than 33 1/3%, check	-					
20	Private foundation If the organizat						

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V, D

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
3a	509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3 c		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
_	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under	15		
C	If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9 c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10 a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 3.5% controlled entity of a person described in (a) or (b) above 2.16 "Vee" to a bioric provide detail in Part VI	116		1

Part IV	Supporting	Organizations	(continued

I GIC IV		аррог	9	Oi guilleu	LIOIIS	(continue	ч,
Section	n R	Tyne	T Si	innorting	Orga	nization	_

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		

Section C. Type II Supporting Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or			
	trustees of each of the organization's supported organization(s)?			
	If "No," describe in Part VI how contiol or management of the supporting organization was vested in the same persons			
	that controlled or managed the supported organization(s)	1		

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes." describe in Part VI the role the organization's supported organizations played in this regard	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satis	fy the Integral Part Test during the year (see instructions)

- The organization satisfied the Activities Test Complete line 2 below
- The organization is the parent of each of its supported organizations. Complete line 3 below

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities		
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	
3	Parent of Supported Organizations Answer (a) and (b) below.		

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
;	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	—		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (c	ontinued)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accomp	olish exempt purposes		
2 Amounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	uured)		
6 Other distributions (describe in Part VI) See instru			
·	ic tions		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a .			
b c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			-
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
		Schodulo A	/Form 990 or 990-F7) /2015

DLN: 93493072007107

Employer identification number

53-0196549

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Political expenditures

Volunteer hours

American University

1

2

3

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.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2015
Open to Public Inspection

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

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

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

Section 527 organizations Complete Part I-A only

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

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

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

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

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

Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955	•	\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4 955 ▶	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4 a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exempt	function activities 🕨	\$
2	5	rganızatıon's funds contributed to ot	ner organizations	for section 527	
	exempt function activities			•	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	-POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
5	organization made payments I amount of political contribution separate segregated fund or a	nd employer identification number (E) For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If	e amount paid fror rectly delivered t additional space i	n the filing organization's fi o a separate political orgai s needed, provide informat	unds Also enter the nization, such as a ion in Part IV
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					
6					
For P	aperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990	- EZ. Ca	t No 50084S Schedule C (F	orm 990 or 990-EZ) 2015

Not over \$500,000

Over \$17,000,000

g

2a

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

С	hedule C (Fo	rm 990 or 990-EZ) 2015		Page 2
P	art II-A	Complete if the organization is exempt under section $501(c)(3)$ and under section $501(h)$.	filed Form 5768	(election
١.	Check ►	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures)	group member's nam	ne, address, EIN
3	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 lobb lobbying)	ying expenditures to influence public opinion (grass roots		
b	Total lobb	ying expenditures to influence a legislative body (direct lobbying)		
	T - 4 - 1 1 - 1 - 1			

Total lobbying expenditures (add lines 1a and 1b)

Total exempt purpose expenditures (add lines 1c and 1d)

Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:

Other exempt purpose expenditures

\$1,000,000

The lobbying nontaxable amount is: 20% of the amount on line 1e

\$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

Schedule C (Form 990 or 990-EZ) 2015

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?

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

4-Year Averaging Period Under section 501(h)

Lobbying nontaxable amount

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

Lobbying ceiling amount (150% of line 2a, column(e))

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year

(a)2012 **(b)**2013 (c)2014 (d)2015 (e) Total beginning in)

LOBBYING ACTIVITIES

Sch	edule C (Form 990 or 990-EZ) 2015				Pί	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filled Form 5768 (election under section 501(b))	ТОИ				
	filed Form 5768 (election under section 501(h)).	(a)		(b)	
	each "Yes" response on lines 1a through 11 below, provide in Part IV a detailed description of the lobbying vity	V	No		4 moun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local	Yes		1		
_	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	1		
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		No			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				48
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities?		Νo			
j	Total Add lines 1c through 1i					48
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	rt III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	5 01 (c)(5),	or s		
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		ŀ			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		-	3		
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C				
1 2	Dues, assessments and similar amounts from members	1				
_	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2-				
a	,	2a				
b		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				
	art IV Supplemental Information					
	•	1 12	D = 1.7	T A '		
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou (see instructions), and Part II-B, line 1 Also, complete this part for any additional information	ıp IIst),	Part I	I-A,	ines 1	and
	Return Reference Explanation					

SCHEDULE C, PART II-B, LINE 1G THESE LOBBYING EXPENSES REPRESENT THE PORTION OF NACUBO DUES WHICH WERE ALLOCATED TOWARDS FUNDING LOBBYING ACTIVITIES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493072007107

SCHEDULE D

(Form 990)

Department of the

Internal Revenue Service

Treasury

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

	me of the organization erican University			Employer	identification nui	mber
AIII	,			53-01965		
Pā	Organizations Maintaining Dono Complete If the organization answer			ds or Ac	ccounts.	
		(a) Donor advised funds		(b)Funds	s and other accou	ınts
_	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
ļ	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to			advised	☐ Yes	s No
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				oose Ye s	5 N O
Pa	rt III Conservation Easements. Comp	ete if the organization answere	d "Yes" on	Form 990	o, Part IV, line	7.
	Purpose(s) of conservation easements held by t	he organızatıon (check all that apply	/)			
	Preservation of land for public use (e g , receducation)		ation of an h	ıstorıcally	ımportant land a	rea
	Protection of natural habitat Preservation of			rtified hist	toric structure	
	Preservation of open space					
<u> </u>	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contri	bution in the	form of a	conservation	
			<u> </u>	H	eld at the End of	the Year
а	Total number of conservation easements		_	2a		
b	Total acreage restricted by conservation easem		_	2b		
c	Number of conservation easements on a certifie	, ,	<u> </u>	2c		
d	Number of conservation easements included in a historic structure listed in the National Register			2d		
}	Number of conservation easements modified, tra	ansferred, released, extinguished, or	terminated b	y the orga	anızatıon durıng t	he
	tax year ▶					
Ļ	Number of states where property subject to cons	servation easement is located >				
;	Does the organization have a written policy rega violations, and enforcement of the conservation		ction, handlir	g of	┌ Yes ┌	_ No
,	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, a	and enforcing	conserva	tion easements d	uring the
	-					
•	A mount of expenses incurred in monitoring, insp \$ \\$	ecting, handling of violations, and e	nforcing cons	ervation (easements during	the year
3	Does each conservation easement reported on I (B)(I) and section 170(h)(4)(B)(II)?	ine 2(d) above satisfy the requireme	ents of sectio	n 170(h)(·	_ No
)	In Part XIII, describe how the organization repo balance sheet, and include, if applicable, the tex the organization's accounting for conservation e	t of the footnote to the organization's		•	atement, and	
a	rt III Organizations Maintaining Colle Complete if the organization answer			Other S	Similar Assets	5.
.a	If the organization elected, as permitted under S works of art, historical treasures, or other simila	FAS 116 (ASC 958), not to report i	n its revenue			

