

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning 09/01, 2021, and ending 08/31, 20 22

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization NORTHWESTERN UNIVERSITY
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
633 CLARK ST
 City or town, state or province, country, and ZIP or foreign postal code
EVANSTON, IL 60208

D Employer identification number
36-2167817

E Telephone number
(847) 491-3741

G Gross receipts \$ 6,046,941,867

F Name and address of principal officer: AMANDA DISTEL
SAME AS C ABOVE

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.

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.NORTHWESTERN.EDU

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1851 **M** State of legal domicile: IL

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>EDUCATION AND RESEARCH</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	<u>39</u>
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>37</u>
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	<u>24,446</u>
	6	Total number of volunteers (estimate if necessary)	6	<u>155</u>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>15,290,133</u>
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	<u>0</u>
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	<u>448,339,219</u>	<u>434,258,008</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>2,126,650,578</u>	<u>2,452,947,971</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>1,112,541,399</u>	<u>1,084,927,010</u>
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>(9,009,808)</u>	<u>38,291,257</u>
			<u>3,678,521,388</u>	<u>4,010,424,246</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>620,847,192</u>	<u>662,465,917</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)		<u>0</u>
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>1,477,348,118</u>	<u>1,556,944,915</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u>150,665</u>	<u>66,079</u>
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>58,010,505</u>		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>932,511,495</u>	<u>1,124,751,845</u>
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>3,030,857,470</u>	<u>3,344,228,756</u>
	19	Revenue less expenses. Subtract line 18 from line 12	<u>647,663,918</u>	<u>666,195,490</u>
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	<u>19,369,511,926</u>	<u>18,624,987,614</u>
	22	Net assets or fund balances. Subtract line 21 from line 20	<u>3,303,710,832</u>	<u>3,268,396,049</u>
		<u>16,065,801,094</u>	<u>15,356,591,565</u>	

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: *Amanda Distel* Date: 7-14-2023

AMANDA J DISTEL, VP, TREASURER, INTERIM CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: TARA KENNEY Preparer's signature: *Tara Kenney* Date: 07/14/2023 Check if self-employed PTIN: P01245482

Firm's name ▶ KPMG LLP Firm's EIN ▶ 13-5565207

Firm's address ▶ 200 EAST RANDOLPH STREET, CHICAGO, IL 60601 Phone no. (312) 665-1000

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
NORTHWESTERN'S MISSION IS TO PROVIDE THE HIGHEST-QUALITY EDUCATION FOR ITS STUDENTS, TO DEVELOP INNOVATIVE PROGRAMS IN RESEARCH, AND TO SUSTAIN AN ACADEMIC COMMUNITY THAT EMBRACES THESE ENTERPRISES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 2,266,491,101 including grants of \$ 533,960,009) (Revenue \$ 1,552,901,204)
EDUCATION OF STUDENTS: FOR THE 2022 ACADEMIC YEAR, 8,578 UNDERGRADUATES AND 11,889 GRADUATES AND PROFESSIONAL SCHOOL STUDENTS ENROLLED FULL-TIME AT THE UNIVERSITY. THE EXEMPT PURPOSE OF NORTHWESTERN UNIVERSITY IS TO PROVIDE EDUCATIONAL SERVICES TO ITS STUDENTS. THIS INCLUDES SUPERIOR UNDERGRADUATE EDUCATION FOR A DIVERSE STUDENT BODY IN A COMPREHENSIVE RANGE OF ACADEMIC AND PROFESSIONAL FIELDS. AT THE GRADUATE LEVEL, NORTHWESTERN'S ROLE ENCOMPASSES OFFERINGS IN THE MAJOR ACADEMIC AND PROFESSIONAL FIELDS, CLOSELY RELATED TO RESEARCH, CREATIVE ACTIVITIES, AND CLINICAL SERVICES.

4b (Code:) (Expenses \$ 598,879,706 including grants of \$ 128,505,908) (Revenue \$ 794,923,006)
RESEARCH ACTIVITIES: THE RESEARCH PROGRAM AT NORTHWESTERN UNIVERSITY IS A MAJOR COMPONENT OF UNIVERSITY EFFORTS, ASSURING INSTITUTIONAL LEADERSHIP IN SCIENTIFIC DISCOVERY, INTELLECTUAL INQUIRY, AND CREATIVE PERFORMANCE. THE CHARACTER OF THIS RESEARCH SHAPES ALL AREAS OF UNIVERSITY ENDEAVOR, ESPECIALLY GRADUATE EDUCATION AS WELL AS UNDERGRADUATE STUDIES.

4c (Code:) (Expenses \$ 179,203,501 including grants of \$) (Revenue \$ 108,327,372)
AUXILIARY ENTERPRISES SERVE THE EDUCATIONAL MISSION BY PRIMARILY PROVIDING RESIDENCES AND FOOD SERVICES, AND OTHER VARIOUS GOODS AND SERVICES TO SUPPORT UNIVERSITY STUDENT, FACULTY, AND STAFF ACTIVITIES.

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

4e Total program service expenses ▶ 3,044,574,308

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	✓	
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? If "Yes," complete Schedule L, Part I		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	✓	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	✓	
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		✓
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	✓	
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	✓	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	✓	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		✓
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? If "Yes," complete Schedule R, Part I	✓	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	✓	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	✓	
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)? If "Yes," complete Schedule R, Part V, line 2	✓	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		✓
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? If "Yes," complete Schedule R, Part VI		✓
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check 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 24,269		
b	Enter the number of Forms W-2G included on 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		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
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 24,446		
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 ✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a ✓	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b ✓	
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 ✓	
b	If "Yes," enter the name of the foreign country ▶ QA, UK 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	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	✓
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	✓
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 ✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b ✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	✓
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	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f	✓
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	
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	✓
9	Sponsoring organizations maintaining donor advised funds.			
a	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	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		15	✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16	✓
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		17	

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 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 on Schedule O.	39	
1b	Enter the number of voting members included on line 1a, above, who are independent	37	
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?	<input checked="" type="checkbox"/>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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 on Schedule O		<input checked="" type="checkbox"/>

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?		<input checked="" type="checkbox"/>
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?	<input checked="" type="checkbox"/>	
11b	Describe on 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	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done.	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
b	Other officers or key employees of the organization		<input checked="" type="checkbox"/>
	If "Yes" to line 15a or 15b, describe the process on 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?	<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► CA, MA, MD, MI, NH, OR, SC
- 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 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 on Schedule O)
- 19 Describe on 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 ►
 NICOLE VAN LAAN, CONTROLLER, 619 CLARK ST., EVANSTON, IL 60208, (847) 491-4722

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and 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.

See the instructions for the order in which to list the persons above.

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

(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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) PATRICK WILLIAM FITZGERALD, II HEAD COACH	40.0					✓	5,863,035	0	64,102	
(2) CHRISTOPHER RYAN COLLINS HEAD COACH	40.0					✓	3,070,425	0	63,906	
(3) CHAD A MIRKIN PROFESSOR-WCAS CHEMISTRY	40.0					✓	3,029,210	0	80,911	
(4) MORTON O SCHAPIRO PRESIDENT	40.0			✓			2,222,805	0	773,171	
(5) MOHANBIR S SAWHNEY PROFESSOR-KELLOGG	40.0					✓	2,430,051	0	95,288	
(6) HARISHA KONERU HAIGH MNG DIR PRIV INV & REAL ASSETS	40.0					✓	1,307,724	0	549,727	
(7) PETER A BELYTSCHKO MANAGING DIR ABSOLUTE RETURN	40.0					✓	1,308,442	0	509,131	
(8) MACIEJ S LESNIAK PROFESSOR-NEUROLOGICAL SURGERY	40.0					✓	1,619,469	0	29,494	
(9) AMY FALLS VP & CHIEF INVESTMENT OFFICER	40.0			✓			1,532,572	0	55,158	
(10) ROBERT E MCQUINN VP OF ALUMNI REL & DEVELOPMENT	40.0			✓			1,047,813	0	340,892	
(11) CRAIG A JOHNSON EXECUTIVE VICE PRESIDENT	40.0			✓			995,891	0	196,258	
(12) JAMES J PHILLIPS FORMER VP ATHLETICS	0.0					✓	1,071,131	0	20,336	
(13) STEPHANIE MILLS GRAHAM VP & GENERAL COUNSEL	40.0			✓			844,443	0	85,709	
(14) KATHLEEN M HAGERTY PROVOST	40.0			✓			857,701	0	29,408	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(15) MIKE POLISKY FORMER VP ATHLETICS	0.0						811,323	0	37,647	
(16) PRIYA JENVEJA HARJANI ASSOC VP & DEP GENERAL COUNSEL & INTERIM VP HR	40.0			✓			631,311	0	61,016	
(17) ERIC G NEILSON VP MEDICAL AFFAIRS	40.0			✓			640,304	0	25,634	
(18) MILAN MRKSICH VP OF RESEARCH	40.0			✓			556,370	0	58,631	
(19) DERRICK L GRAGG VP ATHLETICS REC	40.0			✓			562,504	0	31,548	
(20) SEAN BRIAN REYNOLDS VP & CHIEF INFORMATION OFFICER	40.0			✓			545,318	0	37,402	
(21) JULIE ALICE PAYNE-KIRCHMEIER VP OF STUDENT AFFAIRS	40.0			✓			543,524	0	35,019	
(22) LUKE FIGORA VP FOR OPERATIONS	40.0			✓			502,486	0	63,146	
(23) AMANDA J DISTEL SR ASC VP FIN & TREASURER	40.0					✓	506,000	0	51,658	
(24) MARILYN MCCOY VP OF ADMIN & PLANNING	40.0			✓			497,765	0	55,089	
(25) (SEE STATEMENT)										
1b Subtotal							32,997,617	0	3,350,281	
c Total from continuation sheets to Part VII, Section A							2,681,719	0	390,496	
d Total (add lines 1b and 1c)							35,679,336	0	3,740,777	
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							3,119			

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
THE FAMILY INSTITUTE, 618 LIBRARY PL, EVANSTON, IL 60201	INSTRUCTION SERVICES	39,003,307
NORTHWESTERN MEDICAL GROUP, 541 N FAIRBANKS CT, RM 1630, CHICAGO, IL 60611	HEALTHCARE SERVICES	6,328,837
MANUFACTURERS & TRADERS TRUST CO., 345 MAIN ST, BUFFALO, NY 14203	INVESTMENT SERVICES	3,274,418
NORTHWESTERN MEMORIAL HOSPITAL, 251 EAST HURON, CHICAGO, IL 60611	LAB AND CLINICAL SERVICES	3,044,112
ALLIED UNIVERSAL COMPANY, 161 WASHINGTON ST, CONSHOHOCKEN, PA 19428	SECURITY SERVICES	2,860,817
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	416	

