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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private 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 [www.irs.gov/form990](#)

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

The George Washington University

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

c/o TAX DEPT 45155 RESEARCH PL 260

City or town, state or province, country, and ZIP or foreign postal code

ASHBURN, VA 201474198

F Name and address of principal officer

Thomas J LeBlanc

1918 F St NW

WASHINGTON, DC 20052

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW GWU EDU

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1821

M State of legal domicile DC

D Employer identification number

53-0196584

E Telephone number

(571) 553-8309

G Gross receipts \$ 2,021,323,055

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

EDUCATION AND RESEARCH

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

3 Number of voting members of the governing body (Part VI, line 1a)

3 28

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 27

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

5 15,627

6 Total number of volunteers (estimate if necessary)

6 3,100

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a 15,291,885

7b Net unrelated business taxable income from Form 990-T, line 34

7b 0

Revenue

8 Contributions and grants (Part VIII, line 1h)

8 68,820,599

9 Program service revenue (Part VIII, line 2g)

9 1,409,142,139

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

10 55,232,016

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

11 42,126,352

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

12 1,575,321,106

1,620,270,222

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

13 367,045,773

14 Benefits paid to or for members (Part IX, column (A), line 4)

14 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

15 675,970,520

16a Professional fundraising fees (Part IX, column (A), line 11e)

16a 662,461

820,817

b Total fundraising expenses (Part IX, column (D), line 25) ▶21,683,750

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

17 504,036,483

521,171,702

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

18 1,547,715,237

1,623,057,969

19 Revenue less expenses Subtract line 18 from line 12

19 27,605,869

-2,787,747

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

20 4,383,821,034

4,567,697,789

21 Total liabilities (Part X, line 26)

21 2,062,151,345

2,172,510,335

22 Net assets or fund balances Subtract line 21 from line 20

22 2,321,669,689

2,395,187,454

Part II Signature Block

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

Sign Here

Signature of officer

2019-05-09

Date

Sharon Heinle Assoc VP & University Controller

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Travis L Patton

Preparer's signature

Travis L Patton

Date

Check ☐ if self-employed

PTIN

P00369623

Firm's name ▶ Pricewaterhousecoopers LLP

Firm's EIN ▶ 13-4008324

Firm's address ▶ 600 13th Street NW Suite 1000

Phone no (202) 414-1000

Washington, DC 20005

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission

See Schedule O

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

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

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

If "Yes," describe these changes on Schedule O

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

4a	(Code)	(Expenses \$	1,177,890,405	including grants of \$	329,549,732)	(Revenue \$	1,168,100,834)
See Additional Data							

4b	(Code)	(Expenses \$	211,436,519	including grants of \$	69,742,197)	(Revenue \$	182,178,466)
See Additional Data							

4c	(Code)	(Expenses \$	93,662,767	including grants of \$	0)	(Revenue \$	114,613,664)
See Additional Data							

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

4e	Total program service expenses ▶	1,482,989,691
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Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	Yes	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>	Yes	
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	Yes	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	Yes	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	40,151
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	15,627
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
b	If "Yes," enter the name of the foreign country ►BR, CH See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

Check if Schedule O contains a response 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 year	28	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b	Enter the number of voting members included in line 1a, above, who are independent	27	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: CA, IN, KS, MD, MA, MI, NH, NY, OR, SC

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
 ▶ SHARON HEINLE 45155 RESEARCH PL STE 260 ASHBURN, VA 201474198 (571) 553-1087

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

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

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

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

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

[illegible]

[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1,573

Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
GWU MEDICAL FACULTY ASSOCIATES 2150 PENNSYLVANIA AVE NW WASHINGTON, DC 20037	Teaching and Research	44,247,361
2U INC 7900 Harkins Road Lanham, MD 20706	E - Learning	29,432,903
WHITING TURNER CONTRACTING CO 300 E JOPPA RD BALTIMORE, MD 21286	Construction	25,274,570
ARAMARK SERVICES INC PO BOX 7548 PHILADELPHIA, PA 19101	Facility	15,282,308
MANHATTAN CONSTRUCTION COMPANY 5601 S 122nd East Ave Tulsa, OK 74146	Construction	8,218,918

<p>2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 505</p>	
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Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a	0			
	b Membership dues . . .	1b	0			
	c Fundraising events . . .	1c	376,053			
	d Related organizations	1d	0			
	e Government grants (contributions)	1e	7,770,037			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	43,367,345			
	g Noncash contributions included in lines 1a-1f \$ _____		4,015,281			
	h Total. Add lines 1a-1f ▶		51,513,435			
Program Service Revenue		Business Code				
	2a Tuition and Fees	900099	1,067,678,440	1,067,678,440		
	b Grants and Contracts	900099	193,918,552	193,918,552		
	c Auxiliary Enterprises	611710	114,613,664	114,613,664		
	d Medical Education Agreements	900099	64,853,890	64,853,890		
	e Other Program service revenue	611710	23,790,756	23,790,756		
	f All other program service revenue		0	0	0	0
	g Total. Add lines 2a-2f ▶		1,464,855,302			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		15,340,267			15,340,267
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶		2,172,465			2,172,465
	6a Gross rents	(i) Real (ii) Personal				
		45,477,821				
	b Less rental expenses	26,922,604				
	c Rental income or (loss)	18,555,217 0				
	d Net rental income or (loss) ▶		18,555,217			18,555,217
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
		354,708,863 71,570,272				
	b Less cost or other basis and sales expenses	298,985,457 74,655,140				
	c Gain or (loss)	55,723,406 -3,084,868				
	d Net gain or (loss) ▶		52,638,538			52,638,538
	8a Gross income from fundraising events (not including \$ _____ 376,053 of contributions reported on line 1c) See Part IV, line 18 a		98,435			
	b Less direct expenses b		231,181			
	c Net income or (loss) from fundraising events ▶		-132,746			-132,746
	9a Gross income from gaming activities See Part IV, line 19 a		6,000			
	b Less direct expenses b		7,803			
c Net income or (loss) from gaming activities ▶		-1,803			-1,803	
10a Gross sales of inventory, less returns and allowances a		288,310				
b Less cost of goods sold b		250,648				
c Net income or (loss) from sales of inventory ▶		37,662	37,662	0		
Miscellaneous Revenue		Business Code				
11a Unrelated Partnership Income		525990	1,534,648		1,534,648	
b Independent Operations		721110	13,757,237		13,757,237	
c						
d All other revenue			0	0	0	0
e Total. Add lines 11a-11d ▶			15,291,885			
12 Total revenue. See Instructions ▶			1,620,270,222	1,464,892,964	15,291,885	88,571,938

Part IX Statement of Functional Expenses

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

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	61,942,148	61,942,148		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	322,870,634	322,870,634		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	14,479,147	14,479,147		
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	8,956,916	1,630,970	5,456,969	1,868,977
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	1,568,630	1,568,630		
7 Other salaries and wages.	566,832,112	507,478,233	47,631,178	11,722,701
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	38,895,610	34,686,211	3,293,983	915,416
9 Other employee benefits.	47,861,184	42,578,097	4,060,460	1,222,627
10 Payroll taxes.	37,659,069	33,553,000	3,181,358	924,711
11 Fees for services (non-employees):				
a Management.				
b Legal.	5,315,869	3,385,943	1,929,926	
c Accounting.	2,338,470	107,117	2,231,353	
d Lobbying.	7,670	7,670		
e Professional fundraising services. See Part IV, line 17.	820,817			820,817
f Investment management fees.	5,525,398		5,525,398	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	150,328,703	141,821,560	7,848,294	658,849
12 Advertising and promotion.	5,303,035	4,935,555	201,637	165,843
13 Office expenses.	32,027,995	27,881,389	3,474,104	672,502
14 Information technology.	28,139,786	23,057,959	5,042,258	39,569
15 Royalties.	418,669	418,669		
16 Occupancy.	54,872,513	51,068,878	3,451,103	352,532
17 Travel.	23,022,128	21,292,972	1,011,394	717,762
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	17,579,364	12,651,972	3,929,554	997,838
20 Interest.	60,456,869	56,915,983	3,540,886	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	86,466,941	82,745,760	3,721,181	
23 Insurance.	3,253,485	3,212,833	40,652	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a SUBSCRIPTIONS/PERIODICALS	9,636,279	9,548,715	74,168	13,396
b MEMBERSHIPS	3,113,523	2,619,947	460,689	32,887
c INTERCOMPANY ASSESSMENTS	0	1,496,078	-1,608,883	112,805
d				
e All other expenses	33,365,005	19,033,621	13,886,866	444,518
25 Total functional expenses. Add lines 1 through 24e.	1,623,057,969	1,482,989,691	118,384,528	21,683,750
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,161,840	1	1,750,600
	2	Savings and temporary cash investments		316,931,651	2	411,052,884
	3	Pledges and grants receivable, net		91,360,184	3	84,289,353
	4	Accounts receivable, net		38,929,587	4	41,440,356
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6	0
	7	Notes and loans receivable, net		5,316,697	7	17,682,089
	8	Inventories for sale or use		141,529	8	112,686
	9	Prepaid expenses and deferred charges		19,143,636	9	17,356,139
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,646,461,714		
	b	Less: accumulated depreciation	10b	929,305,180		
				2,716,089,184	10c	2,717,156,534
	11	Investments—publicly traded securities		304,230,404	11	326,235,120
	12	Investments—other securities. See Part IV, line 11		848,607,567	12	909,397,730
	13	Investments—program-related. See Part IV, line 11		30,555,492	13	30,658,974
	14	Intangible assets		7,945,484	14	7,945,484
15	Other assets. See Part IV, line 11		3,407,779	15	2,619,840	
16	Total assets. Add lines 1 through 15 (must equal line 34)		4,383,821,034	16	4,567,697,789	
Liabilities	17	Accounts payable and accrued expenses		180,395,847	17	191,849,528
	18	Grants payable		0	18	
	19	Deferred revenue		84,554,296	19	88,747,537
	20	Tax-exempt bond liabilities		0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	
	24	Unsecured notes and loans payable to unrelated third parties		1,761,945,189	24	1,855,973,228
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		35,256,013	25	35,940,042
	26	Total liabilities. Add lines 17 through 25		2,062,151,345	26	2,172,510,335
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		1,577,538,104	27	1,689,097,776
	28	Temporarily restricted net assets		464,885,964	28	419,509,206
	29	Permanently restricted net assets		279,245,621	29	286,580,472
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		2,321,669,689	33	2,395,187,454
	34	Total liabilities and net assets/fund balances		4,383,821,034	34	4,567,697,789

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,620,270,222
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,623,057,969
3	Revenue less expenses Subtract line 2 from line 1	3	-2,787,747
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,321,669,689
5	Net unrealized gains (losses) on investments	5	78,673,529
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,368,017
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,395,187,454

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
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	Yes	

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 53-0196584
Name: The George Washington University

Form 990 (2017)

Form 990, Part III, Line 4a:

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

Form 990, Part III, Line 4b:

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

Form 990, Part III, Line 4c:

AUXILIARY ENTERPRISES - STUDENTS AND COMMUNITY GW PROVIDES A NUMBER OF SERVICES THAT SUPPORT LEARNING, BUILD COMMUNITY, AND ENHANCE THE OVERALL QUALITY OF STUDENT LIFE AUXILIARY ENTERPRISES INCLUDE FACILITIES AND RESIDENTIAL PROPERTY MANAGEMENT, DINING, BOOKSTORE, PARKING, STUDENT HEALTH, MAIL, AND LAUNDRY SERVICES GW'S MARVIN CENTER HOUSES STUDENT ORGANIZATION OFFICES AND MEETING ROOMS AND IS UTILIZED BY STUDENTS, FACULTY, STAFF, AND VISITORS FOR MORE INFO ABOUT GW'S PROGRAMS & ACCOMPLISHMENTS, SEE THE 2017-2018 FINANCIAL REPORT ON THE FINANCE DIVISION WEBSITE AT [HTTP //FINANCE GWU EDU/REPORTS](http://finance.gwu.edu/reports)