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

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, in Part XIII, the text of the footnote to its financial statements that describes these items

a Revenue included on Form 990, Part VIII, line 1

▶\$

service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Par	t III	Organizations Maintaining (continued)	g Collections of <i>I</i>	Art, Hi	storic	al 1	Treasures, o	r Ot	ther Similar A	ssets	
3		the organization's acquisition, action items (check all that apply)	cession, and other re	cords, c	heck a	n y of	the following tl	nat ar	re a significant us	se of its	
а	✓	Public exhibition		d		Loa	n or exchange	progr	ams		
b	√	Scholarly research		e		Oth	ner				
c	✓	Preservation for future generations	;								
4		de a description of the organization		plain ho	ow they	furth	ner the organiza	ition's	s exempt purpose	e in	
5		g the year, did the organization so s to be sold to raise funds rather t								s 🗸	No
Pa	rt IV	Escrow and Custodial Arr Complete if the organization Part X, line 21.		n Form	990, 1	Part	IV, line 9, or	repo	orted an amou	nt on Fo	orm 990,
1a		e organization an agent, trustee, cu ded on Form 990, Part X?	ıstodıan or other ınte	rmediar	y for co	ntrib	outions or other	asse	ets not	es 🗆	No
b	If"	Yes," explain the arrangement in I	Part XIII and comple	te the fo	ollowing	tabl	le		An	nount	
c	Ве	ginning balance						1 c			
d	A d	ditions during the year						1d			
е	Dis	tributions during the year						1e			
f	End	ding balance						1f			
2 a	Did th	ne organization include an amount	on Form 990, Part X,	line 21	, for es	crow	or custodial ac	coun	t liability? Ye	es 🗀	No
b Pa	If"Ye	s," explain the arrangement in Pai									
			(a)Current year		or year		(c)Two years ba		d) Three years back		years back
1 a	Begin	ining of year balance	650,179,000	ϵ	06,544,0	00	535,390,0	00	466,234,000		455,002,000
b	Contr	ibutions	17,298,000		18,282,0	00	14,509,0	00	18,708,000		22,333,000
c	Net ir losse	· · · · · · · · · · · · · · · · · · ·	-91,654,000		41,640,0	00	71,343,0	00	63,626,000		1,777,000
d	Grant •	s or scholarships	6,145,820		5,016,9	65	4,427,8	44	5,884,457		4,262,417
e		r expenditures for facilities rograms 	9,540,598		9,538,3	02	8,639,6	78	5,697,833		7,002,343
f	A dmı	nistrative expenses	1,603,582		1,731,7	33	1,630,4	78	1,595,710		1,613,240
g	End o	f year balance	558,533,000	6	550,179,0	00	606,544,0	00	535,390,000		466,234,000
2	Provi	de the estimated percentage of the	e current year end bal	lance (lı	ine 1g,	colur	mn (a)) held as				
а	Board	l designated or quasi-endowment i	68 000 %								
b	Perm	anent endowment ▶ 18 000 %									
c		orarily restricted endowment ► ercentages on lines 2a, 2b, and 20	14 000 % should equal 100%								
За		nere endowment funds not in the po	ossession of the orga	nızatıor	that a	e he	ld and administ	ered	for the		
	_	ization by							_	Ye	
		related organizations				•				a(i) a(ii)	No No
ь		elated organizations							<u> </u>	3b	110
4		ribe in Part XIII the intended uses						•			
Pa	rt VI	Land, Buildings, and Equi									
		Complete if the organization	answered 'Yes' to	Form 9				ee Fo			
		Description of property		C	(a) ost or oth investn)	er ba	sis Cost or other (other)	basıs	Accumulated (c) depreciation	(d)B	ook value
1 a	Land				(.0110)	 	10,625			35,910,625
	Buildin							32,542		0	542,944,452
c	Leaseh	old improvements		.							
	Equipm Other	nent		· [254,45	54,476	190,264,18	4	64,190,292
_				- 1			86.4	12.732	9.487.98	8	76.924.744

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . .

719,970,113

(1)Financial	See Form 990, Part X, line 12. (a) Description of security or category.			
	(including name of security)	gory	(b) Book value	(c)Method of valuation Cost or end-of-year market valu
() It locally "	derivatives			
(3)0 ther	neld equity interests			
	n (b) must equal Form 990, Part X, col (B) line 12			
Part VIII	Investments—Program Related Complete if the organization answer	l. ered 'Yes' on Form 99	0, Part IV, line 11c.s	ee Form 990 Part X line 13
	(a) Description of investment		(b) Book value	(c) Method of valuation
				Cost or end-of-year market value
	Other Assets. Complete if the organiz		Form 990, Part IV, line	 11d See Form 990, Part X, line 15
		escription		(b) Book value
				(-,
	nn (b) must equal Form 990, Part X, col (B) l			
Part X	on (b) must equal Form 990, Part X, col (B) I Other Liabilities. Complete if the See Form 990, Part X, line 25.			
Part X	Other Liabilities. Complete if the		d 'Yes' on Form 990,	
Part X	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability	organization answere	d 'Yes' on Form 990,	
Part X 1. Federal incor	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability	organization answere	d 'Yes' on Form 990,	
Part X 1. Federal Incor	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS	(b) Book valu	d 'Yes' on Form 990, e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS	(b) Book valu	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	
Part X 1. Federal Incor DERIVITIVE REFUNDABL	Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability me taxes EINSTRUMENTS LE ADVANCE FROM US GOVT	(b) Book values 85,643	e 0 ,963	

1

2

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1

b	Donated services and use of fa	cılıtıes 2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d		2e	
3	Subtract line $\mathbf{2e}$ from line 1 .		3	
4	Amounts included on Form 990), Part VIII, line 12, but not on line 1		
а	Investment expenses not inclu	ided 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		penses per Audited Financial Statements With Expenses zation answered 'Yes' on Form 990, Part IV, line 12a.	s per	Return.
1	Total expenses and losses per	audited financial statements	1	
2	A mounts included on line 1 but	not on Form 990, Part IX, line 25		
а	Donated services and use of fa	cılıtıes 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:		
а	Investment expenses not inclu	ded 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 an	d 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental Info	ormation	•	
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2l lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Return Reference	Explanation		
	RIPTION OF NIZATION'S COLLECTIONS	SCHEDULE D, PART III, LINE 4 THE TWO MAJOR COMPONENTS OF COLLECTION ARE THE WATKINS COLLECTION BEGUN IN 1945, AN COLLECTION BEGUN IN 2005 THE COLLECTIONS SERVE AS A TEATHE ART DEPARTMENT AT AMERICAN UNIVERSITY, AS WELL AS TIMEDERN ART AND ITS OFFSHOOTS IN WASHINGTON DC, WITH SIIN WHAT WAS HAPPENING IN THE LARGER CONTEMPORARY WORLD OVER 30,000 SQUARE FEET OF EXHIBITION SPACE FOR THESE TWO PUBLIC IS WELCOME TO VISIT THE MUSEUM AND EXHIBITIONS FOR THE KATZEN ARTS CENTER IS NOW A DESTINATION FOR CERTAIN WASHINGTON DC	ND THI ACHIN ELLIN DE ST THE M VO CO REE O	E KATZEN IG RESOURCE FOR G THE STORY OF ORIES RELATED TO USEUM FEATURES LLECTIONS THE F CHARGE INDEED,

2a

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Schedule D (Form 990) 2015				
Part XIII Supplemental Information (continued)				
Return Reference	Explanation			
FIN 48 (ASC 740) FOOTNOTE	Schedule D, Part X, Line 2 The University has been recognized by the Internal Revenue Service as exempt from federal income tax under Section 501(c)(3) of the U S Internal Revenue Code, except for taxes on income from activities unrelated to its exempt purpose Such activities resulted in no net taxable income in fiscal years 2016 and 2015			
	- 			
·				
l 				
l 				

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the

Treasury Internal Revenue

Service

As Filed Data -

DLN: 93493072007107

OMB No 1545-0047

Open to Public Inspection

Schools

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** American University 53-0196549 Part I YES NO 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? Yes 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? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Yes 4c \mathbf{d} Copies of all material used by the organization or on its behalf to solicit contributions? Yes 4d If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo b Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5**c Νo d Scholarships or other financial assistance? 54 Νo e Educational policies? Νo 5e f Use of facilities? Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo 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? Yes 6a h Has the organization's right to such aid ever been revoked or suspended? 6b Νo 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

Part II Supplemental Information.