Part VIII Statement of Revenue

Check 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	2,716,466			
	d	Related organizations	1d	0			
	e	Government grants (contributions)	1e	33,601,120			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	397,940,422			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 45,745,108			
	h	Total. Add lines 1a-1f ▶		434,258,008			
Program Service Revenue			Business Code				
	2a	TUITION AND FEES	611310	1,299,823,609	1,299,823,609		
	b	RESEARCH ACTIVITIES	611310	794,923,006	794,923,006		
	c	EDUCATIONAL ACTIVITIES	611310	179,602,175	179,602,175		
	d	AUXILIARY ENTERPRISES	611310	108,327,372	108,327,372		
	e	MEDICAL ACTIVITIES	611310	53,959,911	53,959,911		
	f	All other program service revenue . . .	900099	16,311,898	16,311,898	0	
g	Total. Add lines 2a-2f ▶		2,452,947,971				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		58,465,800	5,296,240	53,169,560	
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶		25,238,403		3,478,723	
	6a	Gross rents	(i) Real	1,172,886			
			(ii) Personal				
	b	Less: rental expenses	6b	188,038			
	c	Rental income or (loss)	6c	984,848	0		
	d	Net rental income or (loss) ▶		984,848		984,848	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	1,381,129,622	1,681,303,180		
			(ii) Other				
	b	Less: cost or other basis and sales expenses	7b	1,379,414,572	656,557,020		
	c	Gain or (loss)	7c	1,715,050	1,024,746,160		
	d	Net gain or (loss) ▶		1,026,461,210	(2,092,629)	1,028,553,839	
	8a	Gross income from fundraising events (not including \$ 2,716,466 of contributions reported on line 1c). See Part IV, line 18	8a	397,333			
b	Less: direct expenses	8b	357,991				
c	Net income or (loss) from fundraising events . . . ▶		39,342		39,342		
9a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities . . . ▶						
10a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory . . . ▶						
Miscellaneous Revenue			Business Code				
	11a	INVESTMENT IN LPS	523920	2,239,859	2,239,859		
	b	PARKING FACILITIES	812930	6,489,034	6,489,034		
	c	SCIENTIFIC SERVICES/RENTAL	541990	2,957,980	2,957,980		
	d	All other revenue		341,791	0	217,254	
e	Total. Add lines 11a-11d ▶		12,028,664				
12	Total revenue. See instructions ▶		4,010,424,246	2,456,151,582	15,290,133	1,104,724,523	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	96,779,699	96,779,699		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	558,499,685	558,499,685		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	7,186,533	7,186,533		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	19,829,918	4,725,535	13,865,156	1,239,227
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	929,712		929,712	
7 Other salaries and wages	1,242,329,571	1,170,873,272	38,103,383	33,352,916
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	84,808,088	79,100,750	3,191,193	2,516,145
9 Other employee benefits	135,321,238	126,268,219	5,061,892	3,991,127
10 Payroll taxes	73,726,388	68,806,269	2,751,028	2,169,091
11 Fees for services (nonemployees):				
a Management				
b Legal	13,701,296		13,701,296	
c Accounting	1,697,859		1,697,859	
d Lobbying	407,703		407,703	
e Professional fundraising services. See Part IV, line 17	66,079			66,079
f Investment management fees	42,682,394		42,682,394	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	285,690,943	282,529,742	300,541	2,860,660
12 Advertising and promotion	24,810,702	18,146,320	1,515,002	5,149,380
13 Office expenses	159,364,483	156,180,221	1,701,076	1,483,186
14 Information technology	71,972,233	69,984,104	1,111,489	876,640
15 Royalties	5,635,719	5,635,719		
16 Occupancy	106,295,696	103,310,658	2,685,669	299,369
17 Travel	35,850,088	31,566,550	2,771,279	1,512,259
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	27,730,032	26,513,266	818,253	398,513
20 Interest	90,737,217		90,737,217	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	204,358,355	187,778,587	15,108,808	1,470,960
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIP FEES	4,523,666	3,653,637	856,288	13,741
b REVENUE REFUND	5,639,613	5,638,480	1,133	0
c ATHLETICS	4,643,344	4,643,344	0	0
d ADMINISTRATIVE FEES	4,498,026	4,498,026	0	0
e All other expenses	34,512,476	32,255,692	1,645,572	611,212
25 Total functional expenses. Add lines 1 through 24e	3,344,228,756	3,044,574,308	241,643,943	58,010,505
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		1	0
	2	Savings and temporary cash investments	883,167,771	2	854,888,652
	3	Pledges and grants receivable, net	259,037,462	3	206,676,729
	4	Accounts receivable, net	210,932,870	4	267,834,178
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	1,075,436	5	875,436
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7	Notes and loans receivable, net	14,876,059	7	15,690,773
	8	Inventories for sale or use	1,795,427	8	1,741,382
	9	Prepaid expenses and deferred charges	5,425,492	9	6,003,752
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,572,887,170		
	b	Less: accumulated depreciation	10b 2,452,031,827		
	11	Investments—publicly traded securities	3,177,017,574	10c	3,120,855,343
	12	Investments—other securities. See Part IV, line 11	1,697,823,095	11	1,464,518,168
	13	Investments—program-related. See Part IV, line 11	12,839,056,290	12	12,428,005,339
	14	Intangible assets	120,088,011	13	115,235,155
	15	Other assets. See Part IV, line 11		14	0
16	Total assets. Add lines 1 through 15 (must equal line 33)	159,216,439	15	142,662,707	
		19,369,511,926	16	18,624,987,614	
Liabilities	17	Accounts payable and accrued expenses	184,694,262	17	188,826,365
	18	Grants payable		18	0
	19	Deferred revenue	205,749,611	19	292,267,193
	20	Tax-exempt bond liabilities	396,572,442	20	395,551,158
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	35,444,238	21	47,212,686
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	100,000,000	23	0
	24	Unsecured notes and loans payable to unrelated third parties		24	0
	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	2,381,250,279	25	2,344,538,647
	26	Total liabilities. Add lines 17 through 25	3,303,710,832	26	3,268,396,049
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	9,867,245,384	27	9,418,823,306
	28	Net assets with donor restrictions	6,198,555,710	28	5,937,768,259
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	0
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	0
	31	Retained earnings, endowment, accumulated income, or other funds		31	0
	32	Total net assets or fund balances	16,065,801,094	32	15,356,591,565
33	Total liabilities and net assets/fund balances	19,369,511,926	33	18,624,987,614	

Part XI Reconciliation of Net Assets

Check 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	4,010,424,246
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,344,228,756
3	Revenue less expenses. Subtract line 2 from line 1	3	666,195,490
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16,065,801,094
5	Net unrealized gains (losses) on investments	5	(1,383,671,885)
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 on Schedule O)	9	8,266,866
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15,356,591,565

Part XII Financial Statements and Reporting

Check 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 on 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		✓
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	✓	
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 on Schedule O.	✓	
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?	✓	
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 on Schedule O and describe any steps taken to undergo such audits.	✓	

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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			
(25) JANNA V BLAIS ----- ASSOC AD INTERCOLLEGIATE SRVCS ATHLETICS & FORMER INTERIM VP ATHLETICS	40.0						✓	425,408	0	73,012
(26) ALEXANDER J DARRAGH ----- VP OF FACILITIES MANAGEMENT	40.0			✓				423,595	0	53,876
(27) JERI BETH WARD ----- VP GLOBAL MKT & COMM	40.0			✓				433,718	0	33,692
(28) ROBIN RENEE MEANS COLEMAN ----- VP ASSOC PROV DIV AND INC	40.0			✓				395,793	0	50,772
(29) DANIEL LEE DURACK ----- ASSOC VP BUDGET & PLANNING	40.0				✓			302,299	0	56,520
(30) DEVORA GRYNSPAN ----- VP OF INTERNATIONAL RELATIONS	40.0			✓				256,060	0	36,369
(31) ANGEL MANUEL CUEVAS- TRISAN ----- FORMER VP & CHIEF HR OFFICER	0.0						✓	228,172	0	42,450
(32) ROBERT A GUNDLACH ----- PROFESSOR EMERITUS & FORMER INTERIM VP ATHLETICS	0.0						✓	216,674	0	43,805
(33) A. STEVEN CROWN ----- TRUSTEE	1.0	✓						0	0	0
(34) ADAM R. KARR ----- TRUSTEE	1.0	✓						0	0	0
(35) CHARLES A. TRIBBETT III ----- TRUSTEE	1.0	✓						0	0	0
(36) CHRISTINE E. BRENNAN ----- TRUSTEE	1.0	✓						0	0	0
(37) D. CAMERON FINDLAY ----- TRUSTEE	1.0	✓						0	0	0
(38) DAVID A. SACHS ----- TRUSTEE	1.0	✓						0	0	0
(39) DAVID B. WEINBERG ----- TRUSTEE	1.0	✓						0	0	0
(40) DEBORAH L. DEHAAS ----- TRUSTEE	1.0	✓						0	0	0
(41) E. SCOTT SANTI ----- TRUSTEE	1.0	✓						0	0	0
(42) ELLEN KULLMAN ----- TRUSTEE	1.0	✓						0	0	0
(43) FREDERICK H. WADDELL ----- TRUSTEE	1.0	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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			
(44) GWYNNE E. SHOTWELL ----- TRUSTEE	1.0 -----	✓						0	0	0
(45) H. PATRICK HACKETT, JR. ----- TRUSTEE	1.0 -----	✓						0	0	0
(46) HARRELD N. KIRKPATRICK III ----- TRUSTEE	1.0 -----	✓						0	0	0
(47) J. LANDIS MARTIN ----- TRUSTEE	1.0 -----	✓						0	0	0
(48) JAMES A DENAUT ----- TRUSTEE	1.0 -----	✓						0	0	0
(49) JANE DIRENZO PIGOTT ----- TRUSTEE	1.0 -----	✓						0	0	0
(50) JANE S. HOFFMAN ----- TRUSTEE	1.0 -----	✓						0	0	0
(51) JAY C. HOAG ----- TRUSTEE	1.0 -----	✓						0	0	0
(52) JOHN Z. KUKRAL ----- TRUSTEE	1.0 -----	✓						0	0	0
(53) KIMBERLY QUERREY ----- TRUSTEE	1.0 -----	✓						0	0	0
(54) LYNN HOPTON DAVIS ----- TRUSTEE	1.0 -----	✓						0	0	0
(55) M. JUDE REYES ----- TRUSTEE	1.0 -----	✓						0	0	0
(56) MICHAEL S. SHANNON ----- TRUSTEE	1.0 -----	✓						0	0	0
(57) MILES D. WHITE ----- TRUSTEE	1.0 -----	✓						0	0	0
(58) MILTON M. MORRIS ----- TRUSTEE	1.0 -----	✓						0	0	0
(59) MUNEER A. SATTER ----- TRUSTEE	1.0 -----	✓						0	0	0
(60) NANCY TRIENENS KAEHLER ----- TRUSTEE	1.0 -----	✓						0	0	0
(61) PATRICK G. RYAN, JR. ----- TRUSTEE	1.0 -----	✓						0	0	0
(62) PAUL J. SCHNEIDER ----- TRUSTEE	1.0 -----	✓						0	0	0
(63) PAULA PRETLOW ----- TRUSTEE	1.0 -----	✓						0	0	0
(64) PETER J. BARRIS ----- TRUSTEE	1.0 -----	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(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			
(65) PURNIMA PURI ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0
(66) STEVEN CAHILLANE ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0
(67) T. BONDURANT FRENCH ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0
(68) TIMOTHY P. SULLIVAN ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0
(69) VIRGINIA ROMETTY ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0
(70) WENDY M. NELSON ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0
(71) YIE-HSIN HUNG ----- TRUSTEE	1.0 -----	<input checked="" type="checkbox"/>						0	0	0

**SCHEDULE A
(Form 990)**

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization
NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

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

The organization is not a private foundation because it is: (For lines 1 through 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).)
- 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)(vii). (Complete Part II.)
- 9 An agricultural research organization described in section 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 on 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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	373,724,245	351,726,297	361,701,672	448,339,219	434,258,008	1,969,749,441
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	373,724,245	351,726,297	361,701,672	448,339,219	434,258,008	1,969,749,441
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)						554,589,616
6 Public support. Subtract line 5 from line 4						1,415,159,825

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	373,724,245	351,726,297	361,701,672	448,339,219	434,258,008	1,969,749,441
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	90,325,158	84,991,257	65,402,423	82,888,254	76,102,126	399,709,218
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	789,898	579,376	277,962	75,250	614,587	2,337,073
11 Total support. Add lines 7 through 10						2,371,795,732
12 Gross receipts from related activities, etc. (see instructions)					12	10,880,657,164
13 First 5 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 2021 (line 6, column (f), divided by line 11, column (f))	14	59.67 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	61.47 %
16a 33 1/3% support test—2021. 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—2020. 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—2021. 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—2020. 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 on 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 5 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 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2021. 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—2020. 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 in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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? 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.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.		
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)? 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.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).		
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?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? If "Yes," complete Part I of Schedule L (Form 990).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
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))? If "Yes," provide detail in Part VI .		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
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)? If "Yes," answer line 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

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 on lines 11b and 11c below, the governing body of a supported organization?	11a	
b	A family member of a person described on line 11a above?	11b	
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c	

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting 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)? 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).	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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to 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 governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b 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? 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.	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3	Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No," provide details in Part VI.	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

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):		
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 0.015 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 0.035.	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 0.85 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	<input type="checkbox"/> 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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Part VI

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.)

Return Reference - Identifier	Explanation						
	Description	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	(1) FUNDRAISING	789,898	579,376	277,962	75,250	614,587	2,337,073
	Total	789,898	579,376	277,962	75,250	614,587	2,337,073

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Table with 2 columns: Name of the organization (NORTHWESTERN UNIVERSITY) and Employer identification number (36-2167817)

Organization type (check one):

- Filers of: Section: Form 990 or 990-EZ [X] 501(c)(3) (enter number) organization [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation [] 527 political organization Form 990-PF [] 501(c)(3) exempt private foundation [] 4947(a)(1) nonexempt charitable trust treated as a private foundation [] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- [] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
-------------------------------------------------	----------------------------------------------

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 119,802,038	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 37,855,288	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 13,176,834	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 10,075,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 9,039,341	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
-------------------------------------------------	----------------------------------------------

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	SECURITIES ----- ----- -----	\$ 5,105,288	08/31/2022
	----- ----- -----	\$ -----	
	----- ----- -----	\$ -----	
	----- ----- -----	\$ -----	
	----- ----- -----	\$ -----	
	----- ----- -----	\$ -----	
	----- ----- -----	\$ -----	

Name of organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
-------------------------------------------------	----------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
.....