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Steven Knapp President -Ex Officio through 7/17	50 0	X		X				1,888,289	0	84,239
Thomas J LeBlanc President - Ex Officio as of 8/17	50 0	X		X				724,767	0	72,895
W Scott Amey Trustee	2 0	X						0	0	0
Gabbi Baker Trustee	2 0	X						0	0	0
Roslyn M Brock Trustee/Comm Chair	3 0	X						0	0	0
Nelson A Carbonell Jr Board Chair/ Comm Chair	5 0	X						0	0	0
Mark H Chichester Trustee	2 0	X						0	0	0
Amr ElSawy Trustee/Comm Chair	3 0	X						0	0	0
Kyle Farmbry Trustee	2 0	X						0	0	0
Diana B Henriques Trustee	2 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
A Michael Hoffman Trustee	2 0	X						0	0	0
James F Humphreys Trustee	2 0	X						0	0	0
Madeleine S Jacobs Trustee/Comm Chair	3 0	X						0	0	0
David C Karlgaard Trustee	2 0	X						0	0	0
Stuart S Kassin Trustee	2 0	X						0	0	0
Jay E Katzen Trustee	2 0	X						0	0	0
J Richard Knop Trustee	2 0	X						0	0	0
Peter B Kovler Trustee	2 0	X						0	0	0
Ann Walker Marchant Trustee	2 0	X						0	0	0
Sally Nuamah Trustee	2 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Insttutcnal Trustee	Officer	Key employee	Highest compensated employee	Former			
Judith Lane Rogers Trustee	2 0	X						0	0	0
Steven S Ross Trustee	2 0	X						0	0	0
Grace E Speights Secretary of the Board/ Comm Chair	5 0	X						0	0	0
Robert K Tanenbaum Trustee	2 0	X						0	0	0
Avram Tucker Trustee/ Comm Chair	3 0	X						0	0	0
Cynthia Steele Vance Trustee	2 0	X						0	0	0
George W Wellde Jr Trustee/Comm Chair	3 0	X						0	0	0
Martha B Wyrsh Trustee	2 0	X						0	0	0
Ellen Zane Vice Chair of the Board/Comm Chair	5 0	X						0	0	0
Louis H Katz EVP & Treasurer	50 0			X				1,055,755	0	36,148

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Forrest Maltzman Provost and EVP Academic Affairs	50 0			X				594,980	0	47,201
Beth Nolan Sr VP & Gen Counsel	50 0			X				657,802	0	43,271
Jeffrey S Akman VP for Health Affairs and Dean of SMHS	50 0				X			968,846	0	35,461
Leo M Chalupa VP for Research	50 0				X			532,982	0	42,882
Aristide J Collins Jr VP for Development and Alumni Relations through 1/2017	50 0				X			507,792	0	35,571
Loretta Early Chief Information Officer as of 7/2017	50 0				X			149,445	0	16,594
Matthew Manfra Interim VP for Development and Alumni Relations through 2/2018	50 0				X			326,445	0	43,051
Blake D Morant Dean, Law School	50 0				X			657,253	0	66,132
Ben Vinson III Dean, CCAS	50 0				X			411,176	0	36,544
Lynn R Goldman Dean, Milken Institute School of Public Health	50 0					X		522,588	0	72,185

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rakesh Kumar Professor through 6/2017	50 0					X		830,009	0	4,207
Thomas A Mazzuchi Chair, Dept of Engineering	50 0					X		646,768	0	42,700
Barbara Porter Chief of Staff through 7/2017	50 0					X		672,884	0	47,081
Shahram Sarkani Director and Professor of EMSE	50 0					X		1,027,183	0	48,871
Marguerite Barratt Former Dean, CCAS	40 0						X	296,560	0	49,688
Paul Schiff Berman Former Dean, Law School	40 0						X	428,651	0	48,925
Michael Lonergan Former Men's Basketball Coach	40 0						X	650,000	0	0
Gregory E Maggs Former Interim Dean, Law School	40 0						X	288,039	0	42,643

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization

The George Washington University

Employer identification number

53-0196584

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1

☐

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

2

☒

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____

10

☐

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

11

☐

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

12

☐

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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a

☐

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.**

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.**

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.**

d

☐

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.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations _____

g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2017

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)
(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	155,008,188	202,937,761	70,466,662	68,820,599	51,513,435	548,746,645
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	155,008,188	202,937,761	70,466,662	68,820,599	51,513,435	548,746,645
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)						13,064,903
6	Public support. Subtract line 5 from line 4						535,681,742

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7	Amounts from line 4	155,008,188	202,937,761	70,466,662	68,820,599	51,513,435	548,746,645
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	55,924,238	57,474,376	56,484,929	60,433,663	62,990,553	293,307,759
9	Net income from unrelated business activities, whether or not the business is regularly carried on			803,770	0	2,827,641	3,631,411
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	79,418	267,329	329,559	392,745	1,069,051
11	Total support. Add lines 7 through 10						846,754,866
12	Gross receipts from related activities, etc. (see instructions)					12	6,643,866,146
13	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, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14 63.26 %
15	Public support percentage for 2016 Schedule A, Part II, line 14	15 64.82 %
16a	33 1/3% support test—2017. 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. ► <input checked="" type="checkbox"/>	
b	33 1/3% support test—2016. 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. ► <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2017. 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 organization. ► <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2016. 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. ► <input type="checkbox"/>	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a 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))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
	11a	
	11b	
	11c	

Section B. Type I Supporting Organizations

	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? <i>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.</i>		
	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? <i>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.</i>		
	2	

Section C. Type II Supporting Organizations

	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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	

Section D. All Type III Supporting Organizations

	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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test Answer (a) and (b) below.		
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? <i>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.</i>		
	2a	
b 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? <i>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.</i>		
	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 each of the supported organizations? <i>Provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 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		
7 Other expenses (see instructions)	7		
8 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)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

- 7** ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
Schedule A, Part II, Line 10	OTHER INCOME INCLUDES GROSS INCOME FROM FUNDRAISING, GAMING EVENTS, AND SALES OF INVENTORY

990 Schedule A, Supplemental Information	
Return Reference	Explanation
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - , COLUMN A - , COLUMN B - 79418 0, COLUMN C - 267329 0, COLUMN D - 329559 0, COLUMN E - 392745 0, COLUMN F - 1069051 0,

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶**Complete if the organization is described below.** ▶**Attach to Form 990 or Form 990-EZ.**
▶**Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**
www.irs.gov/form990.

OMB No 1545-0047

2017

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
- Section 527 organizations Complete Part I-A only

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

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

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

Name of the organization The George Washington University	Employer identification number 53-0196584
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2** Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3** Volunteer hours for political campaign activities (see instructions) _____

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

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ **Yes** ☐ **No**
- 4a** Was a correction made? ☐ **Yes** ☐ **No**
- b** If "Yes," describe in Part IV

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		7,697													
c Total lobbying expenditures (add lines 1a and 1b)		7,697													
d Other exempt purpose expenditures		1,607,997,132													
e Total exempt purpose expenditures (add lines 1c and 1d)		1,608,004,829													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000	0												
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	11,946	19,241	393	7,697	39,277
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures		0	0	0	0

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

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

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

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
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efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493129005409	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► 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.</div> <div>Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.</div>			<div>OMB No 1545-0047</div> <div>2017</div> <div>Open to Public Inspection</div>
<div>Name of the organization The George Washington University</div>				<div>Employer identification number 53-0196584</div>	
<div>Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 6.</div>					
		(a) Donor advised funds		(b) Funds and other accounts	
1		Total number at end of year			
2		Aggregate value of contributions to (during year)			
3		Aggregate value of grants from (during year)			
4		Aggregate value at end of year			
5				Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
				<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6				Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	
				<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
<div>Part II Conservation Easements.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 7.</div>					
1 Purpose(s) of conservation easements held by the organization (check all that apply)					
<div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education)</div> <div><input type="checkbox"/> Preservation of an historically important land area</div> <div><input type="checkbox"/> Protection of natural habitat</div> <div><input type="checkbox"/> Preservation of a certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div>					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				<div>Held at the End of the Year</div>	
a				2a	
b				2b	
c				2c	
d				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►					
4 Number of states where property subject to conservation easement is located ►					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?					
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?					
<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements					
<div>Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.</div> <div>Complete if the organization answered "Yes" on Form 990, Part IV, line 8.</div>					
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items					
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1				► \$	
(ii) Assets included in Form 990, Part X				► \$ 13,968,395	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items					
a Revenue included on Form 990, Part VIII, line 1				► \$	
b Assets included in Form 990, Part X				► \$	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
			Cat No 52283D Schedule D (Form 990) 2017		

Part III

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

3

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

a

☒ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☒ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes☒ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	1,729,147,338	1,570,277,841	1,616,356,940	1,576,508,282	1,375,201,717
b Contributions	29,112,124	49,497,574	27,381,387	71,295,134	33,566,251
c Net investment earnings, gains, and losses	128,803,363	192,958,357	17,123,779	48,623,597	247,950,478
d Grants or scholarships	11,945,402	11,218,990	10,527,263	9,885,842	8,986,348
e Other expenditures for facilities and programs	70,782,046	67,976,901	74,359,971	63,783,359	62,467,435
f Administrative expenses	5,525,399	4,390,543	5,697,031	6,400,872	8,756,381
g End of year balance	1,798,809,978	1,729,147,338	1,570,277,841	1,616,356,940	1,576,508,282

2

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

a

Board designated or quasi-endowment

69 24 %

b

Permanent endowment

13 37 %

c

Temporarily restricted endowment

17 39 %

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

3a

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

(i) unrelated organizations

3a(i)

☐ Yes☐ No

(ii) related organizations

3a(ii)

☐ Yes☐ No

b

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

3b

☐ Yes☐ No

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	179,591,414		179,591,414
b Buildings	1,009,077,296	2,192,411,693	739,478,607	2,462,010,382
c Leasehold improvements	0	11,110,397	8,295,039	2,815,358
d Equipment	0	254,270,914	181,531,534	72,739,380
e Other	0	0	0	0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				2,717,156,534

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) DEFERRED COMPENSATION LIFE INSURANCE	3,739,369	F
(B) INVESTMENT FUND FOR 457 LIABILITIES	50,398,414	F
(C) BENEFICIAL INTEREST PERPETUAL TRUSTS	39,322,202	F
(D) RECEIVABLES FROM CRUTS HELD BY 3RD PARTY	9,086,964	F
(E) LIFE INCOME FUNDS	13,679,061	F
(F) LIMITED PARTNERSHIPS	64,535,969	F
(G) OTHER SECURITIES	727,270,376	F
(H) OTHER STOCKS	1,365,375	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	909,397,730	

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value	
(1) Federal income taxes		
REFUNDABLE ADVANCES	29,621,545	
INSURANCE RESERVES	6,318,497	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	35,940,042	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☐

Schedule D (Form 990) 2017

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

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

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

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

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 53-0196584
Name: The George Washington University

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(A) DEFERRED COMPENSATION LIFE INSURANCE	3,739,369	F
(A) INVESTMENT FUND FOR 457 LIABILITIES	50,398,414	F
(B) BENEFICIAL INTEREST PERPETUAL TRUSTS	39,322,202	F
(C) RECEIVABLES FROM CRUTS HELD BY 3RD PARTY	9,086,964	F
(D) LIFE INCOME FUNDS	13,679,061	F
(E) LIMITED PARTNERSHIPS	64,535,969	F
(F) OTHER SECURITIES	727,270,376	F
(G) OTHER STOCKS	1,365,375	F

Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 4 Collections of art - description of collections	<p>THE UNIVERSITY HOLDS A COLLECTION OF HISTORICAL DOCUMENTS IN THE AMOUNT OF \$13,968,395 IN ADDITION, THE UNIVERSITY HOLDS SEVERAL PERMANENT COLLECTIONS OF ARCHIVES, HISTORICAL DOCUMENTS, AND ARTWORK THE GEORGE WASHINGTON UNIVERSITY MUSEUM (THE "MUSEUM") HOUSES THE TEXT</p> <p>ILE MUSEUM COLLECTION, WHICH INCLUDES TEXTILES, CERAMICS, HISTORIC FURNISHINGS AND PHOTOGRAPHS THAT ARE ON PERMANENT LOAN TO GW THE MUSEUM ALSO HOUSES THE ALBERT SMALL COLLECTION, WHICH FEATURES MAPS, PHOTOGRAPHS AND ARTIFACTS RELATED TO THE HISTORY OF WASHINGTON, D C THROUGH EXHIBITIONS, PROGRAMS AND ACADEMIC COURSES, THE MUSEUM COLLECTIONS ENRICH UNIVERSITY RESEARCH, EDUCATION, AND CULTURAL UNDERSTANDING A SEPARATE COLLECTION IS MANAGED BY THE UNIVERSITY'S LUTHER W BRADY ART GALLERY, AN EDUCATIONAL GALLERY LOCATED ON CAMPUS, WHICH INCLUDES PAINTINGS, SCULPTURES, GRAPHICS AND PHOTOGRAPHS THE UNIVERSITY ALSO MAINTAINS THE DIMOCK GALLERY, WHICH SUPPORTS ITS FINE ARTS AND HISTORY STUDENTS AND PROVIDES A "HANDS-ON" EXPERIENCE FOR CURATING AND PRESENTING STUDENTS' CREATIVE ENDEAVORS FINALLY, THE COLLECTIONS OF THE GW LIBRARIES' SPECIAL COLLECTIONS RESEARCH CENTER INCLUDE STRONG REPRESENTATION OF AMERICAN LABOR HISTORY, SOCIAL JUSTICE, HISTORY OF EDUCATION, AND 20TH CENTURY WASHINGTON, D C HISTORY COLLECTIONS INCLUDE RARE BOOKS, ARCHIVES AND MANUSCRIPTS, MAPS, AND AUDIOVISUAL MATERIALS NOTABLE COLLECTIONS INCLUDE THE ARCHIVES OF THE INTERNATIONAL BROTHERHOOD OF TEAMSTERS, THE NATIONAL EDUCATION ASSOCIATION, THE CORCORAN GALLERY OF ART AND THE CORCORAN COLLEGE OF ART + DESIGN, THE I EDWARD KIEV COLLECTION OF JUDAICA AND HEBRAICA, AND GW'S UNIVERSITY ARCHIVES</p>