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

Return Reference	Explanation
PUBLICATION OF RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E, PART I, LINE 3 UNIVERSITY'S NONDISCRIMINATORY POLICY TOWARDS RACE, CREED, COLOR, NATIONAL ORIGIN, AGE, HANDICAP, OR SEX IS NOTED IN ALL ADMISSION PUBLICATIONS, APPLICATION FORMS, TRANSFER GUIDES, MEDIA SOLICITATIONS FOR STUDENTS AND ALL OFFICIAL UNIVERSITY PUBLICATIONS AMERICAN UNIVERSITY IS AN EQUAL OPPORTUNITY, AFFIRMATIVE ACTION INSTITUTION THAT OPERATES IN COMPLIANCE WITH APPLICABLE LAWS AND REGULATIONS MORE IMPORTANTLY, SUCH COMPLIANCE STEMS FROM THE HISTORY AND TRADITION OF THE UNIVERSITY THAT EMBRACES AND EXPRESSES THE DEEPEST VALUES OF THE HUMAN COMMUNITY-EQUALITY, OPENNESS, AND THE DIGNITY OF EVERY INDIVIDUAL THE FACT THAT THE UNIVERSITY DOES NOT DISCRIMINATE ON THE BASIS OF COLOR, RELIGION, NATIONAL ORIGIN, GENDER, SEXUAL ORIENTATION, GENDER IDENTITY AND EXPRESSION, AGE, OR DISABILITY IS, IN FACT, CONSISTENT WITH AND A REFLECTION OF ITS SPECIAL TRADITION OF SOCIAL JUSTICE EXTENDING THAT TRADITION INTO THE PRESENT, EQUAL OPPORTUNITY, AFFIRMATIVE ACTION, AND NONDISCRIMINATION APPLY TO EVERY ASPECT OF THE UNIVERSITY'S OPERATIONS AND ACTIVITIES, INCLUDING ADMISSION, EMPLOYMENT, AND ACCESS TO UNIVERSITY PROGRAMS AND SERVICES
GOVERNMENT ASSISTANCE	SCHEDULE E, PART I, LINE 6A THE UNIVERSITY RECEIVES US DEPARTMENT OF EDUCATION STUDENT AID FUNDS- USE OF SUCH FUNDS IS AUDITED BY INDEPENDENT AUDITORS IN ACCORDANCE WITH THE REGULATIONS AND PROCEDURES ISSUED BY THE FEDERAL GOVERNMENT

efile GRAPHIC print - DO N	NOT PROCESS	As Filed Da	ta -	DLN:	93493072007107
SCHEDULE F (Form 990)	tatement of	Activities (Outside the Unit	ed States	OMB No 1545-0047
Denzitment of the Treasury	·	Part IV, line ► Attach i	on answered "Yes" to Form 14b, 15, or 16. to Form 990. and its instructions is at <i>w</i>		2015 Open to Public Inspection
Name of the organization American University				Employer ider 53-0196549	ntification number
			he United States. orm 990, Part IV, line	L	
 1 For grantmakers. Does to and other assistance, the used to award the grants 2 For grantmakers. Described 	grantees' eligibil or assistance?	lity for the gra	nts or assistance, and	the selection criteria	✓ Yes No
assistance outside the Ur Activites per Region (The fo	nited States				
(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 program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region
(1) See Add'l Data			. og.e,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total b Total from continuation shee to Part I					132,027,204
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice,		for Form 990.	•	No 50082W Sche	132,027,204 dule F (Form 990) 2015

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

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)			1					

tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

13

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	ther Assistance duplicated if addit			ed States. Complete	if the organization a	nswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(42)				

(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
			Schedu	lle F (Form 990) 2015

(9)				
(10)				
(11)				
(12)				
(13)				
(14)				
(15)				
(16)				,
(17)				
(18)				
			Schedu	ıle F (Form 990) 2015

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

Nο 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 Yes 5713, do not file with Form 990) Νo

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).

990 Schedule F. Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2	ANNUALLY, MORE THAN 850 STUDENTS PARTICIPATE IN THE ABROAD PROGRAM UNDERGRADUATES SELECTE D FROM MORE THAN 100 PROGRAMS WHICH SPAN DIVERSE CULTURES AND LANGUAGES ON ALL CONTINENTS THE UNIVERSITY IS THE RECIPIENT OF SEVERAL CONTRACTS TO CONDUCT RESEARCH FOR THE US DEPAR TMENT OF STATE AND OTHER AGENCIES AS WELL AS TO PROVIDE EDUCATIONAL MANAGEMENT SUPPORT TO FOREIGN INSTITUTIONS OF HIGHER EDUCATION AU WORKS TO MONITOR GRANTS AND SCHOLARSHIPS EXPE NDED USING ITS PROCESSES AND CONTROLS INHERENT IN AU'S SYSTEM BEFORE SELECTING THE RECIPIENT AND PERIODICALLY AS REQUIRED DURING THE GRANT OR SCHOLARSHIP TERM, AU IMPOSES ITS INSTITUTIONAL CRITERIA AND THE DONOR'S (WHEN APPLICABLE) TO MAKE SURE THAT THE FUNDS ARE USED FOR THE INTENDED PURPOSES THIS MONITORING IS DONE THROUGH A COLLABORATION OF VARIOUS DEPAREMENTS OF THE UNIVERSITY PERIODIC SPENDING REPORTS ARE PULLED TO PROVIDE ADDITIONAL OVER SIGHT OF SCHOLARSHIPS AS NECESSARY TO REPORT BACK TO DONORS ON THE STATUS OF THEIR GIFTS

Additional Data

Europe (Including Iceland

and Greenland)

Software ID: Software Version:

EIN: 53-0196549

Name: American University

Study Abroad

101,106

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	Study Abroad	168,194
East Asia and the Pacific			Grantmakıng	Study Abroad	140,647

Grantmaking

(a) Region (b) Number of (c) Number of (d) Activities (e) If activity listed in (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region agents in type) (i.e., fundraising, service, describe region specific type of service region program services, grants to recipients (s) in region located in the region) South Asia Grantmaking Study Abroad 115,930 Sub-Saharan Africa Grantmakınd Study Abroad 11,737

Grantmakınd

Study Abroad

7,500

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

North America

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe agents in region specific type of service region program services, grants to recipients (s) in region located in the region) Middle East and North Grantmakıng Study Abroad 158,098 A frica Central America and the Investments 120.121.828 Caribbean

Study Abroad

103,580

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

Central America and the

Caribbean

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe region agents in specific type of service region program services. grants to recipients (s) in region located in the region) East Asia and the Pacific Program Services Study Abroad 904,020 Europe (Including Iceland Study Abroad 8.190.201 IProgram Services and Greenland)

Study Abroad

704,743

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

Middle East and North

A frica

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) A ctivities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, service, describe agents in region specific type of service region program services, grants to recipients (s) in region located in the region) North America Program Services Study Abroad 17,549 Russia and the Newly Program Services Study Abroad 47,200

Study Abroad

627,394

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

Independent States
South America

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services. grants to recipients (s) in region located in the region) South Asia Study Abroad 204,230 Program Services

Study Abroad

403.247

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

Sub-Saharan Africa

(b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) South America Sub-Award 15.880 CHECK South America Sub-Award 26.963 CHECK

12.902 CHECK

32,759 CHECK

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

East Asia and the

Fast Asia and the

Pacific

Pacific

Sub-A ward

Sub-A ward

(a) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant cash non-cash and EIN(ıf cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) East Asia and the Sub-A ward 35.200 CHECK Pacific 49,712 CHECK Europe (Including Sub-A ward

125,351 CHECK

(i) Method of

	Iceland and						
	Greenland)						
	1 ' '	Sub-A ward	51,394	CHECK			
l	Ireland and	1			I	l	