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
.....

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
.....

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
.....

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

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.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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 organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
-------------------------------------------------	----------------------------------------------

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 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 (grassroots lobbying)	0	0												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	407,703	0												
c	Total lobbying expenditures (add lines 1a and 1b)	407,703	0												
d	Other exempt purpose expenditures	3,339,176,656	0												
e	Total exempt purpose expenditures (add lines 1c and 1d)	3,339,584,359	0												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000	0												
<table border="1"> <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	0												
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0												
i	Subtract line 1f from line 1c. If zero or less, enter -0-	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) 2018	(b) 2019	(c) 2020	(d) 2021	(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	628,789	441,311	441,973	407,703	1,919,776
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	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)).

	(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 campaign activity 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.

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**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
------------------------------------------------------------	-----------------------------------------------------

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	2	1
2 Aggregate value of contributions to (during year)	7,224,945	219,000
3 Aggregate value of grants from (during year)	489,000	0
4 Aggregate value at end of year	15,666,652	4,844,457

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? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, 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)? Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB 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 FASB 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 ▶ \$

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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make 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 program
 - 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:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 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 on 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	11,361,182,000	8,484,706,000	8,244,818,000	8,386,918,000	7,947,574,000
b Contributions	210,480,000	203,789,000	152,023,000	81,883,000	142,330,000
c Net investment earnings, gains, and losses	(281,680,000)	3,066,809,000	474,583,000	144,332,000	666,151,000
d Grants or scholarships	71,809,032	68,860,448	65,785,231	62,062,353	59,278,629
e Other expenditures for facilities and programs	338,322,968	325,261,552	320,932,769	306,252,647	309,858,371
f Administrative expenses					
g End of year balance	10,879,850,000	11,361,182,000	8,484,706,000	8,244,818,000	8,386,918,000

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 48.37 %
 - b Permanent endowment 51.63 %
 - c Term endowment 0.00 %
- 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:
- | | Yes | No |
|-----------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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		29,986,168		29,986,168
b Buildings		4,752,208,988	1,894,836,072	2,857,372,916
c Leasehold improvements		44,381,186	33,555,017	10,826,169
d Equipment		746,310,828	523,640,738	222,670,090
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,120,855,343

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	3,221,864,332	END OF YEAR MARKET VALUE
(2) Closely held equity interests		
(3) Other		
(A) EQUITY, FIXED INCOME, REAL ASSETS, ETC	9,206,141,007	END OF YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	12,428,005,339	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	8,928,843
(2) DEPOSITS PAYABLE, ACTUARIAL LIABILITY OF ANNUITIES PAYABLE	144,320,342
(3) GOVERNMENT ADVANCES FOR STUDENT LOANS	1,296,554
(4) ASSET RETIREMENT OBLIGATIONS	3,766,102
(5) TAXABLE BONDS - SERIES 2012	199,208,209
(6) TAXABLE BONDS - SERIES 2013	543,939,684
(7) TAXABLE BONDS - SERIES 2015	497,698,570
(8) TAXABLE BONDS - SERIES 2017	497,736,038
(9) (SEE STATEMENT)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,344,538,647

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

Schedule D

Other Liabilities - Complete if the organization answered "Yes" to

Part X

Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
TAXABLE BONDS - SERIES 2020	298,625,455
LEASE LIABILITIES	149,018,850

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 - Identifier	Explanation
SCHEDULE D, PART III, LINE 1A - ART COLLECTIONS	EXPLANATION: THE UNIVERSITY DOES NOT CAPITALIZE COLLECTIONS. AS STATED IN THE UNIVERSITY NOTES TO THE FINANCIAL STATEMENTS, THE ACCOUNTING POLICY FOR LIBRARY COLLECTIONS IS TO EXPENSE ALL PURCHASES. MUSEUM PURCHASES ARE ACCOUNTED FOR SIMILARLY. GIFTS OF ART AND SIMILAR TANGIBLE PERSONAL PROPERTY ARE ACCOUNTED FOR AS GIFTS-IN-KIND.
SCHEDULE D, PART III, LINE 4 - COLLECTIONS OF ART - DESCRIPTION OF COLLECTIONS	THE MARY AND LEIGH BLOCK MUSEUM OF ART, NORTHWESTERN UNIVERSITY IS COMMITTED TO THE DEVELOPMENT OF A FOCUSED COLLECTION OF WORKS ON PAPER WITH PARTICULAR EMPHASIS UPON HISTORICAL AND CONTEMPORARY PRINTS AND PHOTOGRAPHS. THE MARY AND LEIGH BLOCK MUSEUM OF ART ENRICHES TEACHING AND LEARNING ON THE CAMPUSES OF NORTHWESTERN UNIVERSITY AND IN THE COMMUNITIES OF THEIR SURROUNDING REGIONS BY: PRESENTING ART ACROSS TIME, CULTURES, AND MEDIA; CONVENING INTERDISCIPLINARY DISCUSSIONS IN WHICH ART IS A SPRINGBOARD FOR EXPLORING ISSUES AND IDEAS; COLLECTING ART THAT SUPPORTS THE NORTHWESTERN UNIVERSITY CURRICULUM.
SCHEDULE D, PART IV, LINE 2B - EXPLANATION OF ESCROW AGREEMENT	THE UNIVERSITY MAINTAINS CERTAIN AGENCY FUNDS WHICH IT HOLDS AS A CUSTODIAN FOR STUDENT AND /OR EXTERNAL ORGANIZATIONS AS AN ACCOMMODATION TO THOSE ENTITIES. THE ORGANIZATIONS ARE THEN ALLOWED TO UTILIZE UNIVERSITY SYSTEMS AND RESOURCES TO PROCESS TRANSACTIONS AGAINST THOSE FUNDS.
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	THE UNIVERSITY'S ENDOWMENT FUNDS PURPOSES INCLUDE INSTRUCTION, RESEARCH, LIBRARY COLLECTIONS, SCHOLARSHIPS AND AWARDS, AND BUILDING CONSTRUCTION.
SCHEDULE D, PART X - LINE 1(4) - ASSET RETIREMENT OBLIGATIONS	THE UNIVERSITY RECORDS ALL KNOWN ASSET RETIREMENT OBLIGATIONS (ARO) FOR WHICH THE FAIR VALUE OF THE LIABILITY CAN BE REASONABLY ESTIMATED, INCLUDING CERTAIN OBLIGATIONS RELATING TO REGULATORY REMEDIATION. ARO COVERED INCLUDE THOSE FOR WHICH AN ENTITY HAS A LEGAL OBLIGATION TO PERFORM AN ASSET RETIREMENT ACTIVITY; HOWEVER, THE TIMING AND/OR METHOD OF SETTLING THE OBLIGATION ARE CONDITIONAL ON A FUTURE EVENT THAT MAY OR MAY NOT BE WITHIN THE CONTROL OF THE ENTITY.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	THE UNIVERSITY HAD NO UNCERTAIN TAX POSITIONS IN FISCAL YEAR 2022 OR FISCAL YEAR 2021.

**SCHEDULE E
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

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?	✓	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	✓	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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	✓	
POLICIES ARE INCLUDED ON THE UNIVERSITY'S PUBLICLY ACCESSIBLE HOMEPAGE, IN STUDENT, FACULTY, AND STAFF HANDBOOKS, AND THE STUDENT COURSE CATALOG. POLICIES ARE POSTED ON UNIVERSITY WEBSITES, POSTED THROUGHOUT CAMPUS INCLUDING STUDENT CENTERS AND THE ADMISSION OFFICE, AND DISTRIBUTED TO UNDERGRADUATE STUDENTS.		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	✓	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	✓	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	✓	
d Copies of all material used by the organization or on its behalf to solicit contributions?	✓	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		

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

6a Does the organization receive any financial aid or assistance from a governmental agency?	✓	
b Has the organization's right to such aid ever been revoked or suspended?		✓
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	✓	

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

(SEE STATEMENT)

Area with horizontal dashed lines for supplemental information.

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

Return Reference - Identifier	Explanation
SCHEDULE E, PART I, LINE 6(A) - FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENTAL AGENCY	THE UNIVERSITY RECEIVES FINANCIAL SUPPORT FROM AGENCIES OF THE FEDERAL AND STATE GOVERNMENT FOR RESEARCH AND INSTRUCTIONAL PURPOSES, INCLUDING FOR FINANCIAL AID TO STUDENTS.
SCHEDULE E, PART I, LINE 7 - RACIAL NONDISCRIMINATION COMPLIANCE	NORTHWESTERN UNIVERSITY DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION BY ANY MEMBER OF ITS COMMUNITY AGAINST ANY INDIVIDUAL ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, PREGNANCY, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, PARENTAL STATUS, MARITAL STATUS, AGE, DISABILITY, CITIZENSHIP STATUS, VETERAN STATUS, GENETIC INFORMATION, REPRODUCTIVE HEALTH DECISION MAKING, OR ANY OTHER CLASSIFICATION PROTECTED BY LAW IN MATTERS OF ADMISSIONS, EMPLOYMENT, HOUSING, OR SERVICES OR IN THE EDUCATIONAL PROGRAMS OR ACTIVITIES IT OPERATES.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2021

Open to Public Inspection

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on 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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
(1) MIDDLE EAST AND NORTH AFRICA	1	249	MAINTAINING OFFICES, EMPLOYEES, OR AGENTS	INTERNATIONAL CAMPUS IN DOHA, QATAR FOR STUDENTS IN JOURNALISM AND COMMUNICATION	58,006,404
(2) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		204,910
(3) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING		2,727,471
(4) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		131,017
(5) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTMAKING		1,052,613
(6) SOUTH AMERICA	0	0	GRANTMAKING		238,068
(7) SUB-SAHARAN AFRICA	0	0	GRANTMAKING		2,813,051
(8) CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	126,599
(9) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	461,208
(10) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	3,088,500
(11) MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	400,641
(12) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	313,983
(13) RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	5,926
(14) SOUTH AMERICA	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	117,015
(15) SOUTH ASIA	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	88,786
(16) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	BUSINESS TRAVEL ABROAD (INCLUDES TRAVEL TO ATTEND SEMINARS AND CONFERENCES AND RESEARCH-RELATED TRAVEL)	390,654
(17) (SEE STATEMENT)					
3a Subtotal	1	249			70,166,846
b Total from continuation sheets to Part I	0	0			3,775,269,179
c Totals (add lines 3a and 3b)	1	249			3,845,436,025

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST AND NORTH AFRICA	SUPPORT OF RESEARCH ACTIVITIES	23,356	ACH DIRECT DEPOSIT OR CHECK			
(2)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	38,148	ACH DIRECT DEPOSIT OR CHECK			
(3)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	247,710	ACH DIRECT DEPOSIT OR CHECK			
(4)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	10,654	ACH DIRECT DEPOSIT OR CHECK			
(5)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	28,170	ACH DIRECT DEPOSIT OR CHECK			
(6)			SOUTH AMERICA	SUPPORT OF RESEARCH ACTIVITIES	165,996	ACH DIRECT DEPOSIT OR CHECK			
(7)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	98,935	ACH DIRECT DEPOSIT OR CHECK			
(8)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	51,672	ACH DIRECT DEPOSIT OR CHECK			
(9)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	17,068	ACH DIRECT DEPOSIT OR CHECK			
(10)			EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	119,784	ACH DIRECT DEPOSIT OR CHECK			
(11)			SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	302,207	ACH DIRECT DEPOSIT OR CHECK			
(12)			SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	134,769	ACH DIRECT DEPOSIT OR CHECK			
(13)			SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	50,000	ACH DIRECT DEPOSIT OR CHECK			
(14)			NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT OF RESEARCH ACTIVITIES	139,809	ACH DIRECT DEPOSIT OR CHECK			
(15)			SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	157,886	ACH DIRECT DEPOSIT OR CHECK			
(16)			(SEE STATEMENT)						

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 0

3 Enter total number of other organizations or entities 39

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on 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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	CENTRAL AMERICA AND THE CARIBBEAN	2	2,448	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(2) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	EAST ASIA AND THE PACIFIC	9	97,632	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(3) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	EUROPE (INCLUDING ICELAND AND GREENLAND)	93	1,682,200	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(4) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	MIDDLE EAST AND NORTH AFRICA	3	6,300	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(5) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	SOUTH AMERICA	2	47,953	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(6) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	SOUTH ASIA	1	16,955	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(7) GRANTS DISBURSED DURING STUDENT'S ENROLLMENT IN INTERNATIONAL PROGRAM	SUB-SAHARAN AFRICA	1	160	APPLIED TO STUDENT ACCOUNT. CREDITS ARE REFUNDED.			
(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; don't 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; don't file with Form 990)* Yes No