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	THE UNIVERSITY'S ENDOWMENT PROVIDES STABLE FINANCIAL SUPPORT TO A WIDE VARIETY OF PROGRAMS AND ACTIVITIES ON AN ONGOING BASIS, PLAYING A CRITICAL ROLE IN ENABLING THE UNIVERSITY TO ACHIEVE ITS MISSION PROGRAMS SUPPORTED BY THE ENDOWMENT INCLUDE SCHOLARSHIPS AND FELLOWSHIPS, LECTURESHIPS AND PROFESSORSHIPS, RESEARCH ACTIVITIES, LIBRARIES, MUSEUMS, AND ATHLETICS

SCHEDULE E (Form 990 or 990-EZ)	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.	OMB No 1545-0047
		2017
	Department of the Treasury Name of the organization The George Washington University	Employer identification number 53-0196584

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

Part II Supplemental Information. 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
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	The policy is published on the university's website and is printed in all major undergraduate and graduate recruitment materials, including undergraduate and graduate bulletins and course catalogs, student handbooks, financial aid sourcebooks, guide to student rights and responsibilities, and employment recruitment materials. The university continues in its efforts to ensure all supplementary written communications also include a reference to the policy.
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	THE UNIVERSITY RECEIVES FINANCIAL ASSISTANCE FROM VARIOUS GOVERNMENTAL AGENCIES, WITHIN THE FEDERAL GOVERNMENT AND WITHIN LOCAL JURISDICTIONS. THE GOVERNMENTAL GRANTS AND CONTRACTS SUPPORT CERTAIN RESEARCH PROJECTS AND STUDENT FINANCIAL AID.
Schedule E, Part I, Line 6(b) REVOCATION OR SUSPENSION OF GOVERNMENTAL AID OR ASSISTANCE	THE UNIVERSITY DETECTED AND SELF REPORTED A THEFT THAT HAD BEEN PERPETRATED BY AN INDIVIDUAL WITH CRIMINAL INTENT IN COLLUSION WITH OTHERS ON A FEDERAL COOPERATIVE AGREEMENT. ACTIVITY ON THAT AGREEMENT WAS PARTIALLY SUSPENDED ON JUNE 29, 2004 DURING THE INVESTIGATION AND THE INDIVIDUAL WAS TERMINATED AND SUBSEQUENTLY IMPRISONED. ALL ACTIVITY ON THE AGREEMENT WAS FULLY REINSTATED ON OCTOBER 31, 2005.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

OMB No 1545-0047

2017

**Open to Public
Inspection**

Name of the organization
The George Washington University

Employer identification number

53-0196584

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

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

☒ **Yes** ☐ **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	4	279			461,084,000
b Total from continuation sheets to Part I					7,000
c Totals (add lines 3a and 3b)	4	279			461,091,000

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of 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)								Schedule F (Form 990) 2017	
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► 18

3 Enter total number of other organizations or entities ► 13

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☒ Yes ☐ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☒ Yes ☐ No

Part V Supplemental Information

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).

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	GRANTS AND OTHER ASSISTANCE TO GOVERNMENT AND ORGANIZATIONS GW MAINTAINS A FORMAL SUBRECIPIENT MONITORING POLICY WHICH APPLIES TO ALL SUBAWARDS ISSUED UNDER ALL SPONSORED PROJECTS AWARDED THE POLICY APPLIES TO SUBRECIPIENTS WHO ARE ASSIGNED RESPONSIBILITY FOR CONDUCTING A PORTION OF GW'S SPONSORED PROJECT WORK GW IS RESPONSIBLE TO THE SPONSOR FOR MANAGEMENT OF FUNDS AND FOR MEETING PERFORMANCE GOALS GW HAS INTERNAL PROCEDURES FOR ASSESSING THE SUBRECIPIENT ORGANIZATION'S FINANCIAL STATUS AND INTERNAL CONTROLS IN ORDER TO DETERMINE WHETHER TO PROCEED WITH THE SUBRECIPIENT BASED ON THE ASSESSMENT, TERMS AND CONDITIONS ARE ESTABLISHED IN THE SUBAWARD AGREEMENT TO BE CONSISTENT WITH THE LEVEL OF PERCEIVED RISK AND IDENTIFY SPECIFIC MONITORING ACTIVITIES GW UNDERTAKES CERTAIN ACTIVITIES TO MONITOR SUBRECIPIENTS TO PROVIDE REASONABLE ASSURANCE THAT THEY ADMINISTER, PERFORM AND ARE IN COMPLIANCE WITH APPLICABLE LAWS, REGULATIONS, TERMS AND CONDITIONS OF THE PRIME AWARD AND GW'S SUBAWARD AGREEMENTS RISK ASSESSMENT AND AWARD MONITORING PROCEDURES ARE DEFINED BY ROLES AND RESPONSIBILITIES AT GW AND INCLUDE, BUT ARE NOT LIMITED TO, THE PRINCIPAL INVESTIGATOR, DEPARTMENT ADMINISTRATORS, CENTRAL RESEARCH, AND FINANCIAL OFFICES WITHIN GW GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS THE FINANCIAL AID OFFICE KEEPS RECORDS ON ITS INTEGRATED SOFTWARE SYSTEM THAT SUBSTANTIATES THE AMOUNT GRANTED TO EACH STUDENT, THE ELIGIBILITY CRITERIA FOR EACH STUDENT, AND THE SELECTION PROCESS USED IN AWARDED ASSISTANCE THE UNIVERSITY'S GRANTS AND OTHER ASSISTANCE ARE INITIALLY CREDITED DIRECTLY TO THE STUDENT'S ACCOUNT IN ITS INTEGRATED SOFTWARE SYSTEM IN ORDER TO PAY FOR TUITION, FEES, ROOM AND BOARD, AND/OR TEXTBOOK CHARGES A CHANGE IN ENROLLMENT STATUS RESULTS IN WEEKLY REPORTS THAT FINANCIAL AID STAFF REVIEW FOR POSSIBLE ADJUSTMENTS THE BALANCE OF AID IN EXCESS OF THE ABOVE CHARGES CAN BE REFUNDED TO THE STUDENT FOR LIVING EXPENSES THE SYSTEM CHECKS THAT THE STUDENT IS STILL ENROLLED BEFORE ISSUING THE REFUND AT THE GRADUATE LEVEL, AWARDS ARE INITIATED, CHECKED TO ENSURE ELIGIBILITY AND APPROVED BEFORE AWARDS ARE OFFERED TO A STUDENT AND A STUDENT MUST ACCEPT THE AWARD BEFORE PAYMENT PROCESSES BEGIN QUALIFICATIONS FOR ENDOWMENT AWARDS ARE CHECKED AND THE MINIMUM REQUIREMENTS FOR AWARDS ARE CHECKED FOR EVERY ENDOWMENT AWARDEE PAPERWORK IS KEPT IN THE OFFICE FOR THREE YEARS AND THE AWARD LETTERS ELECTRONICALLY FOR FIVE YEARS OUR ELECTRONIC SYSTEMS, BANNER AND EAS, HAVE THE RECORDS OF PAYMENTS

Return Reference	Explanation
Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS	<p>GRANTS AND OTHER ASSISTANCE TO GOVERNMENT AND ORGANIZATIONS GW MAINTAINS A FORMAL SUBRECIPIENT MONITORING POLICY WHICH APPLIES TO ALL SUBAWARDS ISSUED UNDER ALL SPONSORED PROJECTS AWARDED THE POLICY APPLIES TO SUBRECIPIENTS WHO ARE ASSIGNED RESPONSIBILITY FOR CONDUCTING A PORTION OF GW'S SPONSORED PROJECT WORK GW IS RESPONSIBLE TO THE SPONSOR FOR MANAGEMENT OF FUNDS AND FOR MEETING PERFORMANCE GOALS GW HAS INTERNAL PROCEDURES FOR ASSESSING THE SUBRECIPIENT ORGANIZATION'S FINANCIAL STATUS AND INTERNAL CONTROLS IN ORDER TO DETERMINE WHETHER TO PROCEED WITH THE SUBRECIPIENT BASED ON THE ASSESSMENT, TERMS AND CONDITIONS ARE ESTABLISHED IN THE SUBAWARD AGREEMENT TO BE CONSISTENT WITH THE LEVEL OF PERCEIVED RISK AND IDENTIFY SPECIFIC MONITORING ACTIVITIES GW UNDERTAKES CERTAIN ACTIVITIES TO MONITOR SUBRECIPIENTS TO PROVIDE REASONABLE ASSURANCE THAT THEY ADMINISTER, PERFORM AND ARE IN COMPLIANCE WITH APPLICABLE LAWS, REGULATIONS, TERMS AND CONDITIONS OF THE PRIME AWARD AND GW'S SUBAWARD AGREEMENTS RISK ASSESSMENT AND AWARD MONITORING PROCEDURES ARE DEFINED BY ROLES AND RESPONSIBILITIES AT GW AND INCLUDE, BUT ARE NOT LIMITED TO, THE PRINCIPAL INVESTIGATOR, DEPARTMENT ADMINISTRATORS, CENTRAL RESEARCH, AND FINANCIAL OFFICES WITHIN GW GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS THE FINANCIAL AID OFFICE KEEPS RECORDS ON ITS INTEGRATED SOFTWARE SYSTEM THAT SUBSTANTIATES THE AMOUNT GRANTED TO EACH STUDENT, THE ELIGIBILITY CRITERIA FOR EACH STUDENT, AND THE SELECTION PROCESS USED IN AWARDING ASSISTANCE THE UNIVERSITY'S GRANTS AND OTHER ASSISTANCE ARE INITIALLY CREDITED DIRECTLY TO THE STUDENT'S ACCOUNT IN ITS INTEGRATED SOFTWARE SYSTEM IN ORDER TO PAY FOR TUITION, FEES, ROOM AND BOARD, AND/OR TEXTBOOK CHARGES A CHANGE IN ENROLLMENT STATUS RESULTS IN WEEKLY REPORTS THAT FINANCIAL AID STAFF REVIEW FOR POSSIBLE ADJUSTMENTS THE BALANCE OF AID IN EXCESS OF THE ABOVE CHARGES CAN BE REFUNDED TO THE STUDENT FOR LIVING EXPENSES THE SYSTEM CHECKS THAT THE STUDENT IS STILL ENROLLED BEFORE ISSUING THE REFUND AT THE GRADUATE LEVEL, AWARDS ARE INITIATED, CHECKED TO ENSURE ELIGIBILITY AND APPROVED BEFORE AWARDS ARE OFFERED TO A STUDENT AND A STUDENT MUST ACCEPT THE AWARD BEFORE PAYMENT PROCESSES BEGIN QUALIFICATIONS FOR ENDOWMENT AWARDS ARE CHECKED AND THE MINIMUM REQUIREMENTS FOR AWARDS ARE CHECKED FOR EVERY ENDOWMENT AWARDEE PAPERWORK IS KEPT IN THE OFFICE FOR THREE YEARS AND THE AWARD LETTERS ELECTRONICALLY FOR FIVE YEARS OUR ELECTRONIC SYSTEMS, BANNER AND EAS, HAVE THE RECORDS OF PAYMENTS</p>