Greenland)

(b) IRS code

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

South America

Sub-A ward

(b) IRS code (i) Method of (g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of section valuation (c) Region (d) Purpose of grant cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) South Asia Sub-Award 115.930 CHECK

	Sub-Saharan Africa	Sub-A ward	11,737	CHECK		
						1

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

North Africa

	Sub Sunarun Ameu	Sub A Mara	11,737	CHECK		
	North America	Sub-A ward	7,500	СНЕСК		

	North America	Sub-A ward	7,500	СНЕСК		

	North America	Sub-A ward	7,500	CHECK		

	Middle East and	Sub-A ward	158.098	CHECK		

Form 990 Schedule F Part II - Grants or Entities Outside The United States (b) IRS code (i) Method of (a) A mount of non-(h) Description of (a) Name of (f) Manner of (e) A mount of valuation section (d) Purpose of grant (c) Region cash non-cash other)

organization	and EIN(if applicable)	(=, 3	(4,7 11,7 11,7 11,7 11,7 11,7 11,7 11,7 1	cash grant	cash disbursement	assistance	assistance	(book, FM' appraisal, ot
		East Asia and the	Sub-Award	59.787	СНЕСК			

Pacific

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493072007107 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number American University 53-0196549 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 18 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

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

(a)Type of grant or assista	nce	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Student Scholarships		10061	119,606,037			
Part IV Supplemental 1	Informat	ion. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanation	on				
PROCEDURE FOR MONITORING USE OF GRANT	1					VERSITIES AS NECESSARY TO ITH THESE SUB-AWARDEES, AU

FUNDS IN THE U S	

THEUS

PERFORMS A RISK ASSESSMENT INCLUDING A REVIEW OF THE MOST RECENT FINANCIAL STATEMENTS AS WELL AS ENSURING THEY ARE NOT LISTED AS A DEBARRED ENTITY WITH ANY FEDERAL AGENCY. AU WORKS TO MONITOR GRANTS AND SCHOLARSHIPS EXPENDED $oxed{\mathsf{USING}}$ ITS PROCESSES AND CONTROLS INHERENT IN AU'S SYSTEM $oxed{\mathsf{BEFORE}}$ BEFORE SELECTING THE RECIPIENT AND PERIODICALLY AS REQUIRED DURING THE GRANT OR SCHOLARSHIP TERM, AU IMPOSES ITS INSTITUTIONAL CRITERIA AND THE DONOR'S (WHEN APPLICABLE) TO MAKE SURE THAT THE FUNDS ARE USED FOR THE INTENDED PURPOSES THIS MONITORING IS DONE THROUGH A COLLABORATION OF VARIOUS DEPARTMENTS OF THE UNIVERSITY PERIODIC SPENDING REPORTS ARE PULLED TO PROVIDE ADDITIONAL OVERSIGHT OF SCHOLARSHIPS AS NECESSARY TO REPORT BACK TO DONORS ON THE STATUS OF THEIR GIFTS GRANTS TO INDIVIDUALS IN Schedule I, Part III, Line 1 All students receiving scholarships and fellowships are judged worthy by the university's assessment on the basis of academic achievement, financial need and similar standards. Approximately 75% of full time freshmen applied for need based financial aid

Additional Data

Washington, DC 20009

Software ID: Software Version:

EIN: 53-0196549

Name: American University

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of

organization or government		if applicable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
AEA CONSULTING 544 Main Street Beacon,NY 12508	13-4050460		94,950				Sub-A ward
ARIZONA STATE UNIVERSITY 325 E Apache Blvd Tempe,AZ 85281	86-0196696	115	115,476				Sub-A ward
BELDEN RUSSONELLO STRATEGISTS 1666 CT AVE NW Ste 420	52-2079023		40,000				Sub-A ward

(h) Purpose of grant

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) CARNEGIE INSTITUTION 53-0196523 501(C)(3) 251.530 Sub-Award OF WASHINGTON

1530 PST NW Washington,DC 20005					
CATHOLIC UNIVERSITY OF AMERICA 620 MI AVE NE	53-0196583	501(C)(3)	17,101		Sub-A war

1220 RSt NW Ste 300 Washington, DC 20005

vard Washington, DC 20003 CENTER FOR DIGITAL 52-2311577 501(C)(3) 43,602 Sub-A ward DEMOCRACY

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 52-1654453 501(C)(3) 8,000 Sub-Award CHILDRENS RESEARCH INSTITUTE 111 Michigan Avenue ward

Washington, DC 20010					
DUKE UNIVERSITY PO Box 90847 Durham,NC 27708	56-0532129	501(C)(3)	6,375		Sub-A ward
EARTHRIGHTS	04-3265555	501(C)(3)	62,834		Sub-Award

EAKIRKIGHIS INTERNATIONALING

1612 K St NW Ste 401 Washington, DC 20006

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) GALLAUDET UNIVERSITY 501(C)(3) 61,239 Sub-Award 53-0199507 800 FL Ave NE

Washington, DC 20052				
GENEVA FOUNDATION 917 Pacific Ave Poughkeepsie,NY 12604	42-0942424	84,963		Sub-Aw
	l			

2121 I StNW

Washington, DC 20052

ward

917 Pacific Ave Poughkeepsie,NY 12604			,		
GEORGE WASHINGTON UNIVERSITY	53-0196584	501(C)(3)	22,594		Sub-A ward

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 13-3782233 76,784 IEARN INC 501(C)(3) Sub-A ward 475 Riverside Drive ward

Sub-A ward

19,081

New York, NY 10115					
INSPIRE PROJECT INC	95-4418628	501(C)(3)	9,264		Sub-Aw
107 S West St					
Alexandria, VA 22314					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

KEY WEB CONCEPTS INC

9401 C Rd Ste 300 Chesterfield, VA 23832 20-4613046

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) LOYOLA MARYMOUNT 95-1643334 501(C)(3) 23,475 Sub-Award UNIVERSITY 1 LMU Drive Daminian Tawar 10th Floor

Los Angeles, CA 90045				
National Assoc of Criminal Defense Lawyers 1660 L St NW 12th Fl Washington, DC 20036	74-1916260	6,676		Sub-A ward

32,500

Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

NATIONAL SPACE GRANT

FOUNDATION 101 C AvE NW Ste 650 Washington, DC 20001 52-2288711

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance NUEVA VIDA INC 54-1943145 501(C)(3) 36,542 Sub-A ward 206 N W St300 Alexandria, VA 22314 ward

SMITHSONIAN INSTITUTION 750 9th Ste 3800 Washington,DC 200014505	53-0206027	501(C)(3)	7,336		Sub-A ward
SYRACUSE RESEARCH	15-0589832	501(C)(3)	71,867		Sub-A ward

CORPORATION (SRC) 7502 R

North Syracuse, NY 132122510

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance orassistance or government assistance other) UNIVERSITY OF MIAMI 59-0624458 501(C)(3) 458,050 Sub-A ward 1400 NW 10th Av Dom Miami, FL 33136 vard

UNIVERSITY OF TEXAS AT DALLAS 2601 N Floyd Rd Richardson,TX 750830688	75-1305566	115	47,018		Sub-A ward
UNIVERSITY OF THE	53-6001131		10,000		Sub-A ward

DISTRICT OF COLUMBIA 4200 CT Ave NW Washington, DC 20008

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 501(C)(3) 6,078 VASSAR COLLEGE 14-1338587 Sub-A ward 124 RavmD Ave 111/ 42604 ward

Sub-A ward

19,680

Poughkeepsie, NY 12604					
YALE UNIVERSITY	06-0646973	501(C)(3)	66,512		Sub-A wa
47 CoL St Ste 203					
New Haven CT 065208047	l	1		1	l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