Part I

Activities per Region (continued)

(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
(17) CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	82,201
(18) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	2,392,055
(19) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	3,928,713
(20) MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	545,671
(21) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	629,419
(22) SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	136,023
(23) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAMS AND COURSES ABROAD	158,852
(24) EAST ASIA AND THE PACIFIC	0	0	FUNDRAISING		101,817
(25) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		3,209,982,934
(26) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		245,077,908
(27) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	INVESTMENTS		63,929,569
(28) SUB-SAHARAN AFRICA	0	0	INVESTMENTS		247,992,887
(29) SOUTH ASIA			GRANTMAKING		16,955
(30) CENTRAL AMERICA AND THE CARIBBEAN			GRANTMAKING		2,448
(31) EUROPE (INCLUDING ICELAND AND GREENLAND)			FUNDRAISING		229,542
(32) MIDDLE EAST AND NORTH AFRICA			FUNDRAISING		37,087
(33) NORTH AMERICA (CANADA & MEXICO ONLY)			FUNDRAISING		5,454
(34) SOUTH AMERICA			FUNDRAISING		3,346
(35) SUB-SAHARAN AFRICA			FUNDRAISING		184
(36) SOUTH ASIA			FUNDRAISING		10,470
(37) CENTRAL AMERICA AND THE CARIBBEAN			UNRELATED BUSINESS ACTIVITIES		660
(38) EUROPE (INCLUDING ICELAND AND GREENLAND)			UNRELATED BUSINESS ACTIVITIES		4,178
(39) MIDDLE EAST AND NORTH AFRICA			UNRELATED BUSINESS ACTIVITIES		123
(40) SOUTH AMERICA			UNRELATED BUSINESS ACTIVITIES		683

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States (continued)

(a) Name of Organization	(b) IRS code section and EIN	(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)
(16)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	192,708	ACH DIRECT DEPOSIT OR CHECK			
(17)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	131,525	ACH DIRECT DEPOSIT OR CHECK			
(18)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	164,605	ACH DIRECT DEPOSIT OR CHECK			
(19)		MIDDLE EAST AND NORTH AFRICA	SUPPORT OF RESEARCH ACTIVITIES	52,978	ACH DIRECT DEPOSIT OR CHECK			
(20)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	584,796	ACH DIRECT DEPOSIT OR CHECK			
(21)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	24,250	ACH DIRECT DEPOSIT OR CHECK			
(22)		MIDDLE EAST AND NORTH AFRICA	SUPPORT OF RESEARCH ACTIVITIES	48,383	ACH DIRECT DEPOSIT OR CHECK			
(23)		SOUTH AMERICA	SUPPORT OF RESEARCH ACTIVITIES	24,119	ACH DIRECT DEPOSIT OR CHECK			
(24)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	214,158	ACH DIRECT DEPOSIT OR CHECK			
(25)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	348,813	ACH DIRECT DEPOSIT OR CHECK			
(26)		NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT OF RESEARCH ACTIVITIES	9,025	ACH DIRECT DEPOSIT OR CHECK			
(27)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	16,993	ACH DIRECT DEPOSIT OR CHECK			
(28)		NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT OF RESEARCH ACTIVITIES	236,764	ACH DIRECT DEPOSIT OR CHECK			
(29)		NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT OF RESEARCH ACTIVITIES	520,449	ACH DIRECT DEPOSIT OR CHECK			
(30)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	95,154	ACH DIRECT DEPOSIT OR CHECK			
(31)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	188,374	ACH DIRECT DEPOSIT OR CHECK			
(32)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	331,608	ACH DIRECT DEPOSIT OR CHECK			
(33)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	270,258	ACH DIRECT DEPOSIT OR CHECK			
(34)		SUB-SAHARAN AFRICA	SUPPORT OF RESEARCH ACTIVITIES	27,112	ACH DIRECT DEPOSIT OR CHECK			
(35)		EAST ASIA AND THE PACIFIC	SUPPORT OF RESEARCH ACTIVITIES	94,991	ACH DIRECT DEPOSIT OR CHECK			
(36)		EUROPE (INCLUDING ICELAND AND GREENLAND)	SUPPORT OF RESEARCH ACTIVITIES	10,805	ACH DIRECT DEPOSIT OR CHECK			
(37)		EAST ASIA AND THE PACIFIC	SUPPORT OF RESEARCH ACTIVITIES	12,287	ACH DIRECT DEPOSIT OR CHECK			
(38)		NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT OF RESEARCH ACTIVITIES	12,204	ACH DIRECT DEPOSIT OR CHECK			

(a) Name of Organization	(b) IRS code section and EIN	(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)
(39)		NORTH AMERICA (CANADA & MEXICO ONLY)	SUPPORT OF RESEARCH ACTIVITIES	134,362	ACH DIRECT DEPOSIT OR CHECK			

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 - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	GRANTS OR OTHER ASSISTANCE ARE AWARDED TO FOREIGN ORGANIZATIONS OR ENTITIES PURSUANT TO THE UNIVERSITY POLICIES AND PROCEDURES FOR ALL GRANT SUBAWARDS. SUCH SUBAWARDS ARE MONITORED THROUGH THE UNIVERSITY'S OFFICE FOR SPONSORED RESEARCH (OSR) AND THE UNIVERSITY'S OFFICE OF ACCOUNTING SERVICES FOR RESEARCH AND SPONSORED PROGRAMS (ASRSP). ALL SUBAWARD DOCUMENTATION INCLUDING PURCHASE ORDERS, RELATED CHARGES AND INVOICES ARE REVIEWED AND MONITORED BY ASRSP AND CONFIRMED WITH THE PRINCIPAL INVESTIGATOR. THE PRINCIPAL INVESTIGATOR MUST CERTIFY THAT THE SUBAWARD COSTS ARE IN ACCORDANCE WITH THE OFFICE OF MANAGEMENT AND BUDGET'S (OMB) UNIFORM GUIDANCE (UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS); ALSO, ASRSP REQUESTS AND COLLECTS AUDIT REPORTS FROM SUBAWARD RECIPIENTS TO MONITOR COMPLIANCE, AS REQUIRED BY THE UNIFORM GUIDANCE. IF THE INFORMATION IS NOT FURNISHED TO ASRSP, PAYMENT MAY BE WITHHELD.
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL, EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -ACCRUAL SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL, SUB-SAHARAN AFRICA -ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL SOUTH AMERICA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL
SCHEDULE F, PART III - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for Instructions and the latest Information.

2021

Open to Public Inspection

Name of the organization

NORTHWESTERN UNIVERSITY

Employer identification number

36-2167817

Part I Fundraising Activities. Complete if the organization answered "Yes" 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
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 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 STELTER, 10435 NEW YORK AVE., DES MOINES, IA 50322	(SEE STATEMENT)		✓		85,797	
2 MEETING ACHIEVEMENTS, 232 E 500 N, VALPARAISO, IN 46383-8384	(SEE STATEMENT)	✓		433,072	66,079	366,993
3						
4						
5						
6						
7						
8						
9						
10						
Total				433,072	151,876	366,993

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.

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

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) Total events	
		GLOBAL ANNUAL BENEFIT DINNER (event type)	DANCE MARATHON (event type)	5 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	2,161,473	448,397	503,929	3,113,799
	2	Less: Contributions	2,161,473	437,892	117,101	2,716,466
	3	Gross income (line 1 minus line 2)	0	10,505	386,828	397,333
Direct Expenses	4	Cash prizes				0
	5	Noncash prizes				0
	6	Rent/facility costs		88,575	74,039	162,614
	7	Food and beverages			67,347	67,347
	8	Entertainment		3,000	34,361	37,361
	9	Other direct expenses	44,821	10,179	35,669	90,669
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				
11	Net income summary. Subtract line 10 from line 3, column (d) ▶					39,342

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))	
		1	Gross revenue			
Direct Expenses	2	Cash prizes				
	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: _____

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 - Identifier	Explanation
SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 1	FUNDRAISING MARKETING CONSULTANT
SCHEDULE G, PART I, LINE 2B(II) - LINE 2B COLUMN (II) ACTIVITY 2	SYMPOSIUM SPONSORSHIP SOLICITOR
SCHEDULE G, PART I, LINE 2B(V) - REIMBURSEMENT OF EXPENSES	THE FOLLOWING PROFESSIONAL FUNDRAISER RECEIVED REIMBURSEMENTS FOR EXPENSES ASSOCIATED WITH THEIR SERVICES TO THE UNIVERSITY (THE AMOUNT OF EXPENSES REIMBURSED AS REFLECTED): STELTER (\$13,635) IN ACCORDANCE WITH WRITTEN AGREEMENT SPECIFYING REIMBURSEMENT OF EXPENSES.
SCHEDULE G, PART I, LINE 3 - STATE SOLICITATION REGISTRATIONS	NO REGISTRATION IS REQUIRED IN ARIZONA, DELAWARE, IDAHO, INDIANA, IOWA, MONTANA, NEBRASKA, SOUTH DAKOTA, TEXAS, VERMONT, AND WYOMING.

Return Reference	Identifier	Explanation	
SCHEDULE G, PART I, LINE 2B	PAYMENT OF FEES OR PAYMENT OF EXPENSES	Name	Description
		STELTER	STELTER RECEIVED REIMBURSEMENTS FOR EXPENSES OF \$13,635 AS AGREED FOR PRINTING AND POSTAGE IN ASSOCIATION WITH THE SERVICES PROVIDED TO THE UNIVERSITY.

**SCHEDULE I
(Form 990)**

**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.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

NORTHWESTERN UNIVERSITY

Employer identification number

36-2167817

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ACADEMY FOR GLOBAL CITIZENSHIP 4647 W. 47TH STREET, CHICAGO, IL 60632	11-3748466	501(C)(3)	37,500				(SEE STATEMENT)
(2) ACCESS COMMUNITY HEALTH NETWORK 222 N CANAL ST, CHICAGO, IL 60606	36-3317058	501(C)(3)	718,424				(SEE STATEMENT)
(3) ADVOCATES FOR INFORMED CHOICE 1625 SE 44TH AVE., PORTLAND, OR 97215	27-2947576	501(C)(3)	17,362				(SEE STATEMENT)
(4) AIDS ARMS, INC. 219 SUNSET AVE, DALLAS, TX 75208	75-2306145	501(C)(3)	8,115				(SEE STATEMENT)
(5) (SEE STATEMENT)	36-3412054	501(C)(3)	126,390				(SEE STATEMENT)
(6) ALBERT EINSTEIN COLLEGE OF MEDICINE, INC. 1300 MORRIS PARK AVENUE, BRONX, NY 10461	47-2209056	501(C)(3)	86,543				(SEE STATEMENT)
(7) ALLIANCECHICAGO 225 W ILLINOIS ST., SUITE 500, CHICAGO, IL 60654	81-5434098	501(C)(3)	790,315				(SEE STATEMENT)
(8) (SEE STATEMENT)	38-1983442	501(C)(3)	21,976				(SEE STATEMENT)
(9) (SEE STATEMENT)	53-0218495	501(C)(3)	15,992				(SEE STATEMENT)
(10) (SEE STATEMENT)	13-1632524	501(C)(3)	154,400				(SEE STATEMENT)
(11) (SEE STATEMENT)	36-2170833	501(C)(3)	3,898,622				(SEE STATEMENT)
(12) (SEE STATEMENT)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 285
- 3 Enter total number of other organizations listed in the line 1 table ▶ 24

Part II

Grants and Other Assistance to Governments and Organizations in the United States (continued)