Additional Data

Software ID: 17005876

Software Version: 2017v2.2

EIN: 53-0196584

Name: The George Washington University

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean		14	Program Services	Education and Research	1,140,000
East Asia and the Pacific		16	Program Services	Education and Research	4,833,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	3	69	Program Services	Education and Research	20,501,000
Middle East and North Africa		18	Program Services	Education and Research	1,940,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America (Canada & Mexico only)		9	Program Services	Education and Research	2,050,000
Russia and Neighboring States		90	Program Services	Education and Research	973,000

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	1	25	Program Services	Education and Research	3,101,000
South Asia		9	Program Services	Education and Research	1,169,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa		29	Program Services	Education and Research	3,230,000
Central America and the Caribbean			Investments		398,821,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Investments		23,193,000
Central America and the Caribbean			Fundraising		4,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Fundraising		54,000
Europe (Including Iceland and Greenland)			Fundraising		19,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Fundraising		48,000
North America (Canada & Mexico only)			Fundraising		8,000

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America			Fundraising		1,000
Sub-Saharan Africa			Fundraising		6,000

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	subaward	27,000	EFT	0		
		South America	subaward	19,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	subaward	196,000	EFT	0		
		South America	subaward	74,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	subaward	55,000	EFT	0		
		Europe (Including Iceland and Greenland)	subaward	15,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	subaward	182,000	EFT	0		
		South America	subaward	30,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	subaward	46,000	EFT	0		
		Europe (Including Iceland and Greenland)	subaward	25,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America (Canada & Mexico only)	subaward	68,000	EFT	0		
		Sub-Saharan Africa	subaward	60,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	subaward	193,000	EFT	0		
		Sub-Saharan Africa	subaward	19,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	subaward	142,000	EFT	0		
		Europe (Including Iceland and Greenland)	subaward	69,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	subaward	175,000	EFT	0		
		Europe (Including Iceland and Greenland)	subaward	17,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America (Canada & Mexico only)	subaward	67,000	EFT	0		
		North America (Canada & Mexico only)	subaward	845,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	subaward	228,000	EFT	0		
		Europe (Including Iceland and Greenland)	subaward	184,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	subaward	59,000	EFT	0		
		Europe (Including Iceland and Greenland)	subaward	17,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	subaward	53,000	EFT	0		
		Sub-Saharan Africa	subaward	77,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	subaward	150,000	EFT	0		
		North America (Canada & Mexico only)	subaward	10,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	subaward	35,000	EFT	0		
		Sub-Saharan Africa	subaward	137,000	EFT	0		

Form 990 Schedule F Part II - Grants or Entities Outside The United States								
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America (Canada & Mexico only)	subaward	85,000	EFT	0		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD SCHOLARSHIPS	Central America and the Caribbean	26	248,000	EFT	0		
STUDY ABROAD SCHOLARSHIPS	East Asia and the Pacific	142	1,930,000	EFT	0		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD SCHOLARSHIPS	Europe (Including Iceland and Greenland)	658	6,925,000	EFT	0		
STUDY ABROAD SCHOLARSHIPS	Middle East and North Africa	55	591,000	EFT	0		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD SCHOLARSHIPS	North America (Canada & Mexico only)	12	3,000	EFT	0		
STUDY ABROAD SCHOLARSHIPS	Russia and Neighboring States	21	129,000	EFT	0		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD SCHOLARSHIPS	South America	52	684,000	EFT	0		
STUDY ABROAD SCHOLARSHIPS	South Asia	5	71,000	EFT	0		

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD SCHOLARSHIPS	Sub-Saharan Africa	46	520,000	EFT	0		

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization

The George Washington University

Employer identification number

53-0196584

Part I

Fundraising Activities.Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
 Form 990-EZ filers are not required to complete this part.

1

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

a

☒ Mail solicitations

e

☒ Solicitation of non-government grants

b

☒ Internet and email solicitations

f

☒ Solicitation of government grants

c

☒ Phone solicitations

g

☒ Special fundraising events

d

☒ In-person solicitations

2a

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

b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 DEVELOPMENT RESOURCES INC 1820 N FORT MYER DR SUITE 702 ARLINGTON, VA 22209	Feasibility study		No	0	40,000	-40,000
2 RUFFALO NOEL LEVITZ 1025 KIRKWOOD Parkway SW CEDAR RAPIDS, IA 52404	Consulting and telefundraising		No	637,512	601,050	36,462
3 CAMPBELL & COMPANY 1 EAST WACKER DR SUITE 2100 CHICAGO, IL 60601	Consulting		No	0	20,000	-20,000
4 THE STELTER COMPANY 10435 NEW YORK AVE DES MOINES, IA 50322	Consulting		No	0	60,199	-60,199
5 BENTZ WHALEY FLESSNER AND ASSOCIATES INC 2461 S CLARK ST SUITE 910 ARLINGTON, VA 22203	Feasibility study		No	0	99,568	-99,568
6						
7						
8						
9						
10						
Total				637,512	820,817	-183,305

3

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d)
		<u>Dinner</u> (event type)	<u>Golf Tournament</u> (event type)	<u>2</u> (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	366,100	60,505	47,883	474,488
	2 Less Contributions	297,930	52,900	25,223	376,053
	3 Gross income (line 1 minus line 2)	68,170	7,605	22,660	98,435
Direct Expenses	4 Cash prizes				
	5 Noncash prizes		689	2,722	3,411
	6 Rent/facility costs		21,988	8,135	30,123
	7 Food and beverages	91,524		18,874	110,398
	8 Entertainment	50,718			50,718
	9 Other direct expenses	35,000		1,531	36,531
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				231,181
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-132,746

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

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

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

b If "No," explain _____

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

b If "Yes," explain _____

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

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

13 Indicate the percentage of gaming activity conducted in

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

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

Name ►

Address ►

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

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

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

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

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

Return Reference	Explanation
Schedule G, Part I, Line 2b	FUNDRAISER AGREEMENTS THAT PROVIDE BOTH PAYMENTS FOR SERVICES AND PAYMENTS FOR EXPENSES REQUIRE EXPENSES TO BE DOCUMENTED WITH RECEIPTS THERE WERE NO AGREEMENTS WITH FUNDRAISERS EXCLUSIVELY FOR EXPENSES

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
The George Washington University

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

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

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

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number
53-0196584

Part I

General Information on Grants and Assistance

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

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 150

3 Enter total number of other organizations listed in the line 1 table 6

Part III 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 assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) Financial Assistance in the form of University-Awarded Grants, Scholarships, and Allocations	11000	305,929,000			
(2) Financial Assistance in the form of stipends, prizes, and awards	3000	16,940,000			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
Schedule I, Part II GW HILLEL	IN RECOGNITION OF THE SERVICES THAT GW HILLEL PROVIDES TO STUDENTS AT GW, GW AND GW HILLEL CONDUCTED A JOINT FUNDRAISING CAMPAIGN FOR THE RENOVATION, MAINTENANCE, FURNISHINGS, AND ENDOWMENT OF GW HILLEL'S FACILITIES LOCATED ON THE GW CAMPUS. ALL RESTRICTED CONTRIBUTIONS RECEIVED BY GW UNDER THE CAMPAIGN ARE AWARDED AS GRANTS TO GW HILLEL UNDER THE TERMS OF THE JOINT FUNDRAISING AGREEMENT.
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	GRANTS AND OTHER ASSISTANCE TO GOVERNMENT AND ORGANIZATIONS. GW MAINTAINS A FORMAL SUBRECIPIENT MONITORING POLICY WHICH APPLIES TO ALL SUBAWARDS ISSUED UNDER ALL SPONSORED PROJECTS AWARDED. THE POLICY APPLIES TO SUBRECIPIENTS WHO ARE ASSIGNED RESPONSIBILITY FOR CONDUCTING A PORTION OF GW'S SPONSORED PROJECT WORK. GW IS RESPONSIBLE TO THE SPONSOR FOR MANAGEMENT OF FUNDS AND FOR MEETING PERFORMANCE GOALS. GW HAS INTERNAL PROCEDURES FOR ASSESSING THE SUBRECIPIENT ORGANIZATION'S FINANCIAL STATUS AND INTERNAL CONTROLS IN ORDER TO DETERMINE WHETHER TO PROCEED WITH THE SUBRECIPIENT. BASED ON THE ASSESSMENT, TERMS AND CONDITIONS ARE ESTABLISHED IN THE SUBAWARD AGREEMENT TO BE CONSISTENT WITH THE LEVEL OF PERCEIVED RISK AND IDENTIFY SPECIFIC MONITORING ACTIVITIES. GW UNDERTAKES CERTAIN ACTIVITIES TO MONITOR SUBRECIPIENTS TO PROVIDE REASONABLE ASSURANCE THAT THEY ADMINISTER, PERFORM AND ARE IN COMPLIANCE WITH APPLICABLE LAWS, REGULATIONS, TERMS AND CONDITIONS OF THE PRIME AWARD AND GW'S SUBAWARD AGREEMENTS. RISK ASSESSMENT AND AWARD MONITORING PROCEDURES ARE DEFINED BY ROLES AND RESPONSIBILITIES AT GW AND INCLUDE, BUT ARE NOT LIMITED TO, THE PRINCIPAL INVESTIGATOR, DEPARTMENT ADMINISTRATORS, CENTRAL RESEARCH, AND FINANCIAL OFFICES WITHIN GW. GW HILLEL ONLY - THE ORGANIZATION PRESENTED PLANS FOR THE RENOVATION, MAINTENANCE, FURNISHING, AND ENDOWMENT OF GW HILLEL'S FACILITIES LOCATED ON THE GW CAMPUS. DETAILS, SUCH AS BUDGETS, ARE PROVIDED TO GW ON REQUEST IN CONNECTION WITH ITS REVIEW. A REPORT WILL BE PROVIDED TO GW UPON COMPLETION OF THE RENOVATION. MEDICAL FACULTY ASSOCIATES, INC. JOINT FUNDRAISING CAMPAIGN ONLY - MFA AGREES TO SPEND PHILANTHROPICALLY RAISED FUNDS CONSISTENT WITH DONOR INTENT AND TO PROVIDE ANNUAL REPORTS ON THE USE OF EXPENSED FUNDS AND RELATED DETAIL TO GW. HOME FOR THE HATCHET JOINT FUNDRAISING CAMPAIGN ONLY - GW AND HOME FOR THE HATCHET AGREE TO COLLABORATE ON THE JOINT FUNDRAISING EFFORTS. IN DOCUMENTATION OF ITS USE OF THE GRANT FUNDS, HOME FOR THE HATCHET AGREES TO SUBMIT ITS BUDGET, FINANCIAL STATEMENTS, AND MOST RECENT FORM 990 FILED WITH THE IRS TO GW ON AN ANNUAL BASIS. GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS. THE FINANCIAL AID OFFICE KEEPS RECORDS ON ITS INTEGRATED SOFTWARE SYSTEM THAT SUBSTANTIATES THE AMOUNT GRANTED TO EACH STUDENT, THE ELIGIBILITY CRITERIA FOR EACH STUDENT, AND THE SELECTION PROCESS USED IN AWARDING ASSISTANCE. THE UNIVERSITY'S GRANTS AND OTHER ASSISTANCE ARE INITIALLY CREDITED DIRECTLY TO THE STUDENT'S ACCOUNT IN ITS INTEGRATED SOFTWARE SYSTEM IN ORDER TO PAY FOR TUITION, FEES, ROOM AND BOARD, AND/OR TEXTBOOK CHARGES. A CHANGE IN ENROLLMENT STATUS RESULTS IN WEEKLY REPORTS THAT FINANCIAL AID STAFF REVIEW FOR POSSIBLE ADJUSTMENTS. THE BALANCE OF AID IN EXCESS OF THE ABOVE CHARGES CAN BE REFUNDED TO THE STUDENT FOR LIVING EXPENSES. THE SYSTEM CHECKS THAT THE STUDENT IS STILL ENROLLED BEFORE ISSUING THE REFUND. AT THE GRADUATE LEVEL, AWARDS ARE INITIATED, CHECKED TO ENSURE ELIGIBILITY AND APPROVED BEFORE AWARDS ARE OFFERED TO A STUDENT AND A STUDENT MUST ACCEPT THE AWARD BEFORE PAYMENT PROCESSES BEGIN. QUALIFICATIONS FOR ENDOWMENT AWARDS ARE CHECKED AND THE MINIMUM REQUIREMENTS FOR AWARDS ARE CHECKED FOR EVERY ENDOWMENT Awardee. PAPERWORK IS KEPT IN THE OFFICE FOR THREE YEARS AND THE AWARD LETTERS ELECTRONICALLY FOR FIVE YEARS. OUR ELECTRONIC SYSTEMS, BANNER AND EAS, HAVE THE RECORDS OF PAYMENTS.