98-0032933

UNIVERSITY OF GUAM

UOG Station Mangilao, GU 96923 Schedule J (Form 990)

Department of the

Internal Revenue Service Name of the eventuation

Treasury

Compensation Information

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

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

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493072007107 OMB No 1545-0047

2015

Open to Public Inspection Fundamental destination unabed

	nerican University			Employer identification	on nu	IIDEI	
AIII	Terical Offiversity			53-0196549			
Pa	art I Questions Regarding Compensatio	n					
						Yes	No
1a	Check the appropiate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II:						
	First-class or charter travel	▽	Housing allowance or residence fo	r personal use			
	▼ Travel for companions	Г	Payments for business use of pers	onal residence			
	Tax idemnification and gross-up payments	✓	Health or social club dues or initia	tion fees			
	Discretionary spending account	Г	Personal services (e g , maid, cha	uffeur, chef)	İ	 	
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d				1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe		· .	•	2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	hat apply	Do not check any boxes for metho	ods			
	▼ Compensation committee	▽	Written employment contract				
	Independent compensation consultant	√	Compensation survey or study				
	▼ Form 990 of other organizations	▽	Approval by the board or compens	ation committee			
4	During the year, did any person listed on Form 990, or a related organization	, Part VII	, Section A , line 1a with respect to	the filing organization			
а	Receive a severance payment or change-of-control	payment	.7		4a		Νo
b	Participate in, or receive payment from, a suppleme	ental nonq	qualified retirement plan?		4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased con	npensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pi	rovide the	e applicable amounts for each item	ın Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	tions mu	st complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	, did the organization pay or accrue	any			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III						
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue	any			
а	The organization?				6a		No

payments not described in lines 5 and 6? If "Yes," describe in Part III

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was

Any related organization?

section 53 4958-6(c)?

ın Part III

If "Yes," on line 6a or 6b, describe in Part III

6b

7

8

Yes

Νo

Νo

Selledales (Form 550) 2015					r age 🕳						
Part III Officers, Directors,	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.										
ınstructions, on row (II) Do not list ar	or each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII lote										
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in						

Page 2

Schedule J (Form 990) 2015

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	B	(ii)	(ıiı)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base (1) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prior
	(1) compensation	compensation	compensation				Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

Page 3

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

HOUSING ALLOWANCES OR SCHEDULE J. PART I. LINE 1A THE PRESIDENT RESIDES IN UNIVERSITY OWNED ON-CAMPUS HOUSING AS A CONDITION OF HIS RESIDENCE FOR PERSONAL USE IEMPLOYMENT AND FOR THE CONVENIENCE OF THE UNIVERSITY. THE RESIDENCE IS USED FOR UNIVERSITY-RELATED BUSINESS AND IENTERTAINMENT PURPOSES ON A CONTINUAL BASIS. SPOUSAL TRAVEL THE UNIVERSITY REIMBURSES REASONABLE AND NECESSARY IBUSINESS TRAVEL EXPENSES FOR THE SPOUSE OF THE PRESIDENT WHEN ACCOMPANYING THE PRESIDENT ON OFFICIAL UNIVERSITY BUSINESS SPOUSAL TRAVEL IS REVIEWED AND APPROVED BY THE CHAIRMAN OF THE BOARD OF TRUSTEES ON A QUARTERLY BASIS IHEALTH CLUB AMERICAN UNIVERSITY PROVIDES MEMBERSHIPS TO VARIOUS BUSINESS CLUBS IN WASHINGTON DC FOR THE PRESIDENT IAND OTHER OFFICERS. THE USE OF THE CLUBS IS LIMITED TO AMERICAN UNIVERSITY BUSINESS PURPOSES AND THE EXPENSES ARE

REVIEWED ACCORDING TO EXPENSE REIMBURSEMENT POLICIES OF THE UNIVERSITY Schedule J, Part I, Line 7 Officers of the University participate in a board of trustees approved executive compensation program which includes an NON-FIXED PAYMENTS

Incentive compensation plan. The annual amount is capped at a percentage of their salary. The plan is based on the achievement of certain programmatic goals and objectives for the officers' units and the university. The goals are non-revenue related goals. The plan is approved by the compensation

committee and the committee reviews and approves the annual awards based on the performance achieved on the agreed-upon goals

Software ID: Software Version:

EIN: 53-0196549

Name: American University

Comparable Com	Form 990, Schedule J, Par		I - Officers, Direc	tors, Trustees, Ke	ey Employees, and	d Highest Compen	sated Employees	3	
Social Comment Comment	(A) Name and Title		(i) Base	(ii) Bonus & Incentive	(iii) O ther reportable	other deferred			(F) Compensation in column (B) reported as deferred on prior Form 990
South AlexaFrence 0	1Comelius M KerwinPresident	(1)	681,369	300,250	49,192	26,500	19,799	1,077,110	0
According to the property control 10 10 10 10 10 10 10 1		(11)	0	0	0	0	- 0	- 0	0
Set Sharetery Coursel (a) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1Scott A BassProvost			169,320	20,633	26,500 	25,185	672,269	0
Set Sharetery Coursel (a) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2Mary E Kennard	(1)	391.898	114.510	12.720	26,000	0	0	
CFO/PF Entance/Treasurer				114,510	12,728	26,000	10,626	555,/62	0
ASSIS Short Hamsen				136,045	13,485	28,707	17,765	590,262	0
Ver Campus Life (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				0	0	0	0	0	0
STEVENS Flamery NP of Communication				83,955	4,960	26,000	2,645	432,028	0
10 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	0	_ 0	0
Claudio Gressman Claudio Gre		(1)	256,296	0	351	25,875	23,584	306,106	0
Claudio Grossman (i) 507,568 0 22,973 26,500 10,558 567,599		(11)	0	0	0	0	_ 0	- 0	0
Claudio Grassman (i) 507,568 0 22,973 26,500 10,558 567,599	6 David G SwartzVP & CIO	(1)	325,888	0	20,193	26,300	16,322	388,703	0
Dean & Professor (II) 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	-0	- 0	0
SRichard D Bretman Assistant Professor	7 Claudio Grossman Dean & Professor	(1)	507,568	0	22,973	26,500	10,558	567,599	0
Assistant Professor (II) O O O O O O O O O O O O O		(11)	0	0	0	0	_ 0		0
PROBERT D Dinerstein Professor (I) 325,059 0 5,919 26,256 18,944 376,178 (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(1)	352,475	0	150	12,260	356	365,241	0
Professor (II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	-	- 0	0
10) effrey H HamsProfessor (1) 351,911 0 626 26,133 5,803 384,473 (11) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(1)	325,059	0	5,919	26,256	18,944	376,178	0
(II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	-	-	0
11Nicholas N KittrieProfessor (i) 139,174 0 267,748 14,270 9,733 430,925 (ii) 0 0 0 0 0 0 0 12Richard J WilsonProfessor (i) 169,272 0 284,074 15,140 6,651 475,137 (ii) 0 0 0 0 0 0 0 13Thomas J Minar VP Development & Alumni Rel (ii) 134,488 101,470 5,552 8,318 2,740 252,568 (iii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	10 Jeffrey H HarrisProfessor	(1)	351,911	0	626	26,133	5,803	384,473	0
(II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0	-		0
12Richard J WilsonProfessor (i) 169,272 0 284,074 15,140 6,651 475,137 (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	11Nicholas N KittrieProfessor	(1)	139,174	0	267,748	14,270	9,733	430,925	0
(II) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(11)	0	0	0	0			0
13Thomas J Minar VP Development & Alumni Rel (1) 134,488 101,470 5,552 8,318 2,740 252,568	12Rıchard J WilsonProfessor	(1)	169,272	0	284,074	15,140	6,651	475,137	0
VP Development & Alumni Rel (1)		(11)	0	0	0	0	-		0
Rel (v)		(1)	134,488	101,470	5,552	8,318	2,740	252,568	0
		(11)	0	0	0	0	- 0	0	0

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Schedule K

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.