(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
(12) ARIZONA STATE UNIVERSITY OFFICE OF RESEARCH AND SPON. PROJ., PO BOX 876011, TEMPE, AZ 85287	86-0196696	501(C)(3)	230,979				SUPPORT OF RESEARCH ACTIVITIES
(13) ART INSTITUTE OF CHICAGO 111 S. MICHIGAN AVE., CHICAGO, IL 60603	36-2167725	501(C)(3)	19,179				SUPPORT OF RESEARCH ACTIVITIES
(14) ARTELYS CORP. 150 N. MICHIGAN AVENUE, SUITE 800, CHICAGO, IL 60601	14-2014473		106,250				SUPPORT OF RESEARCH ACTIVITIES
(15) ASEXUAL VISIBILITY AND EDUCATION NETWORK INC. 6715 OAKWOOD DR., OAKLAND, CA 94611	47-2542081	501(C)(3)	15,800				SUPPORT OF RESEARCH ACTIVITIES
(16) ASIAN HEALTH SERVICES 101 8TH STREET, SUITE 100, OAKLAND, CA 94607	94-2235908		16,500				SUPPORT OF RESEARCH ACTIVITIES
(17) ASM MATERIALS EDUCATION FOUNDATION 9639 KINSMAN ROAD, MATERIALS PARK, OH 44073	34-6541397	501(C)(3)	47,500				SUPPORT OF RESEARCH ACTIVITIES
(18) AUBURN UNIVERSITY 321 INGRAM HALL, AUBURN, AL 36849	63-6000724	501(C)(3)	5,237				SUPPORT OF RESEARCH ACTIVITIES
(19) AUGUSTA UNIVERSITY RESEARCH INSTITUTE, INC. PO BOX 945552, ATLANTA, GA 30394-5552	58-1418202	501(C)(3)	67,577				SUPPORT OF RESEARCH ACTIVITIES
(20) AUGUSTANA COLLEGE ASSOCIATION 639 38TH ST., ROCK ISLAND, IL 61201	36-2166962	501(C)(3)	30,171				SUPPORT OF RESEARCH ACTIVITIES
(21) BATES COLLEGE 2 ANDREWS ROAD, LEWISTON, ME 04240	01-0211781	501(C)(3)	23,650				SUPPORT OF RESEARCH ACTIVITIES
(22) BAYLOR COLLEGE OF MEDICINE 1 BAYLOR PLAZA, HOUSTON, TX 77030	74-1613878	501(C)(3)	481,127				SUPPORT OF RESEARCH ACTIVITIES
(23) BAYSTATE MEDICAL CENTER, INC. 759 CHESTNUT ST., SPRINGFIELD, MA 01199	04-2790311	501(C)(3)	445,527				SUPPORT OF RESEARCH ACTIVITIES
(24) BEBASHI - TRANSITION TO HOPE 1235 SPRING GARDEN STREET, PHILADELPHIA, PA 19123	23-2484046	501(C)(3)	15,000				SUPPORT OF RESEARCH ACTIVITIES
(25) BECKMAN RESEARCH INSTITUTE OF THE CITY OF HOPE 1500 EAST DUARTE ROAD, DUARTE, CA 91010	95-3432210	501(C)(3)	10,000				SUPPORT OF RESEARCH ACTIVITIES
(26) BETH ISRAEL DEACONESS MEDICAL CENTER 330 BROOKLINE AVENUE E/ES-214, BOSTON, MA 02215-5399	04-2103881	501(C)(3)	14,898				SUPPORT OF RESEARCH ACTIVITIES
(27) BILLINGS CLINIC FOUNDATION 2800 TENTH AVE. NORTH, BILLINGS, MT 59107	81-0407289	501(C)(3)	30,285				SUPPORT OF RESEARCH ACTIVITIES
(28) BLACKROCK MICROSYSTEMS, INC. 630 KOMAS DR., #200, SALT LAKE CITY, UT 84108	26-2659394		1,245,886				SUPPORT OF RESEARCH ACTIVITIES

(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
(29) BOOKS AND BREAKFAST 419 N GREENWOOD ST, EVANSTON, IL 60201	46-3717739	501(C)(3)	25,000				SUPPORT OF COMMUNITY ORGANIZATION
(30) BOSTON MEDICAL CENTER ONE BOSTON MEDICAL CENTER PL, BOSTON, MA 02118	04-3314093	501(C)(3)	49,710				SUPPORT OF RESEARCH ACTIVITIES
(31) BOSTON UNIVERSITY ONE SILBER WAY, BOSTON, MA 02115	04-2103547	501(C)(3)	701,860				SUPPORT OF RESEARCH ACTIVITIES
(32) BOWMAN PERFORMANCE CONSULTING LLC W7023 EDGEWATER ROAD, SHAWANO, WI 54166	48-1276197		94,181				SUPPORT OF RESEARCH ACTIVITIES
(33) BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS ST. BOSTON, MA 02115	04-2312909	501(C)(3)	281,270				SUPPORT OF RESEARCH ACTIVITIES
(34) BRIGHT STAR COMMUNITY OUTREACH GROUP 337 EAST 35TH STREET, CHICAGO, IL 60616	26-2007088	501(C)(3)	25,100				SUPPORT OF COMMUNITY ORGANIZATION
(35) BROAD INSTITUTE, INC. 7 CAMBRIDGE CENTER, CAMBRIDGE, MA 02142-1401	26-3428781		295,615				SUPPORT OF RESEARCH ACTIVITIES
(36) BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVE, NW, WASHINGTON, DC 20036	53-0196577	501(C)(3)	39,880				SUPPORT OF RESEARCH ACTIVITIES
(37) BROTHERHOOD INCORPORATED 1422 KERLEREC ST, NEW ORLEANS, LA 70116-1822	72-1326474	501(C)(3)	7,500				SUPPORT OF RESEARCH ACTIVITIES
(38) CALIFORNIA INSTITUTE OF TECHNOLOGY 1200 E. CALIFORNIA BLVD., PASADENA, CA 91125-0001	95-1643307	501(C)(3)	130,292				SUPPORT OF RESEARCH ACTIVITIES
(39) CALIFORNIA MEDICAL INNOVATIONS INSTITUTE, INC. 11107 ROSELLE ST., SAN DIEGO, CA 92121- 1206	46-2953382	501(C)(3)	21,879				SUPPORT OF RESEARCH ACTIVITIES
(40) CALIFORNIA STATE UNIVERSITY, NORTHRIDGE 18111 NORDHOFF STREET, NORTHRIDGE, CA 91330	95-4358677	115	43,151				SUPPORT OF RESEARCH ACTIVITIES
(41) CAMPBELL-KIBLER ASSOCIATES, INC. 80 LAKESIDE DR, GROTON, MA 01450	04-3297519		19,469				SUPPORT OF RESEARCH ACTIVITIES
(42) CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE, CYERT HALL 102, PITTSBURGH, PA 15213	25-0969449	501(C)(3)	1,317,723				SUPPORT OF RESEARCH ACTIVITIES
(43) CASCADE AIDS PROJECT 520 NW DAVIS ST., SUITE 215, PORTLAND, OR 97209	93-0903383	501(C)(3)	15,000				SUPPORT OF RESEARCH ACTIVITIES
(44) CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE, CLEVELAND, OH 44106	34-1018992	501(C)(3)	44,030				SUPPORT OF RESEARCH ACTIVITIES
(45) CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD, HOLLYWOOD, CA 90048	95-1644600	501(C)(3)	169,060				SUPPORT OF RESEARCH ACTIVITIES

(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
(46) CENTER FOR CONFLICT RESOLUTION 11 EAST ADAMS STREET, SUITE 500, CHICAGO, IL 60603-6334	36-2997680	501(C)(3)	40,000				SUPPORT OF RESEARCH ACTIVITIES
(47) CENTER FOR NEIGHBORHOOD TECHNOLOGY 2125 W. NORTH AVENUE, CHICAGO, IL 60647	36-2967283	501(C)(3)	353,775				SUPPORT OF RESEARCH ACTIVITIES
(48) CENTER FOR VETERANS RESEARCH AND EDUCATION 1 VETERANS DRIVE, MINNEAPOLIS, MN 55417	41-1652941	501(C)(3)	192,063				SUPPORT OF RESEARCH ACTIVITIES
(49) CENTERLINK, INC. PO BOX 24490, FORT LAUDERDALE, FL 33307	52-2292725		51,178				SUPPORT OF RESEARCH ACTIVITIES
(50) CENTRAL DUPAGE HOSPITAL ASSOCIATION 25 N. WINFIELD RD., WINFIELD, IL 60190	36-2513909	501(C)(3)	43,374				SUPPORT OF RESEARCH ACTIVITIES
(51) CHAPMAN UNIVERSITY 1 UNIVERSITY DRIVE, ORANGE, CA 92866-1005	95-1643992	501(C)(3)	47,241				SUPPORT OF RESEARCH ACTIVITIES
(52) CHICAGO ALLIANCE AGAINST SEXUAL EXPLOITATION (CAASE) 307 N MICHIGAN AVE SUITE 1818, CHICAGO, IL 60601	26-0220074	501(C)(3)	50,000				SUPPORT FOR ALUMNI FELLOWSHIP
(53) CHICAGO ASSOCIATION FOR RESEARCH AND EDUCATION IN SCIENCE 5000 S. 5TH AVE, BLDG ONE, RM C303, HINES, IL 60141	36-3334177	501(C)(3)	58,752				SUPPORT OF RESEARCH ACTIVITIES
(54) CHICAGO BOTANIC GARDEN 1000 LAKE COOK ROAD, GLENCOE, IL 60022	36-2225482	501(C)(3)	75,000				SUPPORT FOR COMMUNITY ORGANIZATION
(55) CHICAGO DEPARTMENT OF PUBLIC HEALTH 333 S. STATE STREET, ROOM 200, CHICAGO, IL 60604	36-6005820	115	76,889				SUPPORT OF RESEARCH ACTIVITIES
(56) CHICAGO HOPES FOR KIDS 641 WEST LAKE STREET, SUITE 200, CHICAGO, IL 60661	27-4360899	501(C)(3)	42,000				SUPPORT OF COMMUNITY ORGANIZATION
(57) CHICAGO LEARNING EXCHANGE 332 S. MICHIGAN, CHICAGO, IL 60604	82-3445770	501(C)(3)	26,700				SUPPORT OF COMMUNITY ORGANIZATION
(58) CHILDCARE NETWORK OF EVANSTON 1335 DODGE AVENUE, EVANSTON, IL 60201	23-7108030	501(C)(3)	30,625				SUPPORT OF COMMUNITY ORGANIZATION
(59) CHILDREN'S HOSPITAL BOSTON 300 LONGWOOD AVENUE, BOSTON, MA 02115-5724	04-2774441	501(C)(3)	67,125				SUPPORT OF RESEARCH ACTIVITIES
(60) CHILDREN'S HOSPITAL LOS ANGELES 4650 SUNSET BLVD., MAIL STOP #97, LOS ANGELES, CA 90027	95-6121916	501(C)(3)	6,100				SUPPORT OF RESEARCH ACTIVITIES
(61) CHILDREN'S HOSPITAL OF PHILADELPHIA 34TH STREET AND CIVIC CENTER BLVD, PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	439,001				SUPPORT OF RESEARCH ACTIVITIES