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 53-0196584
Name: The George Washington University

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACADEMY HEALTH 1150 17TH ST STE 600 WASHINGTON, DC 20036	52-1260918	501(C)(3)	65,000				subaward
ACKCO INC 1616 E INDIAN SCHOOL RD PHOENIX, AZ 85004	46-0316645		947,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALBERT EINSTEIN COLLEGE OF MEDICINE INC 111 East 210th Street Bronx, NY 10467	47-2209056	501(C)(3)	1,363,000				subaward
ALLIANCE FOR SUSTAINABLE ENERGY LLC 15013 Denver West Prkwy Golden, CO 80401	26-1939342	501(C)(3)	34,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN UNIVERSITY 4400 MASS AVE NW WASHINGTON, DC 20016	53-0196546	501(C)(3)	12,000				subaward
ANNE ARUNDEL COMMUNITY COLLEGE 101 College Prkwy Arnold, MD 21012	52-0905706	MARYLAND	83,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ATLANTA RESEARCH & EDU FOUNDATION INC 4 Executive Park East NE Atlanta, GA 30329	58-1857346	501(C)(3)	646,000				subaward
BAYLOR COLLEGE OF MEDICINE PO Box 301207 DALLAS, TX 753031207	74-1613878	501(C)(3)	854,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BAYLOR RESEARCH INSTITUTE 3310 LIVE OAK STREET DALLAS, TX 75204	75-1921898	501(C)(3)	425,000				subaward
BECKMAN RSRCH INST OF THE CITY OF HOPE 1500 E Duarte Rd Duarte, CA 91010	95-3432210	501(C)(3)	103,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETH ISRAEL DEACONESS MED CTR 330 BROOKLINE AVE BOSTON, MA 02215	04-2103881	501(C)(3)	616,000				subaward
BOARD OF REGENTS OF UNIV OF WISCONSIN SYSTEM OFC OF RSCH SP MILWAUKEE, WI 532780538	39-6006492	WISCONSIN	412,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOSTON CHILDRENS HOSPITAL PO Box 414413 BOSTON, MA 022414413	04-2774441	501(C)(3)	87,000				subaward
BOSTON MEDICAL CENTER CORPORATION 660 HARRISON AVE BOSTON, MA 02118	04-3314093	501(C)(3)	20,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOSTON UNIVERSITY PO Box 28763 New York, NY 10087	04-2103547	501(C)(3)	76,000				subaward
BRANDEIS UNIVERSITY 415 South Street Waltham, MA 02454	04-2103552	501(C)(3)	49,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHAM YOUNG UNIVERSITY A-261 ASB Provo, UT 84602	87-0217280	501(C)(3)	31,000				subaward
CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE CLEVELAND, OH 441067037	34-1018992	501(C)(3)	1,620,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CERNER CORPORATION 2800 ROCKCREEK PARKWAY KANSAS CITY, MO 64117	43-1196944		959,000				subaward
CHILD TRENDS INCORPORATED 7315 WISCONSIN AVE BETHESDA, MD 208143666	13-2982969	501(C)(3)	328,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDRENS HOSP OF PHILADELPHIA LOCKBOX 1457 PHILADELPHIA, PA 191781457	23-1352166	501(C)(3)	377,000				subaward
CHILDRENS HOSPITAL LOS ANGELES 4650 SUNSET BLVD MAILSTOP 97 LOS ANGELES, CA 90027	95-1690977	501(C)(3)	536,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDRENS RESEARCH INSTITUTE 801 Roeder Road Silver Spring, MD 20910	52-1654453	501(C)(3)	1,406,000				subaward
CINCINNATI CHILDRENS HOSPITAL 3333 BURNET AVE CINCINNATI, OH 45229	31-0833936	501(C)(3)	97,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBIA UNIVERSITY 615 WEST 131ST ST RM 458 NEW YORK, NY 10027	13-5598093	501(C)(3)	2,266,000				subaward
CORNELL UNIVERSITY PO Box 22 ITHACA, NY 14851	15-0532082	501(C)(3)	12,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CURATORS OF THE UNIV OF MISSOURI PO Box 807012 KANSAS CITY, MO 641807012	43-6003859	Missouri	5,000				subaward
DAVIDSON COLLEGE Box 7149 Davidson, NC 28035	56-0529961	501(C)(3)	10,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DREXEL UNIV 1505 RACE STREET MS 1056 PHILADELPHIA, PA 19102	23-1352630	501(C)(3)	72,000				subaward
DUKE UNIVERSITY 2200 W MAIN STREET DURHAM, NC 27705	56-0532129	501(C)(3)	613,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
E CONSTRUCT USA LLC 11823 ARBOR STREET OMAHA, NE 68144	27-0538416		64,000				subaward
ELIZABETH GLASER PEDIATRIC AIDS 1140 CONNECTICUT AVE NW STE 200 WASHINGTON, DC 20036	95-4191698	501(C)(3)	35,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMORY UNIVERSITY PO Box 935084 ATLANTA, GA 31193	58-0566256	501(C)(3)	358,000				subaward
ERI STE 210 2701 INTERNATIONAL LN MADISON, WI 537043126	39-1681074	501(C)(3)	193,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Families USA 1225 NEW YORK AVE NW STE 800 WASHINGTON, DC 20005	52-1632583	501(C)(3)	31,000				subaward
FAMILY AND MED COUNSELING SERV INC 2041 MARTIN LUTHER KING JR AVE WASHINGTON, DC 20020	52-1073362	501(C)(3)	25,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET MIAMI, FL 33199	65-0177616	FLORIDA	5,000				subaward
GENERAL ELECTRIC COMPANY 1 REASERCH CIRCLE NISKAYUNA, NY 12309	14-0689340		499,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GENERAL HOSPITAL CORPORATION PO Box 3829 BOSTON, MA 022413829	04-2697983	501(C)(3)	1,674,000				subaward
GEORGE MASON UNIVERSITY 4400 UNIVERSITY DR FAIRFAX, VA 220304444	54-0836354	VIRGINIA	139,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GEORGETOWN UNIVERSITY BOX 571164 WASHINGTON, DC 20057	53-0196603	501(C)(3)	577,000				subaward
GEORGIA STATE UNIVERSITY PO Box 3999 Atlanta, GA 30302	58-6002050	Georgia	53,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
H LEE MOFFITT CANCER CENTER AND RESEARCH INSTITUTE INC PO Box 742801 Atlanta, GA 303742801	59-2451713	501(C)(3)	243,000				subaward
HARVARD UNIVERSITY 677 Huntington Avenue Boston, MA 02115	04-2103580	501(C)(3)	97,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTHPARTNERS INSTITUTE PO Box 1524 MS 23301A Bloomington, MN 554401524	41-1670163	501(C)(3)	1,606,000				subaward
HILLELL AT THE GEORGE WASHINGTON UNIVERSITY INC 8170 33RD AVE S WASHINGTON, DC 20037	52-6081729	501(C)(3)	438,000				Joint Fundraising Campaign

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HOME FOR THE HATCHET INC 2300 H STREET NW WASHINGTON, DC 20016	45-1539404	501(C)(3)	5,000				Joint Fundraising Campaign
HOWARD UNIVERSITY 525 BRYANT ST NW WASHINGTON, DC 20059	53-0204707	501(C)(3)	164,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HS&S 920 ROCKHOLD DR ASHEVILLE, NC 288042917	77-0370372		49,000				subaward
INDIANA UNIVERSITY PO Box 78000 DETROIT, MI 482780867	35-6001673	INDIANA	401,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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INSTITUTE FOR CLINICAL RESEARCH PO Box 29545 WASHINGTON, DC 20017	52-1336656	501(C)(3)	336,000				subaward
JOHNS HOPKINS UNIVERSITY 12529 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693	52-0595110	501(C)(3)	1,049,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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JOSLIN DIABETES CENTER INC ONE JOSLIN PLACE BOSTON, MA 022155397	04-2203836	501(C)(3)	273,000				subaward
KAISER FOUNDATION RESEARCH INSTITUTE 1800 HARRISON STREET 16TH FLOOR OAKLAND, CA 946123466	94-1105628	501(C)(3)	1,351,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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KENNEDY KRIEGER RESEARCH INST 707 NORTH BROADWAY BALTIMORE, MD 21205	52-1524965	501(C)(3)	119,000				subaward
LA CLINICA DEL PUEBLO INC 2831 15TH ST NW WASHINGTON, DC 20009	52-1942551	501(C)(3)	44,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA STATE UNIVERSITY 6400 PERKINS ROAD BATON ROUGE, LA 708032901	72-6000848	LOUISIANA	259,000				subaward
MAGEE WOMENS RESEARCH INST 3339 WARD ST PITTSBURGH, PA 15213	25-1462312	501(C)(3)	198,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MARSHFIELD CLINIC RSCH INSTITUTE 1000 N OAK AVE MARSHFIELD, WI 54449	39-0452970	501(C)(3)	16,000				subaward
MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	71,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MAYO CLINIC JACKSONVILLE 4500 SAN PABLO RD JACKSONVILLE, FL 322241865	59-3337028	501(C)(3)	136,000				subaward
MCLEAN HOSPITAL PO Box 3951 BOSTON, MA 022413951	04-2697981	501(C)(3)	48,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDICAL FACULTY ASSOCIATES INC 1 2021 K ST NW STE 600 WASHINGTON, DC 20052	52-2220700	501(C)(3)	750,000				Joint Fundraising Campaign
MEDICAL FACULTY ASSOCIATES INC 2 2021 K ST NW STE 600 WASHINGTON, DC 20052	52-2220700	501(C)(3)	3,041,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEDSTAR HEALTH RESEARCH INSTITUTE PO Box 418223 BOSTON, MA 02241	52-6056274	501(C)(3)	1,510,000				subaward
METRO HEALTH INC 1012 14TH STREET NW WASHINGTON, DC 20005	52-1556535	501(C)(3)	95,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MIAMI UNIVERSITY 120 UPHAM HALL Oxford, OH 45056	31-6402089	FLORIDA	78,000				subaward
MICHIGAN STATE UNIVERSITY 426 AUDITORIUM ROAD ROOM 2 EAST LANSING, MI 48824	38-2015695	Michigan	28,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MICHIGAN TECHNOLOGICAL UNIVERSITY 1400 TOWNSEND DR HOUGHTON, MI 499311200	38-6005955	Michigan	44,000				subaward
MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE L LEVY PLACE NEW YORK, NY 10029	13-6171197	501(C)(3)	540,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NEMOURS CHILDRENS CLINIC 10140 CENTURION PKWY NORTH JACKSONVILLE, FL 322560532	59-0634433	501(C)(3)	11,000				subaward
NEW YORK UNIVERSITY 726 BROADWAY NEW YORK, NY 10003	13-5562308	501(C)(3)	126,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK UNIVERSITY MEDICAL CENTER 545 First Avenue New York, NY 10016	13-3971298	501(C)(3)	132,000				subaward
NORTH CAROLINA STATE UNIVERSITY Campus Box 7214 Raleigh, NC 27695	56-6000756	NORTH CAROLINA	14,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NORTHERN ARIZONA UNIVERSITY 1395 S Knoles Drive Flagstaff, AZ 86011	74-2579628	Arizona	5,000				subaward
NORTHERN MICHIGAN UNIVERSITY 1401 PRESQUE ISLE AVE MARQUETTE, MI 49855	38-6029206	MICHIGAN	41,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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NORTHERN VA COMMUNITY COLLEGE 3924 Pender Drive Fairfax, VA 22030	54-1268263	Virginia	18,000				subaward
NORTHWESTERN UNIVERSITY 633 CLARK ST RM G547 EVANSTON, IL 60208	36-2167817	501(C)(3)	1,029,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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OHIO STATE UNIV RSCH FOUNDATION 1960 KENNY RD COLUMBUS, OH 432101063	31-6401599	501(C)(3)	331,000				subaward
OHIO STATE UNIVERSITYOARDC 901 WOODY HAYES DR COLUMBUS, OH 43210	31-6025986	Ohio	111,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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OREGON HEALTH SCIENCES UNIVERSITY 0690 SW BANFROFT STREET PORTLAND, OR 97239	93-1176109	OREGON	534,000				subaward
PACIFIC HEALTH RESEARCH & EDUCATION INSTITUTE 3375 KOAPAKA STREET HONOLULU, HI 96819	99-0312283	501(C)(3)	504,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PENNSYLVANIA STATE UNIVERSITY 227 BEAVER AVE STE 401 STATE COLLEGE, PA 16802	24-6000376	PENNSYLVANIA	21,000				subaward
PRINCE GEORGES COMMUNITY COLLEGE 301 LARGO ROAD LARGO, MD 207742199	52-1429938	MARYLAND	58,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PROJECT ON GOVERNMENT OVERSIGHT INC 1100 G ST NW STE 500 WASHINGTON, DC 200057433	52-1739443	501(C)(3)	5,000				subaward
PROTEA BIOSCIENCES INC 955 HARTMAN RUN ROAD MORGANTOWN, WV 26505	52-2328803		24,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PROVIDENCE HEALTH FOUNDATION 1150 VARNUM STREET NE WASHINGTON, DC 200172180	52-1275583	501(C)(3)	113,000				subaward
QUALITY INSIGHTS INC 3001 CHESTERFIELD AVE CHARLESTON, WV 253041126	55-0539692	501(C)(3)	25,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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REACHING ALL HIV MUSLIMS IN AMERICA 1320 19th Street NW Washington, DC 20036	46-1586946	501(C)(3)	42,000				subaward
REGENTS OF UNIVERSITY OF CALIFORNIA 1125 Murphy Hall Los Angeles, CA 90095	94-3067788	CALIFORNIA	66,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RESEARCH FOUNDATION OF SUNY PO Box 9 ALBANY, NY 122010009	14-1368361	501(C)(3)	1,015,000				subaward
RICE UNIVERSITY PO Box 1892 Houston, TX 77251	74-1109620	501(C)(3)	6,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SEATTLE CHILDREN'S HOSPITAL 1900 Ninth Ave Seattle, WA 98101	91-0564748	501(C)(3)	382,000				subaward
SEATTLE INSTITUTE FOR BIOMEDICAL AND CLINICAL RESEARCH 1100 OLIVE WAY SEATTLE, WA 981011857	91-1452438	501(C)(3)	501,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SOUTH FLORIDA VA FOUNDATION FOR RESEARCH AND EDUCATION INC 1201 NW 16TH STREET MIAMI, FL 33125	65-0207903	501(C)(3)	107,000				subaward
SOUTHERN ILLINOIS UNIVERSITY 900 South Normal Avenue Carbondale, IL 62901	37-6005961	ILLINOIS	328,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SRI INTERNATIONAL PO Box 2767 MENLO PARK, CA 940252767	94-1160950	501(C)(3)	1,243,000				subaward
ST LOUIS UNIVERSITY 3700 WEST PINE MALL ST LOUIS, MO 63108	43-0654872	501(C)(3)	254,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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STANFORD UNIVERSITY PO Box 44253 SAN FRANCISCO, CA 941444253	94-1156365	501(C)(3)	31,000				subaward
TEMPLE UNIVERSITY PO Box 824242 PHILADELPHIA, PA 191824242	23-1365971	501(C)(3)	82,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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THE DIAN FOSSEY GORILLA FUND INTL INC 800 CHEROKEE AVE SE ATLANTA, GA 30315	52-1118866	501(C)(3)	32,000				subaward
THE GENEVA FOUNDATION STE 600 917 PACIFIC AVE TACOMA, WA 984024437	91-1593913	501(C)(3)	17,000				subaward