2015

DLN: 93493072007107OMB No 1545-0047

Open to Public
Inspection

Employer identification number

Department of the Treasury

(Form 990)

Internal Revenue Service

► Attach to Form 990.

► Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization American University Thiornation about Schedule K (Form 550) and its instructions is at www.irs.yov/form550.

53-0196549 Part I **Bond Issues** (c) CUSIP # (d) Date issued (a) Issuer name (b) Issuer EIN (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No District of Columbia 53-6001131 2548394P5 10-15-2008 60,900,000 SEE Part VI Х Х Х District of Columbia 53-6001131 25484JAH3 08-16-2006 99,975,000 SEE Part VI Х Χ Х District of Columbia 37,000,000 See Part VI Х Х 53-6001131 25484JAG5 04-03-2003 Part II Proceeds C 60,900,000 61,447,009 0 2 0 Total proceeds of issue 3 40,969,227 37,378,342 0 0 5 0 0 6 7 530,463 573,460 8 1,452,653 692,665 9 10 0 33,518,479 38,986,111 11 0 12 13 2010 2005 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Х Х Х 14 Were the bonds issued as part of an advance refunding issue? Χ Χ Χ 15 16 Χ Χ Χ Does the organization maintain adequate books and records to support the final 17 Χ allocation of proceeds? Χ Х <u>.</u> Part IIII Private Business Use Α В C D Yes No Yes No Yes No Yes No

Was the organization a partner in a partnership, or a member of an LLC, which owned

Χ

Χ

Х

Х

			A		В		С			D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use				×		X		
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or									
prope	counsel to review any management or service contracts relating to the fina erty?	inced								
С	Are there any research agreements that may result in private business use financed property?	e of bond-				Х		Х		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert									
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government			0 %		0 %		0 200 %	0	
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government	ersection				0 800 %				
6	Total of lines 4 and 5					0 800 %		0 200 %	ò	
7	Does the bond issue meet the private security or payment test?					Х		Х		
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bon issued?					х		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections				X		X		
9	Has the organization established written procedures to ensure that all noncobonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?	•			X		X			
Par	IV Arbitrage									
		А			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	х			×			Х		
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?									
b	Exception to rebate?									
c	No rebate due?			Х		X				
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?	Х		Х		Х				
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×		Х			х		
b	Name of provider	0		0		0				
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									
		•		•						

Schedule K (Form 990) 2015

Were gross proceeds invested in a guaranteed investment

5a	contract (GIC)?		Х		Х		Х	
b	Name of provider	0		0		0		
С	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			×		х	

Page 3

No

D

Yes

7 Has the organization established written procedures to monitor the requirements of section 148?	×		×		×			
Part V Procedures To Undertake Corrective Action								
	A		В		С		D	
	Yes	No	Yes	No	Yes	No	Yes	No
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? Part VI

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference Explanation

Computation performed for the period ending 11-1-2010 Interest earned and included in total proceeds for

Schedule K, Bond Issue B Bond Issue B = \$2,441,236

Explanation Return Reference Computation performed for the period endina 3-31-Schedule K 2013 Interest Bond Issue earned and included in C total proceeds for Bond Issue C = \$378,342

Additional Information for Schedule K Tax-Exempt Bonds Schedule K, Part I, Section (f), Description of Purpose District of Columbia, EIN 53-6001131, CUSIP #2548394P5, Issue Date 10/16/08, Issue Price	Return Reference	Explanation
Description of Purpose The bonds were issued to refund on a current basis the Series 1985 bonds, originally issued on 10/2/85 and the 1985 Series A bonds, originally issued on 02/13/86 District of Columbia, EIN 53-6001131, CUSIP #25484JAH3 and #25484JAJ9, Issue Date 08/16/06, Issue Price \$99,975,000, Description of Purpose (a) capital improvements located on the University's main campus, consisting primarily of the construction, furnishing and equipping of the School of Internationa Service building and the renovation, furnishing and equipping of Nebraska Hall residence hall, including related infrastructure, landscaping, parking and other real property improvements, (b) to refund on a current basis the Series 1996 Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement fo the Bonds, and (d) to pay certain costs of issuance of the Bonds District of Columbia, EIN 53-6001131, CUSIP #25484JAG5, Issue Date 04/04/03, Issue Price \$37,000,000, Description of Purpose (a) Project to be located on the University's main campus at 4400 Massachusettes Avenue, N W, consisting primarily of the construction, renovation, furnishing and equipping of a new comprehensive arts facility named the Katzen Arts Center and (b) capital improvements to an existing facility located at 4200 Wisconsin Avenue, N W, including the renovation, furnishing and equipping of the facility, to accommodate a new	Part I,	for Schedule K. Tax-Exempt Bonds Schedule K, Part I, Section (f), Description of Purpose District of Columbia, EIN 53- 6001131, CUSIP #2548394P5, Issue Date 10/16/08, Issue Price \$60,900,000, Description of Purpose The bonds were issued to refund on a current basis the Series 1985 bonds, originally issued on 10/2/85 and the 1985 Series A bonds, originally issued on 02/13/86 District of Columbia, EIN 53- 6001131, CUSIP #25484JAH3 and #25484JAH3 and #25484JAH3, Issue Date 08/16/06, Issue Price \$99,975,000, Description of Purpose (a) capital improvements located on the University's main campus, consisting primarily of the construction, furnishing and equipping of the School of International Service building and the renovation, furnishing and equipping of Nebraska Hall residence hall, including related infrastructure, landscaping, parking and other real property improvements, (b) to refund on a current basis the Series 1996 Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (v) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (v) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (v) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (v) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Bonds, originally issued on 10/16/96, (c) to pay the cost of credit enhancement for the Control of the Control of the Control of the Control of

Return Reference	Explanation
Schedule K, Part II, Col A, Line 1	Proceeds of the current refunding issue were \$60,900,000 However, the form definition of proceeds excludes those proceeds to retire bonds, and therefore, this line item is zero

ı

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule L

(Form 990 or 990-EZ)

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.

DLN: 93493072007107 OMB No 1545-0047

2015

Department of the Freasury Internal Revenue Se	NP.UCO	▶Information a	▶ Atta	ach to Form 9		90-EZ.	uctions	is at		Ope	en to P	ublic
Name of the or	ganızatıon						En	nploye	r identi	fication	n numbe	r
American Universit	ty						5:	8-019	6549			
		t Transaction					(29)	organı	zations			
		ganization answe										
1 (a) Nam	ne of disqualif	red person	(b) Rela	•	ween disquali ganization	fied person an	a (•	cription saction	of	(d) Cor Yes	rected?
					gamzacion			cram			res	NO
							+					
2 Enter the a 4958 .	amount of tax	incurred by orga		_		sons during the			section \$			
3 Enter the a	amount of tax	, if any, on line 2	, above, rein	nbursed by th	ne organizatio	on			> \$			
Со	mplete if the	Purpose of	wered "Yes"	on Form 990 0, Part X, line o e		(f)Balance due		In	(h Appro by boa) oved rd or	(i)Wi	
			То	From			Yes	No	Yes	No	Yes	No
										-		
										-		
										<u> </u>		
										-		
										+		
Total		▶ \$				l		l		1		
Part IIII Gra		sistance Bene e organization				rt IV, line 27						
(a) Name of I		(b) Relationshi interested pers organiza	on and the	(c) A mount	of assistance	e (d) Type	of assı	stance	e (e)	Purpos	se of ass	sistance
						1						