(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
(62) CHILDREN'S RESEARCH INSTITUTE 111 MICHIGAN AVE, NW, WASHINGTON, DC 20010	52-1654453	501(C)(3)	235,430				SUPPORT OF RESEARCH ACTIVITIES
(63) CHINESE AMERICAN SERVICE LEAGUE 2141 S TAN CT, CHICAGO, IL 60616	36-2984043	501(C)(3)	23,477				SUPPORT OF RESEARCH ACTIVITIES
(64) CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVE, CINCINNATI, OH 45229	31-0833936	501(C)(3)	494,963				SUPPORT OF RESEARCH ACTIVITIES
(65) CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVENUE, CLEVELAND, OH 44195	34-0714585	501(C)(3)	212,843				SUPPORT OF RESEARCH ACTIVITIES
(66) COLORADO SCHOOL OF MINES 1500 ILLINOIS STREET, GOLDEN, CO 80401	84-6000551	115	107,821				SUPPORT OF RESEARCH ACTIVITIES
(67) COLORADO STATE UNIVERSITY 2002 CAMPUS DELIVERY, FORT COLLINS, CO 80523-2002	84-6000454	115	103,490				SUPPORT OF RESEARCH ACTIVITIES
(68) COLUMBIA UNIVERSITY 615 W 131ST ST, NEW YORK, NY 10027	13-1624202	501(C)(3)	1,329,309				SUPPORT OF RESEARCH ACTIVITIES
(69) COMPASS TO CARE 6323 N AVONDALE AVE, SUITE 250, CHICAGO, IL 60631	27-0885690	501(C)(3)	139,608				SUPPORT OF COMMUNITY ORGANIZATION
(70) CORNELL UNIVERSITY 222 DAY HALL, ITHACA, NY 14853	15-0532082	501(C)(3)	360,587				SUPPORT OF RESEARCH ACTIVITIES
(71) DANA-FARBER CANCER INSTITUTE 44 BINNEY ST, BOSTON, MA 02115	04-2263040	501(C)(3)	32,905				SUPPORT OF RESEARCH ACTIVITIES
(72) DARTMOUTH COLLEGE 420 LEXINGTON AVE, NEW YORK, NY 10170	02-0222111	501(C)(3)	18,838				SUPPORT OF RESEARCH ACTIVITIES
(73) DEPAUL UNIVERSITY 1 E JACKSON, CHICAGO, IL 60604	36-2167048	501(C)(3)	142,972				SUPPORT OF RESEARCH ACTIVITIES
(74) DES MOINES AREA COMMUNITY COLLEGE 2006 SOUTH ANKENY BOULEVARD, ANKENY, IA 50023	42-0926354		26,302				SUPPORT OF RESEARCH ACTIVITIES
(75) DESTINATION TOMORROW INC 452 EAST 149TH ST., BRONX, NY 10455	80-0259180	501(C)(3)	7,500				SUPPORT OF RESEARCH ACTIVITIES
(76) DISCIDIUM BIOSCIENCES, LLC 2690 HILOLA ST., MIAMI, FL 33136	47-4363643		44,000				SUPPORT OF RESEARCH ACTIVITIES
(77) DIVERSE AND RESILIENT, INC. 2439 N. HOLTON STREET, MILWAUKEE, WI 53212	30-0084616	501(C)(3)	7,250				SUPPORT OF RESEARCH ACTIVITIES
(78) DOCTORS WITHOUT BORDERS USA, INC. P.O.BOX 5030, HAGERSTOWN, MD 21741	13-3433452	501(C)(3)	10,000				SUPPORT FOR COMMUNITY ORGANIZATION
(79) DUKE UNIVERSITY 2200 WEST MAIN ST., ERWIN SQUARE, SUITE 820, DURHAM, NC 27705	56-0532129	501(C)(3)	1,026,354				SUPPORT OF RESEARCH ACTIVITIES
(80) EMORY UNIVERSITY 201 DOWMAN DR. ATLANTA, GA 30322	58-0566256	501(C)(3)	446,577				SUPPORT OF RESEARCH ACTIVITIES
(81) EQUITY & EMPOWERMENT FOR EVANSTON FAMILIES 3536 HILLSIDE ROAD, EVANSTON, IL 60201	86-1839182	501(C)(3)	7,931				SUPPORT OF COMMUNITY ORGANIZATION

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(82) ERIE FAMILY HEALTH CENTER 1701 W SUPERIOR ST. CHICAGO, IL 60622	36-3088628	501(C)(3)	2,213,684				SUPPORT OF RESEARCH ACTIVITIES
(83) EVANSTON CHAMBER OF COMMERCE 1609 SHERMAN AVE, STE 205, EVANSTON, IL 60201	36-1051450	501(C)(6)	10,400				SUPPORT OF COMMUNITY ORGANIZATION
(84) EVANSTON COMMUNITY FOUNDATION 1560 SHERMAN AVE, SUITE 535, EVANSTON, IL 60201	36-3466802	501(C)(3)	98,309				SUPPORT OF COMMUNITY ORGANIZATION
(85) EVANSTON SCHOLARS 1234 SHERMAN, STE 213, EVANSTON, IL 60202	90-0685357	501(C)(3)	7,500				SUPPORT OF COMMUNITY ORGANIZATION
(86) EVANSTON/SKOKIE SCHOOL DISTRICT 65 1500 MCDANIEL AVENUE, EVANSTON, IL 60201	36-6007570	501(C)(3)	198,662				SUPPORT OF RESEARCH ACTIVITIES
(87) EXECUTIVE FRAMEWORKS, LTD. 2705 W. AGATITE AVE, #1, CHICAGO, IL 60625	37-1450886		135,064				SUPPORT OF RESEARCH ACTIVITIES
(88) FAMILY SERVICE OF RHODE ISLAND, INC. 9 PLEASANT ST., PROVIDENCE, RI 02906	05-0258858	501(C)(3)	7,099				SUPPORT OF RESEARCH ACTIVITIES
(89) FEINSTEIN INSTITUTE FOR MEDICAL RESEARCH 350 COMMUNITY DRIVE, MANHASSET, NY 11030	11-2673595	501(C)(3)	8,800				SUPPORT OF RESEARCH ACTIVITIES
(90) FIRST DEFENSE LEGAL AID 601 S. CALIFORNIA AVE., CHICAGO, IL 60612	01-0729555	501(C)(3)	50,000				SUPPORT FOR ALUMNI FELLOWSHIP
(91) FLORIDA STATE UNIVERSITY 600 W COLLEGE AVE, TALLAHASSEE, FL 32306	59-1961248	115	113,653				SUPPORT OF RESEARCH ACTIVITIES
(92) FOX CHASE CANCER CENTER 333 COTTMAN AVENUE, PHILADELPHIA, PA 19111	23-2003072	501(C)(3)	109,445				SUPPORT OF RESEARCH ACTIVITIES
(93) GAY AND LESBIAN COMMUNITY CENTER OF SOUTHERN NEVADA, INC. 401 S. MARYLAND PARKWAY, LAS VEGAS, NV 89101	94-3192750	501(C)(3)	15,000				SUPPORT OF RESEARCH ACTIVITIES
(94) GEISINGER CLINIC 100 NORTH ACADEMY AVENUE, DANVILLE, PA 17822	23-1995911	501(C)(3)	191,396				SUPPORT OF RESEARCH ACTIVITIES
(95) GEORGE MASON UNIVERSITY 4400 UNIVERSITY DRIVE, MSN 4C6, UNIVERSITY HALL, SUITE 3100, FAIRFAX, VA 22030	54-0836354	501(C)(3)	29,993				SUPPORT OF RESEARCH ACTIVITIES
(96) GEORGE WASHINGTON UNIVERSITY 2121 I ST NW, WASHINGTON, DC 20052	53-0196584	501(C)(3)	10,501				SUPPORT OF RESEARCH ACTIVITIES
(97) GEORGETOWN UNIVERSITY 37TH & O STREETS, NW, BOX 571168, WASHINGTON, DC 20057-1168	53-0196603	501(C)(3)	306,726				SUPPORT OF RESEARCH ACTIVITIES
(98) GEORGIA INSTITUTE OF TECHNOLOGY 505 TENTH ST, ATLANTA, GA 30332	58-0603146	501(C)(3)	311,847				SUPPORT OF RESEARCH ACTIVITIES

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(99) GEORGIA STATE UNIVERSITY 30 COURTLAND ST NE STE 217, ATLANTA, GA 30303	58-1845423	501(C)(3)	248,791				SUPPORT OF RESEARCH ACTIVITIES
(100) GINGIBER LABS 901 S. CEDAR ST., PALATINE, IL 60067-7176	46-5472360		605,798				SUPPORT OF RESEARCH ACTIVITIES
(101) GUIDING RIGHT, INC 1420 NE 23RD ST, OKLAHOMA CITY, OK 73111-3004	73-1572221	501(C)(3)	7,500				SUPPORT OF RESEARCH ACTIVITIES
(102) HARVARD UNIVERSITY MASSACHUSETTS HALL, CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	1,569,021				SUPPORT OF RESEARCH ACTIVITIES
(103) HEKTOEN INSTITUTE FOR MEDICAL RESEARCH 2240 W OGDEN AVE, CHICAGO, IL 60612	36-2244897	501(C)(3)	565,045				SUPPORT OF RESEARCH ACTIVITIES
(104) HENRY M. JACKSON FOUNDATION FOR THE ADVANCEMENT OF MILITARY MEDICINE 6720-A ROCKLEDGE DR, BETHESDA, MD 20817	52-1317896	501(C)(3)	41,093				SUPPORT OF RESEARCH ACTIVITIES
(105) HMM HOSPITALS CORPORATION 40 PROSPECT AVE., ROOM 212, HACKENSACK, NJ 07601	22-1487576	501(C)(3)	182,571				SUPPORT OF RESEARCH ACTIVITIES
(106) HOSPITAL FOR SPECIAL SURGERY 535 E. 70TH ST., NEW YORK, NY 10021	13-1624315		95,372				SUPPORT OF RESEARCH ACTIVITIES
(107) HOWARD BROWN HEALTH CENTER 4025 N. SHERIDAN ROAD, CHICAGO, IL 60613	36-2894128	501(C)(3)	195,800				SUPPORT OF RESEARCH ACTIVITIES
(108) I AM ABEL FOUNDATION 3721 LISMORE, FLOSSMOOR, IL 60422	47-4115154	501(C)(3)	31,000				SUPPORT OF COMMUNITY ORGANIZATION
(109) ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI ONE GUSTAVE L. LEVY PLACE, BOX 1075, NEW YORK, NY 10029	13-6171197	501(C)(3)	348,167				SUPPORT OF RESEARCH ACTIVITIES
(110) ILLINOIS-WISCONSIN SERTOMA REGIONAL CENTER FOR COMMUNICATIVE DISORDERS 10409 S. ROBERTS ROAD, PALOS HILLS, IL 60465	36-2882864	501(C)(3)	38,476				SUPPORT OF RESEARCH ACTIVITIES
(111) INDIANA UNIVERSITY 509 E. 3RD STREET, BLOOMINGTON, IN 47401	35-6001673	115	617,272				SUPPORT OF RESEARCH ACTIVITIES
(112) INDUS CONSULTING INC. 1198 COPPERFIELD CT., AURORA, IL 60504	47-4386637		777,720				SUPPORT OF RESEARCH ACTIVITIES
(113) INQUIRIUM, LLC 1332 N HALSTED ST., SUITE 101, CHICAGO, IL 60642	36-4412224		55,439				SUPPORT OF RESEARCH ACTIVITIES
(114) INSTITUTE FOR NONVIOLENCE CHICAGO 819 N. LEAMINGTON AVE., CHICAGO, IL 60651	81-1098722	501(C)(3)	39,014				SUPPORT OF RESEARCH ACTIVITIES
(115) IOWA STATE UNIVERSITY 1350 BEARDSHEAR HALL, 515 MORRILL R, AMES, IA 50011-2105	42-6004224	115	89,925				SUPPORT OF RESEARCH ACTIVITIES

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(116) J. DAVID GLADSTONE INSTITUTES 1650 OWENS ST., SAN FRANCISCO, CA 94158	23-7203666	501(C)(3)	1,171,026				SUPPORT OF RESEARCH ACTIVITIES
(117) JACKSON LABORATORY 600 MAIN STREET, BAR HARBOR, ME 04609	01-0211513	501(C)(3)	56,915				SUPPORT OF RESEARCH ACTIVITIES
(118) JAMES B MORAN CENTER 1900 A DEMPSTER ST, EVANSTON, IL 60202	36-3180725	501(C)(3)	25,000				SUPPORT OF COMMUNITY ORGANIZATION
(119) JEWISH FEDERATION OF METROPOLITAN CHICAGO 30 SOUTH WELLS STREET, CHICAGO, IL 60606	36-2167761	501(C)(3)	1,808,411				SUPPORT OF COMMUNITY ORGANIZATION
(120) JOHN H. STROGER, JR. HOSPITAL OF COOK COUNTY 1901 W. HARRISON, CHICAGO, IL 60612	23-7103817	115	240,051				SUPPORT OF RESEARCH ACTIVITIES
(121) JOHNS HOPKINS UNIVERSITY CHARLES ST AND UNIVERSITY, BALTIMORE, MD 21210	52-0595110	501(C)(3)	2,055,226				SUPPORT OF RESEARCH ACTIVITIES
(122) JUVENILE PROTECTIVE ASSOCIATION 1707 N. HALSTED ST., CHICAGO, IL 60614	36-2167765	501(C)(3)	66,500				SUPPORT FOR COMMUNITY ORGANIZATION
(123) KAISER FOUNDATION RESEARCH INSTITUTE 3800 N INTERSTATE AVE, PORTLAND, OR 97227	94-1105628	501(C)(3)	305,437				SUPPORT OF RESEARCH ACTIVITIES
(124) KITWARE, INC. 1712 ROUTE 9, SUITE 300, CLIFTON PARK, NY 12065	14-1802694		322,436				SUPPORT OF RESEARCH ACTIVITIES
(125) LA JOLLA INSTITUTE FOR ALLERGY AND IMMUNOLOGY 9420 ATHENA CIRCLE, LA JOLLA, CA 92037	33-0328688	501(C)(3)	43,852				SUPPORT OF RESEARCH ACTIVITIES
(126) LAKE COUNTY HEALTH DEPARTMENT AND COMMUNITY HEALTH CENTER 18 NORTH COUNTY ST., 9TH FLOOR, WAUKEGAN, IL 60085	36-6006600	115	15,000				SUPPORT OF RESEARCH ACTIVITIES
(127) LANZATECH INC. ISTP, 8045 LAMON AVENUE, SKOKIE, IL 60077	26-2599733		350,040				SUPPORT OF RESEARCH ACTIVITIES
(128) LATINOS SALUD, INC. 2330 WILTON DRIVE, WILTON MANORS, FL 33305	26-2763535	501(C)(3)	7,500				SUPPORT OF RESEARCH ACTIVITIES
(129) LES TURNER ALS FOUNDATION 541 N FAIRBANKS CT., STE 800, CHICAGO, IL 60611	36-3930139	501(C)(3)	22,000				SUPPORT OF COMMUNITY ORGANIZATION
(130) LOYOLA UNIVERSITY CHICAGO 1032 W SHERIDAN RD, CHICAGO, IL 60660	36-1408475	501(C)(3)	65,886				SUPPORT OF RESEARCH ACTIVITIES
(131) MAGEE-WOMENS RESEARCH INSTITUTE & FOUNDATION 3339 WARD ST, PITTSBURGH, PA 15132	25-1462312	501(C)(3)	578,888				SUPPORT OF RESEARCH ACTIVITIES
(132) MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT ST, BOSTON, MA 02114	04-1564655	501(C)(3)	863,597				SUPPORT OF RESEARCH ACTIVITIES