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THE UNIVERSITY OF MONTANA 32 CAMPUS DRIVE MISSOULA, MT 59812	81-6001713	MONTANA	46,000				subaward
TRANSCEN INC 401 N Washington Street Rockville, MD 20850	52-1487462	501(C)(3)	49,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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TUFTS NEW ENGLAND MED CENTER 800 WASHINGTON ST BOX 453 BOSTON, MA 02111	04-3400617	501(C)(3)	14,000				subaward
TULANE UNIVERSITY 800 COMMERCE RD EAST STE 203 HARAHAN, LA 70123	72-0423889	501(C)(3)	54,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNITED MEDICAL CENTER 1310 SOUTHERN AVE SE WASHINGTON, DC 20032	27-3311893	501(C)(3)	25,000				subaward
UNITY HEALTH CARE INC 1220 12TH ST SE WASHINGTON, DC 20003	52-1572431	501(C)(3)	228,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIV OF CALIFORNIA BERKELEY 2195 HEARST AVENUE BERKELEY, CA 947201103	94-6002123	California	66,000				subaward
UNIV OF TEXAS SOUTHWESTERN PO Box 841765 DALLAS, TX 752841765	75-6002868	TEXAS	668,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIV TEXAS HEALTH SCIENCE CTR 7703 FLOYD CURL DRIVE SAN ANTONIO, TX 782293900	74-1586031	TEXAS	2,185,000				subaward
UNIV TEXAS MEDICAL BRANCH AT GALVESTON 301 UNIVERSITY BLVD GALVESTON, TX 775555302	74-6000949	TEXAS	477,000				subaward

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UNIV TEXAS MEDICAL BRANCH IMH PO Box 660120 DALLAS, TX 752660120	74-6000949	TEXAS	61,000				subaward
UNIVERSITY OF ALABAMA BIRMINGHAM 1530 3RD AVE SOUTH BIRMINGHAM, AL 352940106	63-6005396	ALABAMA	1,090,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIVERSITY OF ALASKA PO Box 141628 Anchorage, AK 99514	92-6000147	Alaska	10,000				subaward
UNIVERSITY OF ARIZONA 1303 E UNIVERSITY BLVD TUCSON, AZ 85719	74-2652689	ARIZONA	196,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIVERSITY OF CALIFORNIA LOS ANGELES BOX 957089 1125 MURPHY HALL LOS ANGELES, CA 90095	95-6006143	CALIFORNIA	286,000				subaward
UNIVERSITY OF CALIFORNIA RIVERSIDE 899 UNIVERSITY AVENUE RIVERSIDE, CA 92521	95-6006142	CALIFORNIA	52,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DR MC-0954 LA JOLLA, CA 92093	95-6006144	CALIFORNIA	90,000				subaward
University of California San Francisco 3333 California Street San Francisco, CA 94143	94-6036493	501(C)(3)	114,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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UNIVERSITY OF CHICAGO 6054 SOUTH DREXEL AVE CHICAGO, IL 60637	36-2177139	501(C)(3)	6,000				subaward
UNIVERSITY OF CINCINNATI PO Box 932641 CLEVELAND, OH 44193	31-6000989	OHIO	578,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF COLORADO OFFICE OF GRANTS CONTRACTS F428 DENVER, CO 802910238	84-6000555	COLORADO	1,418,000				subaward
UNIVERSITY OF DELAWARE 116 STUDENT SERVICES BLDG NEWARK, DE 19716	51-6000297	Delaware	74,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF GEORGIA 310 East Campus Road Athens, GA 30602	58-6001998	GEORGIA	24,000				subaward
UNIVERSITY OF HOUSTON CBF PO Box 988 HOUSTON, TX 77001	74-6001399	TEXAS	15,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ILLINOIS 28392 NETWORK PLACE CHICAGO, IL 606731283	36-4102592	ILLINOIS	40,000				subaward
UNIVERSITY OF IOWA B5 JESSUP HALL IOWA CITY, IA 52242	42-6004813	IOWA	678,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MARYLAND RM 4101 CHESAPEAKE BLDG COLLEGE PARK, MD 207423141	52-6002033	MARYLAND	34,000				subaward
UNIVERSITY OF MASSACHUSETTS 2ND FLOOR ROOM 02/80-93 BOSTON, MA 021253393	04-3167352	MASSACHUSETTS	177,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MIAMI PO Box 405803 ATLANTA, GA 303845803	59-0624458	501(C)(3)	540,000				subaward
UNIVERSITY OF MICHIGAN 3003 S State St Ann Arbor, MI 48109	38-6006309	MICHIGAN	794,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MINNESOTA MCNAMARA ALUMNI CENTER MINNEAPOLIS, MN 554552070	41-6007513	MINNESOTA	2,856,000				subaward
UNIVERSITY OF NEBRASKA 312 N 14TH ST ALEXANDER WEST LINCOLN, NE 685880431	47-0491233	NEBRASKA	853,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NEW MEXICO MSC09 5225 1 UNIV OF NEW MEXICO ALBUQUERQUE, NM 871315041	85-6000642	NEW MEXICO	639,000				subaward
UNIVERSITY OF NORTH CAROLINA 104 AIRPORT DR STE 200 CB1350 CHAPEL HILL, NC 275991350	56-6001393	NORTH CAROLINA	846,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NORTHERN IOWA 1226 W 27TH ST CEDAR FALLS, IA 50614	42-6004333	Iowa	22,000				subaward
UNIVERSITY OF OKLAHOMA ROOM 228 PO Box 26901 OKLAHOMA CITY, OK 73190	73-6017987	OKLAHOMA	351,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST RM P-221 PHILADELPHIA, PA 191046205	23-1876142	501(C)(3)	682,000				subaward
UNIVERSITY OF PITTSBURGH PO Box 371220 PITTSBURGH, PA 152517220	25-0965591	501(C)(3)	645,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTHERN CALIFORNIA 3500 South Figueroa Street Los Angeles, CA 90089	95-1642394	501(C)(3)	229,000				subaward
UNIVERSITY OF TEXAS AT AUSTIN PO Box 7159 AUSTIN, TX 78713	74-6000203	TEXAS	5,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF UTAH 30 NORTH 1900 EAST SALT LAKE CITY, UT 84132	87-6000525	UTAH	879,000				subaward
UNIVERSITY OF VIRGINIA PO Box 400195 CHARLOTTESVILLE, VA 229044195	54-6001796	VIRGINIA	281,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WASHINGTON 12455 COLLECTIONS DR CHICAGO, IL 60693	91-6001537	WASHINGTON	1,026,000				subaward
UNIVERSITY OF WISCONSIN OFF OF RESEARCH SPONSORED MILWAUKEE, WI 532780538	39-1805963	WISCONSIN	488,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANDERBILT UNIVERSITY MEDICAL CENTER Dept 1236 PO Box 121236 Dallas, TX 75312	35-2528741	501(C)(3)	565,000				subaward
VETERANS MEDICAL RESEARCH FOUNDATION OF SD 3350 LA JOLLA VILLAGE DRIVE SAN DIEGO, CA 92161	33-0189397	501(C)(3)	537,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA COMMONWEALTH UNIVERSITY PO Box 843039 RICHMOND, VA 232843039	54-6001758	VIRGINIA	34,000				subaward
WAKE FOREST UNIVERSITY HEALTH MEDICAL CTR BLVD WINSTONSALEM, NC 27157	22-3849199	501(C)(3)	379,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON AND LEE UNIVERSITY 204 WEST WASHINGTON ST LEXINGTON, VA 24450	54-0505977	501(C)(3)	53,000				subaward
WASHINGTON UNIVERSITY 4444 FOREST PARK BLVD ST LOUIS, MO 63108	43-0653611	501(C)(3)	499,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST CHESTER UNIVERSITY OF PA 201 CARTER DRIVE WEST CHESTER, PA 193830001	23-2417773	PENNSYLVANIA	13,000				subaward
WHITMAN WALKER HEALTH 1701 14TH ST NW WASHINGTON, DC 20009	52-1122122	501(C)(3)	257,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN & INFANTS HOSPITAL 101 DUDLEY ST PROVIDENCE, RI 029052499	05-0258937	501(C)(3)	552,000				subaward
WORKCRED INC 1899 L Street NW 11th Floor Washington, DC 20036	47-1467778	501(C)(3)	114,000				subaward

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY 155 WHITNEY AVENUE NEW HAVEN, CT 065208837	06-0646973	501(C)(3)	1,054,000				subaward

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization The George Washington University	Employer identification number 53-0196584
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Part I Questions Regarding Compensation

	Yes	No									
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use										
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence										
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees										
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)										
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b Yes										
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes										
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee					
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract										
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study										
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee										
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: <table border="0"> <tr> <td>a Receive a severance payment or change-of-control payment?</td> <td>4a Yes</td> <td></td> </tr> <tr> <td>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</td> <td>4b Yes</td> <td></td> </tr> <tr> <td>c Participate in, or receive payment from, an equity-based compensation arrangement?</td> <td>4c</td> <td>No</td> </tr> </table> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	a Receive a severance payment or change-of-control payment?	4a Yes		b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes		c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No		
a Receive a severance payment or change-of-control payment?	4a Yes										
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes										
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No									
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.											
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <table border="0"> <tr> <td>a The organization?</td> <td>5a Yes</td> <td></td> </tr> <tr> <td>b Any related organization?</td> <td>5b</td> <td>No</td> </tr> </table> If "Yes," on line 5a or 5b, describe in Part III.	a The organization?	5a Yes		b Any related organization?	5b	No					
a The organization?	5a Yes										
b Any related organization?	5b	No									
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <table border="0"> <tr> <td>a The organization?</td> <td>6a</td> <td>No</td> </tr> <tr> <td>b Any related organization?</td> <td>6b</td> <td>No</td> </tr> </table> If "Yes," on line 6a or 6b, describe in Part III.	a The organization?	6a	No	b Any related organization?	6b	No					
a The organization?	6a	No									
b Any related organization?	6b	No									
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7 Yes										
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No									
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9										

For 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.