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (e) Sharing (b) Relationship (c) A mount of (d) Description of transaction between interested transaction of person and the organization's organization revenues? Yes No (1) JP MORGAN CHASE PETER SCHER KEY 3,142,660 PYMT ON BANK LOAN Nο EMP **Supplemental Information** Part V

THE JP MORGAN CHASE LOAN

Return Reference

Business Transactions with

Interested Persons

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule L, Part IV TRANSACTIONS WITH JP MORGAN CHASE - PETER SCHER IS A TRUSTEE

OF AMERICAN UNIVERSITY AND A KEY EMPLOYEE OF JP MORGAN CHASE THE UNIVERSITY HAS ENGAGED A BANK LOAN WITH 1P MORGAN CHASE THE LOAN WAS BASED ON A COMPETITIVE BID PROCESS RESULTING IN THE MOST FAVORABLE RATE AND TERMS. THE TRUSTEE SCHER RECUSED HIMSELF FROM THE BOARD OF TRUSTEES' DECISION TO ACCEPT

Explanation

Schedule L (Form 990 or 990-EZ) 2015

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE M**

Noncash Contributions

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

► Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at <u>www.irs.gov/form990</u>

DLN: 93493072007107 OMB No 1545-0047

2015

Open to Public Inspection

Internal Revenue Service

Department of the

(Form 990)

	e of the organization can University				Employ	er identifica	tion nu	mber	
	an emiliary				53-01	96549			
Par	rt 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 1q	no	(c Method of c ncash contrib	letermı		ts
1 .	Art—Works of art	X	8	Ī	OPINI	ION OF EXP	ERT		
	Art—Historical treasures .			,					
3	Art—Fractional interests								
4	Books and publications	Х		49,105	OPIN]	ON OF EXP	ERT		
	Clothing and household								
	goods								
	Cars and other vehicles								
	Boats and planes Intellectual property								
	Securities—Publicly traded .	X	89	787 183	MARK	ET VALUE			
	Securities—Closely held stock .			, 0, 103	T T T T T T T T T T T T T T T T T T T	21 1/1202			
11	Securities—Partnership, LLC, or trust interests								
	Securities—Miscellaneous								
	Qualified conservation contribution—Historic								
L4 ·	structures Qualified conservation								
	contribution—Other								
	Real estate—Residential .								
	Real estate—Commercial Real estate—Other								
	Collectibles								
	Food inventory								
	Drugs and medical supplies .								
	Taxıdermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
	Other►(「WARE & LICENSES)	X	5	1,539,443	MARK	ET VALUE			
	Other►(LS & GIFT CARDS)_	X	23	17,389	MARK	ET VALUE			
	Other ► (ture and Equipment)	X	4	·		ET VALUE			
icke	,	Х	1	·	MARK	ET VALUE			
	Number of Forms 8283 received for which the organization comple				29			I	3
30a	During the year, did the organiza	tion receiv	e by contribution any prope	erty reported in Part I, lines	1 thro	ugh 28, that		Yes	No
	it must hold for at least three ye	ars from the	e date of the initial contribu	ition, and which is not requi	red to l	be used			i.
	for exempt purposes for the entire	re holding p	eriod?				30a		Νo
b	If "Yes," describe the arrangeme	ent in Part I	I						
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contrib	outions?	31	Yes	
32a	Does the organization hire or use contributions?	•	es or related organizations	to solicit, process, or sell	noncas	h	32a		No
	If "Yes," describe in Part II If the organization did not report	an amount	ın column (c) for a type of	property for which column (a) is ch	necked,	320		140

describe in Part II

Page 2

Schedule M (Form 990) (2015)

Return Reference Explanation

DLN: 93493072007107

Supplemental Information to Form 990 or 990-EZ

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on}$ Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. \blacktriangleright Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

American University

Name of the organization

990-EZ)

SCHEDULE 0 (Form 990 or

Employer identification number

American University		53-0196549
990 Schedule O	, Supplemental Information	
Return Reference	Explanation	
Return	FORM 990, PART III, LINE 1 CHARTERED BY AN ACT OF CONGRESS IN 1893, AMERIC COEDUCA TIONAL UNIVERSITY LOCATED ON AN 85-ACRE CAMPUS IN WASHINGTO FRACTICAL IDEALISM, AND A PASSION FOR PUBLIC SERVICE DEFINE AMERICAN IVERSITY OTHER PROGRAM SERVICES FORM 990, PART III, LINE 4D ACADEMICS STRENGTHS ARE GROUNDED IN SOCIAL RESPONSIBILITY, AND A COMMITMENT TO DIVERSITY OTHER PROGRAM SERVICES FORM 990, PART III, LINE 4D ACADEMICS IN LIBRARIES, ACADEMIC COMPUTER SERVICES, ADMINISTRATIVE OFFICES AND ISUPPORT OF THE PROGRAM SERVICES FORM 990, PART III, LINE 4D ACADEMICS IN LIBRARIES, ACADEMIC COMPUTER SERVICES, SORTS AND RECEATION INSTITUTIONAL SUPPOR THE LECOMMUNCATIONS, SPACE MANAGEMENT, SECURITY, MAIL AND TRANSPORT RESEARCH AND TECHNICAL ASSISTANCE PROJECTS FUNDED BY FEDERAL AND PITE-OFFICATION OF WAMM 88 FMA 22-4HOURS, 50,000 WATT FUBLIC RADIOS TA'S SINCE 1861 AMERICAN UNIVERSITY PARTINER IN OUR COMMUNITY COMMUNITY SINCE 1861 AMERICAN UNIVERSITY PARTINER IN OUR COMMUNITY COMMUNITY SINCE SINCE SINCE ALL VIEWS ITSELF AS A FRIVATE UNIVERSITY DURING THE 2015 CALENDAR YEAR MORE THAN 3,200 AU STUDIONS CONTRIBUTED UNIVERSITY ORGANIZATIONS AND PARTICIPATED IN MYRIAD COMMUNITY SERVICE ACTIVITIES OF THE MOURS OF COMMUNITY SERVICE IN THE DISTRICT OF COLUMBIA THE UNIVERSITY ORGANIZATIONS AND PARTICIPATED IN MYRIAD COMMUNITY SERVICE WORK AND STANDARD SERVICE EVENTS WORKIN AUS SCHOOL OF EDUCATION, TEACHING AND PRESEARCH, CO READS, DE READS DAY, FRESHMAN SERVICE EXPERIENCE AND ONE-DAY SERVICE EVENTS WORKIN AUS SCHOOL OF EDUCATION, TEACHING AND PRESEARCH AND STANDARD SERVICE SCHOOLS, RANGING SEASIES TO THE SCHOOL CURRICULLIM THE DC PUBLIC SECONDARY SCHOOL TEACHERS AND PROGRAMS A CROSS A CADEMIC DISCONDARY SCHOOL TEACHERS AND PROGRAMS A CROSS A CADEMIC DISCONDARY SCHOOL TEACHERS AND PROGRAMS A CROSS A CADEMIC DISCONDARY SCHOOL TEACHERS AND DROGRAMS A CROSS A CADEMIC DISCONDARY SCHOOL TEACHERS AND DROGRAMS A CROSS A CADEMIC DISCONDARY SCHOOL TEACHERS AND DROGRAMS A CROSS A CADEMIC DISCONDARY SCHOOL TEACHER SHAPE AND A THE SEASE AND THE SEA	DN, DC A GLOBAL OUTLOOK, NIVERSITY OUR ACADEMIC CULTURAL AND INTELLECTUAL UPPORT - THE UNIVERSITY PORT FOR THE SIX ACADEMIC INVERSITY REGISTRAR, FINANCIAL AID RT - INFORMATION TECHNOLOGY, ATION SERVICES RESEARCH-RIVATE AGENCIES PUBLIC SERVICE-TION LICENSED TO THE UNIVERSITY ERVICE MANY OF AU'S EMPLIFY THE UNIVERSITY'S VITH A PUBLIC RESPONSIBILITY TED APPROXIMATIVELY 130,000 WORKED WITH NUMEROUS LOCAL INCLUDING CAMPUS RAY, DR SEUSS GWITH DC SCHOOLS AND STUDENTS ENTS TO BECOME ELEMENTARY AND ROOMS FULL TIME FOR 15 WEEKS TO COME SUCHOLS CHANCELLOR HAS FROM PROFESSIONAL TRAINING TO SCIPLINES SOME OF THE PROGRAMS REGANIZATION COMMITTED TO 110 RESEARCH-INFORMED From the Laboratory to the Classroom rams. The goal of both programs is to natter middle and high schools by montto teaching in DC schools for a the State Superintendent of Education in DC 4) Jumpstart, a program that a Seventy AU students from across ring with three public charter schools agination Stage. Through an AU grant, edit graduate course in arts-based a student-initiated endow ment fund anging from \$500 to \$1,000 have been to Voices programs teaches selected their lives and community. Inical programs provide free legal ablished in 1989, provides grants to izations, which provides grants to izations, which provides grants to izations, which provide critical LICY AU maintains a good neighbor Neighborhood Commissions in the fiforts also include maintaining ongoing in the series of American regular basis. An integral part of its the local community, as AU welcomes Continued Education DC residents are and databases. The Osher Lifelong "seasoned learners" with a genuine gram is open to individuals ages 60 audit one course each fall, spring, and did Program, alongside the Alumni irts Center and American University of programs ranging from student benings. DC residents are invited to the museum have earned regional, tizen, which presents creative orts events Patriot League all, soccer, w restling, and other sports he home team for the entire city of the Will
	recognized in national rankings and ratings STARS Gold Rating, Sierra Club Cool Sch Honor Roll. The university's Sustainability Plan outlines a path for continuing this leaded curriculum, research, and co-curricular activities, while achieving ambitious operation outreach programs that integrate sustainability into our administrative planning and cabuildings have been designed to earn at least LEED Gold ratings. Moreover, AU is one world to incorporate LEED-compliant practices as standard facilities operations and rexisting buildings to earn LEED certifications. The pressing need to address climate c sights on becoming carbon-neutral by 2020. Since AU president Neil Kerw in signed to Presidents Climate Commitment, the university has pursued its climate plan rigorously consumption even as our physical footprint has expanded, installing the largest combists systems in any city on the East Coast, purchasing 100 percent green power, and mit from air travel by protecting rainforests in Costa Rica. Additionally, the university has	chools and the Princeton Review Green ership by enhancing sustainability in anal sustainability goals, and expanding ampus culture Since 2010, all new e of only three universities in the maintenance procedures, tracking 25 change has motivated AU to set its the American College and University including reducing total energy bined solar electric and hot water tigating greenhouse gas emissions
CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT	FORM 990, PART VI, LINE 12C BOARD OF TRUSTEES MEMBERS ARE REQUIRED TO ONFLICT OF INTEREST STATEMENT AND SUBMIT SUCH STATEMENT TO THE SECRE IS ALSO THE GENERAL COUNSEL FOR THE UNIVERSTY THE SECRETARY REVIEWS POTENTIAL CONFLICTS AND REPORTS SUCH CONFLICTS TO THE BOARD CHAIR THE	COMPLETE AN ANNUAL C TARY OF THE BOARD WHO S THOSE STATEMENTS FOR