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(133) MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVE, CAMBRIDGE, MA 02142	04-2103594	501(C)(3)	908,232				SUPPORT OF RESEARCH ACTIVITIES
(134) MAYO CLINIC JACKSONVILLE 4500 SAN PABLO RD, JACKSONVILLE, FL 32224	59-3337028	501(C)(3)	38,232				SUPPORT OF RESEARCH ACTIVITIES
(135) MAYO CLINIC ROCHESTER 200 FIRST ST, SW, ROCHESTER, MN 55905	41-6011702	501(C)(3)	202,250				SUPPORT OF RESEARCH ACTIVITIES
(136) MCGAW YMCA 1000 GROVE STREET, EVANSTON, IL 60201	36-2169194	501(C)(3)	181,420				SUPPORT OF RESEARCH ACTIVITIES
(137) MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK RD, MILWAUKEE, WI 53226	39-0806261	501(C)(3)	19,948				SUPPORT OF RESEARCH ACTIVITIES
(138) MEDICAL FACULTY ASSOCIATES (GWU) 3811 N. FAIRFAX DRIVE, SUITE 1000, ARLINGTON, VA 22203	52-2220700	501(C)(3)	297,491				SUPPORT OF RESEARCH ACTIVITIES
(139) MEDICAL RESEARCH ANALYTICS AND INFORMATICS ALLIANCE 20 NORTH WACKER DRIVE, CHICAGO, IL 60606	45-3007467	501(C)(3)	67,505				SUPPORT OF RESEARCH ACTIVITIES
(140) MEDICAL UNIVERSITY OF SOUTH CAROLINA 179 ASHLEY AVE, CHARLESTON, SC 29425	57-6000722	115	201,401				SUPPORT OF RESEARCH ACTIVITIES
(141) MEMORIAL HERMANN HEALTH SYSTEM 909 FROSTWOOD, STE 2:100, HOUSTON, TX 77024-2301	74-1152597	501(C)(3)	13,510				SUPPORT OF RESEARCH ACTIVITIES
(142) METASTAR, INC. 2909 LANDMARK PLACE, MADISON, WI 53713	39-1332612	501(C)(3)	114,046				SUPPORT OF RESEARCH ACTIVITIES
(143) METROPOLITAN ASIAN FAMILY SERVICES 505 N. ROSELLE, ROSELLE, IL 60172-1013	36-3925432	501(C)(3)	48,331				SUPPORT OF RESEARCH ACTIVITIES
(144) MICHIGAN STATE UNIVERSITY 113 ANGELL BLDG, EAST LANSING, MI 48824	38-6005984	115	57,800				SUPPORT OF RESEARCH ACTIVITIES
(145) MIDDLEBURY COLLEGE OLD CHAPEL RD., MIDDLEBURY, VT 05753	03-0179298	501(C)(3)	46,416				SUPPORT OF RESEARCH ACTIVITIES
(146) MIDWESTERN UNIVERSITY 555 31ST ST, DOWNERS GROVE, IL 60515	36-3377698	501(C)(3)	10,995				SUPPORT OF RESEARCH ACTIVITIES
(147) MINUTE MOLECULAR DIAGNOSTICS 1800 SHERMAN AVE., SUITE 504, EVANSTON, IL 60201	82-1257438		798,557				SUPPORT OF RESEARCH ACTIVITIES
(148) MISSOURI UNIVERSITY OF SCIENCE AND TECHNOLOGY 300 W 12TH ST, 202 CENTENNIAL HALL, ROLLA, MO 65401	43-6003859	115	211,990				SUPPORT OF RESEARCH ACTIVITIES
(149) MOREHOUSE SCHOOL OF MEDICINE 720 WESTVIEW DR. SW, ATLANTA, GA 30310	58-1438873	501(C)(3)	6,000				SUPPORT OF RESEARCH ACTIVITIES

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(150) MUDLARK THEATER COMPANY 1417 HINMAN AVE, EVANSTON, IL 60201	36-4563236	501(C)(3)	23,750				SUPPORT OF COMMUNITY ORGANIZATION
(151) NANOCYTOMICS LLC 1801 MAPLE AVE., EVANSTON, IL 60201	45-1032728		173,665				SUPPORT OF RESEARCH ACTIVITIES
(152) NAPLES CHILDREN AND EDUCATION FOUNDATION, INC. 2590 GOODLETTE - FRANK ROAD NORTH, NAPLES, FL 34103	65-1001650	501(C)(3)	10,000				SUPPORT FOR COMMUNITY ORGANIZATION
(153) NATIONAL ACADEMY OF SCIENCES 2101 CONSTITUTION AVE NW, WASHINGTON, DC 20418	53-0196932	501(C)(3)	10,000				SUPPORT FOR COMMUNITY ORGANIZATION
(154) NATIONAL CENTER FOR YOUTH LAW 1212 BROADWAY SUITE 600, OAKLAND, CA 94612	94-2506933	501(C)(3)	50,000				SUPPORT FOR ALUMNI FELLOWSHIP
(155) NATIONAL MEDICAL FELLOWSHIPS INC 347 FIFTH AVE, SUITE 510, NEW YORK, NY 10016	01-0963657	501(C)(3)	5,750				SUPPORT OF COMMUNITY ORGANIZATION
(156) NATIONAL ORGANIZATION FOR RARE DISORDERS, INC. 55 KENOSIA AVENUE, DANBURY, CT 06810	13-3223946	501(C)(3)	42,481				SUPPORT OF RESEARCH ACTIVITIES
(157) NEW YORK UNIVERSITY 665 BROADWAY, NEW YORK, NY 10012-2331	13-5562308	501(C)(3)	396,513				SUPPORT OF RESEARCH ACTIVITIES
(158) NEW YORK UNIVERSITY SCHOOL OF MEDICINE 4 WASHINGTON PLACE, NEW YORK CITY, NY 10003	47-2613531	501(C)(3)	300,044				SUPPORT OF RESEARCH ACTIVITIES
(159) NORTH CAROLINA STATE UNIVERSITY 2711 FOUNDERS DR, RALEIGH, NC 27695	56-6000756	115	8,017				SUPPORT OF RESEARCH ACTIVITIES
(160) NORTHEASTERN ILLINOIS UNIVERSITY 5500 N. ST. LOUIS AVE., CHICAGO, IL 60625	36-6009515	115	9,017				SUPPORT OF RESEARCH ACTIVITIES
(161) NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVE., BOSTON, MA 02115	04-1679980	115	171,460				SUPPORT OF RESEARCH ACTIVITIES
(162) NORTHERN CALIFORNIA INSTITUTE FOR RESEARCH AND EDUCATION, INC. 4150 CLEMENT STREET, SUITE 151NC, SAN FRANCISCO, CA 94121-1545	94-3084159	501(C)(3)	202,127				SUPPORT OF RESEARCH ACTIVITIES
(163) NORTHERN ILLINOIS UNIVERSITY 1425 W LINCOLN HWY, DEKALB, IL 60115	36-6086819	501(C)(3)	65,328				SUPPORT OF RESEARCH ACTIVITIES
(164) NORTSHORE UNIVERSITY HEALTHSYSTEM 2650 RIDGE AVE, EVANSTON, IL 60201	36-4191793	501(C)(3)	1,308,277				SUPPORT OF RESEARCH ACTIVITIES
(165) NORTHWEST COMMUNITY HOSPITAL 800 WEST CENTRAL ROAD, ARLINGTON HEIGHTS, IL 60005	36-2340313	501(C)(3)	18,332				SUPPORT OF RESEARCH ACTIVITIES
(166) NORTHWESTERN MEMORIAL HOSPITAL 240 E. ONTARIO STREET, CHICAGO, IL 60611	37-0960170	501(C)(3)	299,597				SUPPORT OF RESEARCH ACTIVITIES

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(167) NORTHWESTERN UNIVERSITY 633 CLARK STREET, EVANSTON, IL 60208	36-2167817	501(C)(3)	46,000				SUPPORT FOR FELLOWSHIPS
(168) NORTHWESTERN UNIVERSITY SETTLEMENT ASSOCIATION 1400 W AUGUST BLVD, CHICAGO, IL 60642	36-2167818	501(C)(3)	22,638				SUPPORT OF COMMUNITY ORGANIZATION
(169) NUMFOCUS, INC. PO BOX 90596, AUSTIN, TX 78709	45-4547709		33,770				SUPPORT OF RESEARCH ACTIVITIES
(170) OAK RIDGE ASSOCIATED UNIVERSITIES INC. 1 BETHEL VALLEY RD., OAK RIDGE, TN 37830	62-1788235	501(C)(3)	114,067				SUPPORT OF RESEARCH ACTIVITIES
(171) OHIO STATE UNIVERSITY 154 W 12TH AVE, COLUMBUS, OH 43210	31-6025986	115	382,851				SUPPORT OF RESEARCH ACTIVITIES
(172) OHIOHEALTH RESEARCH INSTITUTE 3545 OLENTANGY RIVER ROAD, SUITE 300, COLUMBUS, OH 43214	31-6059784	501(C)(3)	5,695				SUPPORT OF RESEARCH ACTIVITIES
(173) OPEN COMMUNITIES 1880 OAK ST, 301, EVANSTON, IL 60201	36-2934709	501(C)(3)	7,500				SUPPORT OF COMMUNITY ORGANIZATION
(174) OREGON HEALTH & SCIENCE UNIVERSITY 3181 SOUTHWEST SAM JACKSON PARK RD, PORTLAND, OR 97239	93-1176109	115	381,999				SUPPORT OF RESEARCH ACTIVITIES
(175) ORLEANS PUBLIC DEFENDERS OFFICE 2601 TULANE AVENUE, SUITE 700, NEW ORLEANS, LA 70119	72-0802780	501(C)(3)	50,000				SUPPORT FOR ALUMNI FELLOWSHIP
(176) PEACE DEVELOPMENT FUND PO BOX 1280, AMHERST, MA 01004	04-2738794	501(C)(3)	37,500				SUPPORT OF COMMUNITY ORGANIZATION
(177) PENNSYLVANIA STATE UNIVERSITY 308 OLD MAIN, UNIVERSITY PARK, PA 16802	24-6000376	115	192,671				SUPPORT OF RESEARCH ACTIVITIES
(178) PRINCETON UNIVERSITY P.O. BOX 36, ORPA, 4 NEW SOUTH BLDG, PRINCETON, NJ 08544	21-0634501	501(C)(3)	178,736				SUPPORT OF RESEARCH ACTIVITIES
(179) PURDUE UNIVERSITY 610 PURDUE MALL, WEST LAFAYETTE, IN 47906	35-6002041	115	309,180				SUPPORT OF RESEARCH ACTIVITIES
(180) Q-STATE BIOSCIENCES, INC. 179 SIDNEY STREET, CAMBRIDGE, MA 02139	83-2095181		28,051				SUPPORT OF RESEARCH ACTIVITIES
(181) QUEENS COLLEGE, CUNY 65-30 KISSENA BLVD, QUEENS, NY 11367	13-1988190	501(C)(3)	70,460				SUPPORT OF RESEARCH ACTIVITIES
(182) QUESTEK INNOVATIONS LLC 1820 RIDGE AVENUE, EVANSTON, IL 60201	36-4116425		179,332				SUPPORT OF RESEARCH ACTIVITIES
(183) RAND CORPORATION 1776 MAIN STREET, SANTA MONICA, CA 90401-3297	95-1958142	501(C)(3)	38,217				SUPPORT OF RESEARCH ACTIVITIES
(184) RAVINIA FESTIVAL ASSOCIATION 418 SHERIDAN ROAD, HIGHLAND PARK, IL 60035	36-6002273	501(C)(3)	7,000				SUPPORT OF COMMUNITY ORGANIZATION