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

See Additional Data Table

Schedule J (Form 990) 2017

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 1a First-class or charter travel	FIRST-CLASS TRAVEL WAS PROVIDED TO one KEY EMPLOYEE as a medical accommodation. THE BENEFIT WAS NOT TREATED AS TAXABLE COMPENSATION.
Schedule J, Part I, Line 1a Travel for companions	THE UNIVERSITY REIMBURSES REASONABLE AND NECESSARY BUSINESS TRAVEL EXPENSES FOR THE SPOUSES OF TWO OFFICERS. THE BENEFITS WERE TREATED AS TAXABLE COMPENSATION WHERE APPROPRIATE.
Schedule J, Part I, Line 1a Tax indemnification and gross-up payments	THE UNIVERSITY PROVIDED A GROSS-UP FOR A LIMITED TYPE OF PAYMENT TO three OFFICERS. THE BENEFITS WERE TREATED AS TAXABLE COMPENSATION.
Schedule J, Part I, Line 1a Housing allowance or residence for personal use	The University provided transitional housing assistance for the former President and housing allowance for one key employee. The benefit was treated as taxable compensation. Additionally, THE PRESIDENT RESIDES IN ON-CAMPUS HOUSING AS A CONDITION OF HIS EMPLOYMENT FOR THE CONVENIENCE OF THE UNIVERSITY. THE RESIDENCE IS USED FOR UNIVERSITY-RELATED BUSINESS AND ENTERTAINMENT PURPOSES ON A REASONABLE AND CONTINUAL BASIS. THE BENEFIT WAS NOT TREATED AS TAXABLE COMPENSATION.
Schedule J, Part I, Line 1a Health or social club dues or initiation fees	CLUB DUES WERE PAID ON BEHALF OF ONE OFFICER. THE MEMBERSHIPS WERE USED PREDOMINANTLY FOR UNIVERSITY BUSINESS PURPOSES. THE BENEFIT WAS NOT TREATED AS TAXABLE COMPENSATION.
Schedule J, Part I, Line 4a Severance or change-of-control payment	BARBARA PORTER RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$412,000. MICHAEL LONERGAN RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$650,000. RAKESH KUMAR RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$828,150.
Schedule J, Part I, Line 4b Supplemental nonqualified retirement plan	IN RECOGNITION OF THE FACT THAT THE UNIVERSITY'S CONTRIBUTIONS ON BEHALF OF AN EMPLOYEE TO ITS QUALIFIED RETIREMENT PLAN ('401(A) PLAN') ARE LIMITED BY THE INTERNAL REVENUE CODE'S CAP ON AN EMPLOYEE'S COMPENSATION (\$270,000 FOR 2017) AND THE CONTRIBUTION LIMITS FOR DEFINED CONTRIBUTION PLANS, THE UNIVERSITY PROVIDES ALL EMPLOYEES WHO PARTICIPATE IN THE 401(A) PLAN AND WHO EARN COMPENSATION IN EXCESS OF THE CAP WITH CONTRIBUTIONS TO A NONQUALIFIED DEFERRED COMPENSATION PLAN ('457(F) RESTORATION PLAN') EQUAL TO THE DIFFERENCE BETWEEN THE BENEFIT THE INDIVIDUAL WOULD HAVE RECEIVED UNDER THE 401(A) PLAN IF NO COMPENSATION OR CONTRIBUTION LIMITS APPLIED AND THE AMOUNT ACTUALLY ACCRUED UNDER THE 401(A) PLAN, LESS ANY EMPLOYER CONTRIBUTION TO THE GEORGE WASHINGTON UNIVERSITY ELIGIBLE DEFERRED COMPENSATION PLAN. THE AMOUNTS REPORTED IN THIS SECTION ARE ALREADY INCLUDED IN THE COMPENSATION REPORTED IN SCHEDULE J, PART II. Steven Knapp \$28,881 Louis H. Katz \$39,298 Forrest Maltzman \$24,500 Beth Nolan \$29,221 Jeffrey S. Akman \$54,447 Leo M. Chalupa \$19,668 Lynn Goldman \$22,586 Rakesh Kumar \$1,859 Thomas A. Mazzuchi \$34,666 Shahram Sarkani \$69,712 Paul Schiff Berman \$12,948.
Schedule J, Part I, Line 5a Compensation contingent on revenues of the organization	TWO PERSONS LISTED ARE PAID ADDITIONAL COMPENSATION BASED ON THE GROSS REVENUE OF PROGRAMS. THE ADDITIONAL AMOUNT IS PAID FOR THE MANAGEMENT, DEVELOPMENT, AND PARTICIPATION IN EDUCATIONAL PROGRAMS.
Schedule J, Part I, Line 7 Non-fixed payments	GW OFFERED AN ANNUAL INCENTIVE COMPENSATION PLAN FOR CERTAIN SENIOR OFFICIALS. THE ANNUAL AWARD OPPORTUNITY IS CAPPED AT A PERCENTAGE OF THEIR SALARY. THE PLAN INCLUDES PROGRAMMATIC GOALS AND OBJECTIVES FOR THE YEAR THAT ARE SPECIFIC TO THEIR DEPARTMENT OR DIVISION, AS WELL AS THE INSTITUTIONAL GOALS. THE INSTITUTIONAL GOALS INCLUDE OPTIMIZATION OF ENROLLMENT AND TUITION REVENUES, GROWTH IN RESEARCH EXPENDITURES, AND GROWTH IN OVERALL FUNDRAISING AND FUNDRAISING SPECIFIC TO STUDENT AID. THE PLAN IS APPROVED ANNUALLY BY THE BOARD OF TRUSTEES' EXECUTIVE COMMITTEE (THE "COMMITTEE"). PRIOR TO THE PAYOUT, THE COMMITTEE REVIEWS THE PERFORMANCE OF SENIOR OFFICIALS ON THEIR GOALS AND OBJECTIVES AND AWARDS THE INCENTIVE PAYMENTS BASED ON COMPARABLE MARKET DATA. THE UNIVERSITY ALSO ENGAGES ITS INTERNAL AUDITORS TO PERFORM SPECIFIC PROCEDURES TO DETERMINE WHETHER: (1) MANAGEMENT'S REVIEW OF THE COMPENSATION PROCESS FOLLOWED INTERNAL POLICIES AND PROCEDURES, AND (2) CALCULATIONS AND SOURCE DATA USED TO DETERMINE THE INCENTIVE PAYMENTS COMPLY WITH THE PLAN.

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 53-0196584
Name: The George Washington University

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Steven Knapp	(i)	728,187	109,315	1,050,787	27,000	57,239	1,972,528	0
President -Ex Officio through 7/17	(ii)	0	0	0	0	0	0	0
1Thomas J LeBlanc	(i)	433,153	0	291,614	31,279	41,616	797,662	0
President - Ex Officio as of 8/17	(ii)	0	0	0	0	0	0	0
2Louis H Katz	(i)	838,728	126,445	90,582	27,000	9,148	1,091,903	0
EVP & Treasurer	(ii)	0	0	0	0	0	0	0
3Forrest Maltzman	(i)	486,862	64,376	43,742	27,000	20,201	642,181	0
Provost and EVP Academic Affairs	(ii)	0	0	0	0	0	0	0
4Beth Nolan	(i)	536,130	67,593	54,079	27,000	16,271	701,073	0
Sr VP & Gen Counsel	(ii)	0	0	0	0	0	0	0
5Jeffrey S Akman	(i)	788,988	103,847	76,011	27,000	8,461	1,004,307	0
VP for Health Affairs and Dean of SMHS	(ii)	0	0	0	0	0	0	0
6Leo M Chalupa	(i)	442,148	46,668	44,166	27,000	15,882	575,864	0
VP for Research	(ii)	0	0	0	0	0	0	0
7Aristide J Collins Jr	(i)	447,898	41,183	18,711	27,240	8,331	543,363	0
VP for Development and Alumni Relations through 1/2017	(ii)	0	0	0	0	0	0	0
8Loretta Early	(i)	148,800	0	645	12,500	4,094	166,039	0
Chief Information Officer as of 7/2017	(ii)	0	0	0	0	0	0	0
9Matthew Manfra	(i)	313,310	0	13,135	27,000	16,051	369,496	0
Interim VP for Development and Alumni Relations through 2/2018	(ii)	0	0	0	0	0	0	0
10Blake D Morant	(i)	469,062	0	188,191	50,074	16,058	723,385	0
Dean, Law School	(ii)	0	0	0	0	0	0	0
11Ben Vinson III	(i)	397,422	0	13,754	27,000	9,544	447,720	0
Dean, CCAS	(ii)	0	0	0	0	0	0	0
12Lynn R Goldman	(i)	475,258	0	47,330	27,000	45,185	594,773	0
Dean, Milken Institute School of Public Health	(ii)	0	0	0	0	0	0	0
13Rakesh Kumar	(i)	0	0	830,009	0	4,207	834,216	0
Professor through 6/2017	(ii)	0	0	0	0	0	0	0
14Thomas A Mazzuchi	(i)	590,538	0	56,230	27,000	15,700	689,468	0
Chair, Dept of Engineering	(ii)	0	0	0	0	0	0	0
15Barbara Porter	(i)	258,288	0	414,596	10,624	36,457	719,965	0
Chief of Staff through 7/2017	(ii)	0	0	0	0	0	0	0
16Shahram Sarkani	(i)	937,149	0	90,034	27,000	21,871	1,076,054	0
Director and Professor of EMSE	(ii)	0	0	0	0	0	0	0
17Marguente Barratt	(i)	289,865	0	6,695	27,000	22,688	346,248	0
Former Dean, CCAS	(ii)	0	0	0	0	0	0	0
18Paul Schiff Berman	(i)	396,737	0	31,914	27,000	21,925	477,576	0
Former Dean, Law School	(ii)	0	0	0	0	0	0	0
19Michael Lonergan	(i)	0	0	650,000	0	0	650,000	0
Former Men's Basketball Coach	(ii)	0	0	0	0	0	0	0

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

[illegible]

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

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Open to Public Inspection

Name of the organization
The George Washington University

Employer identification number
53-0196584

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

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

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

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						► \$						

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		116,017	Tuition remission	Employee benefit

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Sarah Binder	FAMILY MEMBER OF PROVOST AND EVP FOR ACADEMIC AFFAIRS	158,365	EMPLOYMENT		No
(2) Laura Dickinson	Family member of Former Dean, Law School	337,990	EMPLOYMENT		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2017

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Name of the organization
The George Washington University

Employer identification number
53-0196584

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	6		Other
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		56,781	Other
5 Clothing and household goods	X		7,899	Other
6 Cars and other vehicles				
7 Boats and planes	X	1	26,096	Other - FMV - Appraisal or estimate
8 Intellectual property				
9 Securities—Publicly traded	X	126	1,278,344	Other - AVG HI/LOW method on gift date
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies	X	1	446,500	Other - FMV - Appraisal or estimate
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Archival records)	X	26	1,460,263	Other - FMV - Appraisal or estimate
26 Other ► (Equipment)	X	8	325,051	Other - FMV - Appraisal or estimate
27 Other ► (Life insurance)	X	11	68,071	Other - Net Cash value
28 Other ► (Various)	X	69	346,276	Other - FMV - Appraisal or estimate

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

29

4

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II

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

Part II **Supplemental Information.**

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

Return Reference	Explanation
Schedule M, Part I, Line 33 SCH M, PART I, LINE 33	THERE ARE NO AMOUNTS REPORTED ON PART I, LINE 1, COLUMN (C) BECAUSE THE ORGANIZATION DOES NOT RECORD THESE AS CONTRIBUTIONS EXCEPT FOR CERTAIN COLLECTIONS
Schedule M, Part I EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	GW IS REPORTING THE NUMBER OF CONTRIBUTIONS

SCHEDULE O **(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service
Name of the organization
The George Washington University

Supplemental Information to Form 990 or 990-EZ

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.