T ALSO REQUIRES ALL MEMBERS TO NOTIFY THE BOARD PROMPTLY OF AN ACTUAL, APPARENT, OR POTENT IAL CONFLICT OF INTEREST AS IT ARISES, SO THAT IT CAN BE ADDRESSED IMMEDIATLY AND NOT JUST

ONCE PER YEAR

990 Schedule O. Supplemental Information

Return Reference

Document Disclosure

PROCESS FOR

DETERMINING

FORM 990, PART VI, LINES 15A & 15B The compensation of all officers of the university is reviewed and approved annually by the compensation committee of the board of trustees, and is subsequently approved by the full board. The COMPENSATION committee engages third party experts to benchmark compensation for these positions on an annual basis. The

Explanation

compensation of key employees is set by their supervising officer within the constraints of the board of trustees'

approved university operating budget

STATEMENTS ARE AVAILABLE AS PUBLIC INFORMATION ON THE UNIVERSITY'S WEBSITE

FORM 990. PART VI. LINE 19 GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

 DLN: 93493072007107OMB No 1545-0047

Related Organizations and Unrelated Partnerships

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

2015

Open to Public Inspection

entity

0 AU

Department of the Treasury Internal Revenue Service

(1) American Univ at Connecticut Ave LLC

4400 Massachusetts Ave NW Washington, DC 20016 45-5294959

SCHEDULE R

(Form 990)

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

or foreign country)

DC

Name of the organization American University

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

| (a) | (b) | (c) | (d) | (e) | (f) |
| Name, address, and EIN (if applicable) of disregarded entity | Direct controlling | End-of-year assets | Direct controlling | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-year assets | Direct controlling | End-of-

Real Estate

Part II Identification of Related Tax-Exempt Organizations or more related tax-exempt organizations during the	itions Complete if the tax year.	ne organization an	swered "Yes" on	Form 990, Part IV	, line 34 because it	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))		Section (13) co en	(g) n 512(tontrolle ntity?
(1)Washington Research Library Consortium 901 Commerce Drive	Library Svcs	MD	501(c)(3)	11	NA	Yes	No No
Upper Marlboro, MD 20774 52-1559828						\downarrow	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y		Schedule R (Forr	n 990) 2	2015

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form	990, Pa	art IV, I	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)	controlling in entity e	al Direct cile controlling e or entity gn	(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) Disproprtionate allocations? Yes No		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging	(k) Percentage ownership
] 3117			Yes	No	1	Yes	No		
											\vdash		
Part TV Identification of Polated Organizations Tayable					I.		<u> </u>						

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?		
								Yes	No	

Part V Transactions With Related Organizations Complete if the organization an	swered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			ge J		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No		
1 During the tax year, did the orgranization engage in any of the following transactions with one or moi	re related organizations li	sted in Parts II-IV?						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	3			1a		No		
b Gift, grant, or capital contribution to related organization(s)				1b		No		
c Gift, grant, or capital contribution from related organization(s)				1c		No		
d Loans or loan guarantees to or for related organization(s)				1d		No		
e Loans or loan guarantees by related organization(s)				1e		No		
f Dividends from related organization(s)				1f		No		
${f g}$ Sale of assets to related organization(s)				1 g		No		
h Purchase of assets from related organization(s)				1h		No		
i Exchange of assets with related organization(s)				1i		No		
j Lease of facilities, equipment, or other assets to related organization(s)								
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No		
Performance of services or membership or fundraising solicitations for related organization(s)				11		No		
${f m}$ Performance of services or membership or fundraising solicitations by related organization(s) .				1m		No		
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes			
o Sharing of paid employees with related organization(s)				10		No		
p Reimbursement paid to related organization(s) for expenses				1 p		No		
q Reimbursement paid by related organization(s) for expenses				1q		No		
${f r}$ Other transfer of cash or property to related organization(s)				1r		No		
s Other transfer of cash or property from related organization(s)				1 s		No		
If the answer to any of the above is "Yes," see the instructions for information on who must comp		overed relationships		S				
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining ai	mount II	nvolved			

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

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

revenue) that was not a related organization See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?)(3) Income itions?		(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1 I	
													<u> </u>