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

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990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 1 Mission statement	<p>The George Washington University, an independent academic institution chartered by the Congress of the United States in 1821, dedicates itself to furthering human well-being. The University values a dynamic, student-focused community stimulated by cultural and intellectual diversity and built upon a foundation of integrity, creativity, and openness to the exploration of new ideas. The George Washington University, centered in the national and international crossroads of Washington, DC, commits itself to excellence in the creation, dissemination, and application of knowledge. To promote the process of lifelong learning from both global and integrative perspectives, the University provides a stimulating intellectual environment for its diverse students and faculty. By fostering excellence in teaching, the University offers outstanding learning experiences for full-time and part-time students in undergraduate, graduate, and professional programs in Washington, DC, the nation, and abroad. As a center for intellectual inquiry and research, the University emphasizes the linkage between basic and applied scholarship, insisting that the practical be grounded in knowledge and theory. The University acts as a catalyst for creativity in the arts, the sciences, and the professions by encouraging interaction among its students, faculty, staff, alumni, and the communities it serves. The George Washington University draws upon the rich array of resources from the National Capital Area to enhance its educational endeavors. In return, the University, through its students, faculty, staff, and alumni, contributes talent and knowledge to improve the quality of life in metropolitan Washington, DC.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part V, Line 7h	GW DID NOT FILE FORM 1098-C BECAUSE THE TAXPAYER IDENTIFICATION NUMBER WAS NOT PROVIDED PER THE FORM 1098-C INSTRUCTIONS, THE FILING IS NOT REQUIRED WITHOUT THE TAX IDENTIFICATION NUMBER

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	THE EXECUTIVE COMMITTEE, DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF TRUSTEES, SHALL, TO THE EXTENT NOT OTHERWISE SPECIFIED BY THE BOARD, POSSESS AND EXERCISE ALL OF THE POWERS AND DUTIES OF THE BOARD OF TRUSTEES, EXCEPT THE COMMITTEE SHALL HAVE NO POWER TO ELECT OR REMOVE TRUSTEES OR THE PRESIDENT, TO AMEND THESE BYLAWS OR A FACULTY CODE, OR TO APPROVE THE MERGER OF THE UNIVERSITY WITH ANY OTHER CORPORATION IN ADDITION, THE COMMITTEE SHALL HAVE RESPONSIBILITY FOR ESTABLISHING COMPENSATION POLICIES AND PRACTICES, AS WELL AS APPROVING THE COMPENSATION AND EMPLOYMENT ARRANGEMENTS OF DESIGNATED OFFICIALS OF THE UNIVERSITY, INCLUDING THE PRESIDENT THE PRESIDENT IS NOT A MEMBER FOR PURPOSES OF REVIEWING COMPENSATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 2 Family/business relationships amongst interested persons	W SCOTT AMEY AND DAVID KARLGAARD - Business relationship, NELSON A CARBONELL, JR AND ROBERT K TANENBAUM - Business relationship

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	FORM 990 WAS PREPARED BY THE UNIVERSITY'S TAX DEPARTMENT AND THEN REVIEWED INTERNALLY BY SENIOR MANAGEMENT AND EXTERNALLY BY PRICEWATERHOUSECOOPERS LLP IT WAS THEN SUBMITTED TO THE SUBCOMMITTEE ON AUDIT AND COMPLIANCE OF THE UNIVERSITY'S BOARD OF TRUSTEES FOR REVIEW AND DISCUSSION THE FINAL FORM 990 WAS SENT TO EACH BOARD MEMBER BEFORE FILING WITH THE INTERNAL REVENUE SERVICE

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	CONFLICT OF INTEREST POLICIES ARE MONITORED BY THE UNIVERSITY'S COMPLIANCE OFFICE, WHICH DISTRIBUTES AN ANNUAL QUESTIONNAIRE. THE QUESTIONNAIRES ARE COLLECTED, AND THE DISCLOSURES ARE SUMMARIZED AND SHARED WITH THE OFFICE OF THE SENIOR VP AND GENERAL COUNSEL AND THE BOARD OF TRUSTEES' SUBCOMMITTEE ON AUDIT AND COMPLIANCE. ANY DISCLOSURE WHICH REVEALS FACTS THAT INDICATE AN ACTUAL OR APPARENT CONFLICT IS REVIEWED AND, WHEN APPROPRIATE, A PLAN IS DEVELOPED AND IMPLEMENTED TO REMEDY, MANAGE, OR MINIMIZE SUCH CONFLICT. THESE PLANS ARE MONITORED AND ENFORCED THROUGH ONGOING OVERSIGHT, COORDINATED BY THE COMPLIANCE OFFICE, INCLUDING A THOROUGH REVIEW OF UNIVERSITY PAYMENT REQUESTS THAT MAY CREATE A CONFLICT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	<p>THE EXECUTIVE COMMITTEE (THE "COMMITTEE") OF THE UNIVERSITY'S BOARD OF TRUSTEES (EXCLUDING THE PRESIDENT) WAS DELEGATED THE AUTHORITY BY THE BOARD TO SET EXECUTIVE COMPENSATION. THE UNIVERSITY REVIEWS THE MEMBERSHIP OF THE COMMITTEE FOR POSSIBLE CONFLICTS OF INTEREST AND CONFIRMS THAT MEMBERS DO NOT HAVE A CONFLICT WITH RESPECT TO A COMPENSATION ARRANGEMENT OR PROPERTY TRANSFER UNDER CONSIDERATION. THE COMMITTEE, SERVING AS THE COMPENSATION COMMITTEE, ANNUALLY REVIEWS AND DETERMINES THE COMPENSATION FOR THE PRESIDENT, REVIEWS AND APPROVES THE COMPENSATION RECOMMENDED BY THE PRESIDENT FOR THE OFFICERS AND KEY EMPLOYEES. IN MAKING ITS ASSESSMENTS, THE COMMITTEE OBTAINS COMPENSATION INFORMATION PREPARED BY AN INDEPENDENT COMPENSATION CONSULTING FIRM THAT INCLUDES MARKET DATA FROM COMPARABLE UNIVERSITIES FOR COMPARABLE POSITIONS. IN DETERMINING THE PRESIDENT'S COMPENSATION, THE COMMITTEE CONSIDERS THE CONSULTANT'S REPORT AND MARKET DATA IN ADDITION TO THE TERMS OF HIS EMPLOYMENT CONTRACT. THE COMMITTEE ALSO TAKES INTO CONSIDERATION ACCOMPLISHMENTS FOR THE CURRENT FISCAL YEAR AS WELL AS GOALS FOR THE UPCOMING FISCAL YEAR. WHEN REVIEWING THE REASONABLENESS OF THE SENIOR OFFICIALS' COMPENSATION, IN ADDITION TO CONSIDERING THE CONSULTANT'S REPORT AND MARKET DATA, THE COMMITTEE ALSO REVIEWS SENIOR OFFICIALS' PERFORMANCE, TAKING INTO ACCOUNT THE PRESIDENT'S RECOMMENDATIONS AND OTHER INFORMATION AS IT DEEMS APPROPRIATE FROM TIME TO TIME, SUCH AS GOALS AND ACCOMPLISHMENTS, LENGTH OF SERVICE, AND PRIOR SALARY HISTORY. IF ANY SENIOR OFFICIAL'S COMPENSATION IS ABOVE MARKET DATA, THE COMMITTEE CONSIDERS ALL RELEVANT FACTORS AND, IF IT APPROVES THE COMPENSATION, EXPLAINS ITS RATIONALE AND INCLUDES ITS EXPLANATION IN THE MINUTES. THE COMMITTEE KEEPS MINUTES OF ALL FINAL ACTIONS AT EACH MEETING.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	THE GOVERNING DOCUMENTS (BYLAWS, CHARTER AND MISSION STATEMENT) ARE AVAILABLE ON THE BOARD OF TRUSTEE'S WEBSITE AT HTTP //TRUSTEES GWU EDU/GOVERNING-DOCUMENTS THE FACULTY AND NON-FACULTY CONFLICT OF INTEREST POLICIES ARE AVAILABLE FROM THE UNIVERSITY'S POLICIES WEBSITE AT WWW POLICY GWU EDU THE FINANCIAL STATEMENTS ARE AVAILABLE IN THE ANNUAL REPORT, WHICH IS POSTED ON THE FINANCE DIVISION WEBSITE AT HTTP //FINANCE GWU EDU/REPORTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VII, Section A Additional trustee information	ALL TRUSTEES SERVE WITHOUT COMPENSATION FOR THEIR ROLE AS TRUSTEE NO TRUSTEE DEVOTES FULL TIME TO THIS POSITION THE AVERAGE NUMBER OF HOURS EACH TRUSTEE DEVOTES TO HIS/HER POSITI ON ON THE BOARD OF TRUSTEES DEPENDS UPON THE TRUSTEE'S LEADERSHIP ON THE BOARD AND COMMITTEES THREE BOARD MEETINGS AND ONE RETREAT WERE HELD DURING THE FISCAL YEAR EACH TRUSTEE SERVES ON AT LEAST TWO COMMITTEES

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 14 Information Technology Expenses	INFORMATION TECHNOLOGY EXPENSE INCLUDES HARDWARE, SOFTWARE, AND MAINTENANCE COSTS, AS WELL AS PAYMENTS TO CONTRACTORS FOR IT SERVICES

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24c Intercompany assessments	THE UNIVERSITY REPORTS INDIRECT EXPENSES RECORDED IN VARIOUS COST CENTERS AS A SEPARATE LINE ITEM (LINE 24c) INDIRECT EXPENSES INCLUDE BUT ARE NOT LIMITED TO, FACILITIES OVERHEAD, POSTAGE, TELEPHONE, PRINT, AND ADVERTISING SERVICES PERFORMED BY INTERNAL DEPARTMENTS THE RECLASSIFICATION OF INDIRECT EXPENSES TO A SEPARATE LINE PRESERVES THE OBJECT CLASSIFICATION OF EACH INDIVIDUAL EXPENSE SO THAT ONLY COSTS PAID TO THIRD PARTIES FOR GOODS AND SERVICES ARE REPORTED

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Change in value of charitable trusts - 2009629, Adjustment for subsidiary activity - 12934 4, Post retirement related charges FAS 158 - -1704000, Recoveries (losses) on pledge contr ibutions - -2802990,

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

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The George Washington University

Employer identification number
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Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) DYNAMO BRASIL VII LLC c/o Corporation Trust Center 1209 Orange Street Wilmington, DE 19801	Investments	DE	0	8,212,478	GW
(2) George Washington WORLDWIDE LLC 1918 F St NW Washington, DC 20052	International education	DC	0	256,360	GW

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) THE GEORGE WASHINGTON ALUMNI ASSOCIATION 1918 F STREET NW WASHINGTON, DC 20052 52-1437464	ALUM ACTIVITY	DC	501(c)(3)	Type III-O	NA		No
(2) MOUNT VERNON COLLEGE c/o TAX DEpartment 45155 RESEARCH PLACE ASHBURN, VA 20147 53-0196635	EDUCATION/SUPPORT GW	DC	501(c)(3)	Type I	GW	Yes	
(3) WASHINGTON RESEARCH LIBRARY CONSORTIUM 901 COMMERCE DRIVE UPPER MARLBORO, MD 20774 52-1559828	LIBRARY SERVICES	DC	501(c)(3)	Type II	NA		No

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

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

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" 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
(1) Charitable trusts (27)	Charitable Giving		NA	Trust				Yes	
(2) Qiaohua Mgmt Consulting (Suzhou) Co Ltd KAI TAI BLDGNO 158 RENAI RD SUZHOU, JIANGSU CH	Consulting Service	CH	GWWW LLC	C Corporation	-12,364	260,850	1 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	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
g Sale of assets to related organization(s)	1g	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)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	Yes

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) The George Washington Alumni Association	S	80,000	Invoices
(2) WASHINGTON RESEARCH LIBRARY CONSORTIUM	M	1,433,970	Invoices

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

[illegible]

Part VII **Supplemental Information**

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