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(185) READING IN MOTION 65 EAST WACKER PLACE SUITE 1800, CHICAGO, IL 60601	32-3235853	501(C)(3)	42,000				SUPPORT OF COMMUNITY ORGANIZATION
(186) REFUGEE AND IMMIGRANT CENTER FOR EDUCATION AND LEGAL SERVICES (RAICES) 1305 N FLORES STREET, SAN ANTONIO, TX 78212	74-2436920	501(C)(3)	50,000				SUPPORT FOR ALUMNI FELLOWSHIP
(187) REGENSTRIEF INSTITUTE, INC. 410 WEST 10TH STREET, SUITE 2000, INDIANAPOLIS, IN 46202-3012	30-0007730	501(C)(3)	10,373				SUPPORT OF RESEARCH ACTIVITIES
(188) REHABILITATION INSTITUTE OF CHICAGO 345 E SUPERIOR ST, CHICAGO, IL 60611	36-2256036	501(C)(3)	1,124,109				SUPPORT OF RESEARCH ACTIVITIES
(189) RESEARCH FOUNDATION FOR MENTAL HYGIENE, INC. 150 BROADWAY, SUITE 301, MENANDS, NY 12204	14-1410842	501(C)(3)	151,628				SUPPORT OF RESEARCH ACTIVITIES
(190) RICE UNIVERSITY 6100 MAIN ST, HOUSTON, TX 77005	74-1109620	501(C)(3)	1,850,994				SUPPORT OF RESEARCH ACTIVITIES
(191) ROCKEFELLER UNIVERSITY 1230 YORK AVE., BOX 259, NEW YORK CITY, NY 10021	13-1624158	501(C)(3)	241,035				SUPPORT OF RESEARCH ACTIVITIES
(192) ROCKMAN ET AL 49 GEARY STREET, SUITE 530, SAN FRANCISCO, CA 94108	94-3400371		22,800				SUPPORT OF RESEARCH ACTIVITIES
(193) RUSH UNIVERSITY MEDICAL CENTER 1653 W CONGRESS PARKWAY, CHICAGO, IL 60612	36-2174823	501(C)(3)	1,116,760				SUPPORT OF RESEARCH ACTIVITIES
(194) RUTGERS UNIVERSITY 57 US HIGHWAY 1, NEW BRUNSWICK, NJ 08901	22-6001086	501(C)(3)	596,153				SUPPORT OF RESEARCH ACTIVITIES
(195) SAGE BIONETWORKS 1100 FAIRVIEW AVE N., MAILSTOP M1-C108, SEATTLE, WA 98109	26-4489946	501(C)(3)	1,246,685				SUPPORT OF RESEARCH ACTIVITIES
(196) SAINT LOUIS UNIVERSITY 221 NORTH GRAND BOULEVARD, ST LOUIS, MO 63103	43-0654872	501(C)(3)	39,805				SUPPORT OF RESEARCH ACTIVITIES
(197) SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 N. TORREY PINES ROAD, LA JOLLA, CA 92037	95-2160097	501(C)(3)	392,434				SUPPORT OF RESEARCH ACTIVITIES
(198) SAN FRANCISCO STATE UNIVERSITY 1600 HOLLOWAY AVE., SAN FRANCISCO, CA 94132	26-1169717	115	25,298				SUPPORT OF RESEARCH ACTIVITIES
(199) SCHLESINGER GROUP HOLDINGS, LLC 101 WOOD AVE., ISELIN, NJ 08830	75-3201206		926,574				SUPPORT OF RESEARCH ACTIVITIES
(200) SCRIPPS RESEARCH INSTITUTE 10550 N TORREY PINES RD, LA JOLLA, CA 92037	33-0435954	501(C)(3)	1,820,519				SUPPORT OF RESEARCH ACTIVITIES

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(201) SEATTLE CHILDREN'S RESEARCH INSTITUTE 1904 9TH AVE, SEATTLE, WA 98105	91-1156519	501(C)(3)	52,394				SUPPORT OF RESEARCH ACTIVITIES
(202) SECOND BAPTIST CHURCH 1717 BENSON AVE, EVANSTON, IL 60201	36-2523551	501(C)(3)	37,500				SUPPORT OF COMMUNITY ORGANIZATION
(203) SHENANDOAH UNIVERSITY 1460 UNIVERSITY DRIVE, WINCHESTER, VA 22601	54-0525605	501(C)(3)	27,873				SUPPORT OF RESEARCH ACTIVITIES
(204) SKOKIE PARK DISTRICT 9300 WEBER PARK PL., SKOKIE, IL 60077	36-6006104	115	7,673				SUPPORT OF RESEARCH ACTIVITIES
(205) SOCIETY OF HOSPITAL MEDICINE 1500 SPRING GARDEN, SUITE 501, PHILADELPHIA, PA 19130	23-3057353	501(C)(3)	10,735				SUPPORT OF RESEARCH ACTIVITIES
(206) SOCIETY OF THORACIC SURGEONS 633 N. SAINT CLAIR ST., SUITE 2100, CHICAGO, IL 60611	36-3022713	501(C)(6)	10,403				SUPPORT OF RESEARCH ACTIVITIES
(207) SOUTHWEST COMMUNITY HEALTH CENTER, INC 46 ALBION ST, BRIDGEPORT, CT 06605-2602	06-1023013	501(C)(3)	7,500				SUPPORT OF RESEARCH ACTIVITIES
(208) SRI INTERNATIONAL 333 RAVENSWOOD AVE., MENLO PARK, CA 94025	94-1160950	501(C)(3)	30,500				SUPPORT OF RESEARCH ACTIVITIES
(209) ST. JOSEPH'S HOSPITAL AND MEDICAL CENTER 350 W THOMAS RD, PHOENIX, AZ 85013	72-1561134	501(C)(3)	100,014				SUPPORT OF RESEARCH ACTIVITIES
(210) ST. JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE, MEMPHIS, TN 38105	62-0646012	501(C)(3)	154,453				SUPPORT OF RESEARCH ACTIVITIES
(211) STANFORD UNIVERSITY 295 GALVEZ ST, STANFORD, CA 94305	94-1156365	501(C)(3)	1,163,946				SUPPORT OF RESEARCH ACTIVITIES
(212) STATE UNIVERSITY OF NEW YORK AT ALBANY 1400 WASHINGTON AVE., MSC 100A, ALBANY, NY 12222	14-1368361	501(C)(3)	84,048				SUPPORT OF RESEARCH ACTIVITIES
(213) STEM SCHOOL EVANSTON 8625 CENTRAL PARK AVE, SKOKIE, IL 60076	85-2070403	501(C)(3)	27,000				SUPPORT OF COMMUNITY ORGANIZATION
(214) STEP-UP INCORPORATED 4755 KINGSWAY DR., SUITE 105, INDIANAPOLIS, IN 46205	35-2145743	501(C)(3)	14,512				SUPPORT OF RESEARCH ACTIVITIES
(215) STEVENS INSTITUTE OF TECHNOLOGY 1 CASTLE POINT ON HUDSON, HOBOKEN, NJ 07030	22-1487354	501(C)(3)	71,319				SUPPORT OF RESEARCH ACTIVITIES
(216) STOWERS INSTITUTE FOR MEDICAL RESEARCH 1000 E. 50TH ST., KANSAS CITY, MO 64110	20-2993509	501(C)(3)	78,041				SUPPORT OF RESEARCH ACTIVITIES
(217) TEMPLE UNIVERSITY 1801 N BROAD STREET, PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	129,732				SUPPORT OF RESEARCH ACTIVITIES

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(218) TERA-PRINT LLC 2145 SHERIDAN RD., ROOM JG38, EVANSTON, IL 60208	47-5619116		25,338				SUPPORT OF RESEARCH ACTIVITIES
(219) TEXAS A&M UNIVERSITY 400 HARVEY MITCHELL PKWY S, SUITE 300, COLLEGE STATION, TX 77845-4321	74-6000531	115	18,558				SUPPORT OF RESEARCH ACTIVITIES
(220) THE BLUE HAT FOUNDATION INC 46 E 26TH ST, CHICAGO, IL 60616	47-5292679	501(C)(3)	20,000				SUPPORT OF COMMUNITY ORGANIZATION
(221) THE ENDELEO INSTITUTE 901 EAST 95TH STREET, CHICAGO, IL 60619	45-3209641	501(C)(3)	30,000				SUPPORT OF COMMUNITY ORGANIZATION
(222) THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO 7703 FLOYD CURL DR., SAN ANTONIO, TX 78229	74-1586031	115	27,567				SUPPORT OF RESEARCH ACTIVITIES
(223) TOTAL RESOURCE COMMUNITY DEVELOPMENT ORGANIZATION 1415 WEST 104TH STREET, CHICAGO, IL 60643	58-2590693	501(C)(3)	89,594				SUPPORT OF RESEARCH ACTIVITIES
(224) TRANSLATIONAL GENOMICS RESEARCH INSTITUTE 445 N. 5TH STREET, SUITE 600, PHOENIX, AZ 85004	75-3065445	501(C)(3)	179,289				SUPPORT OF RESEARCH ACTIVITIES
(225) TUFTS MEDICAL CENTER 800 WASHINGTON STREET, BOSTON, MA 02111	27-0440772	501(C)(3)	249,391				SUPPORT OF RESEARCH ACTIVITIES
(226) TULANE UNIVERSITY 6823 ST CHARLES AVE, NEW ORLEANS, LA 70118	72-0423889	501(C)(3)	535,571				SUPPORT OF RESEARCH ACTIVITIES
(227) UCHICAGO ARGONNE, LLC, ARGONNE NATIONAL LABORATORY 9700 S. CASS AVE, LEMONT, IL 60439	68-0628477	115	152,030				SUPPORT OF RESEARCH ACTIVITIES
(228) UNIVERSITY OF ALABAMA AT BIRMINGHAM 1530 3RD AVE SOUTH, BIRMINGHAM, AL 35294	63-6005396	115	563,738				SUPPORT OF RESEARCH ACTIVITIES
(229) UNIVERSITY OF ARIZONA 617 N SANTA RITA AVE, TUCSON, AZ 85721	74-2652689	115	569,844				SUPPORT OF RESEARCH ACTIVITIES
(230) UNIVERSITY OF CALIFORNIA, BERKELEY 200 CALIFORNIA HALL, BERKELEY, CA 94720	94-6002123	115	445,248				SUPPORT OF RESEARCH ACTIVITIES
(231) UNIVERSITY OF CALIFORNIA, DAVIS ONE SHIELDS AVE, DAVIS, CA 95616	94-6036494	115	230,745				SUPPORT OF RESEARCH ACTIVITIES
(232) UNIVERSITY OF CALIFORNIA, IRVINE OFFICE OF ADMINISTRATION, 5171 CALIFORNIA AVE., SUITE 150, IRVINE, CA 92697	95-2226406	115	429,029				SUPPORT OF RESEARCH ACTIVITIES
(233) UNIVERSITY OF CALIFORNIA, LOS ANGELES 11000 KINROSS AVE., SUITE 211, LOS ANGELES, CA 90095	95-6006143	115	1,249,098				SUPPORT OF RESEARCH ACTIVITIES

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(234) UNIVERSITY OF CALIFORNIA, RIVERSIDE SPONSORED PROGRAMS ADMIN., 249 UNIVERSITY OFFICE BUILDING, RIVERSIDE, CA 92521-0217	95-6006142	501(C)(3)	748,577				SUPPORT OF RESEARCH ACTIVITIES
(235) UNIVERSITY OF CALIFORNIA, SAN DIEGO 9500 GILMAN DR, LA JOLLA, CA 92093	95-6006144	115	805,672				SUPPORT OF RESEARCH ACTIVITIES
(236) UNIVERSITY OF CALIFORNIA, SAN FRANCISCO 505 PARNASSUS AVE, SAN FRANCISCO, CA 94143	56-6001393	115	1,327,921				SUPPORT OF RESEARCH ACTIVITIES
(237) UNIVERSITY OF CALIFORNIA, SANTA CRUZ 1156 HIGH ST., SANTA CRUZ, CA 95064	95-1539563	501(C)(3)	23,763				SUPPORT OF RESEARCH ACTIVITIES
(238) UNIVERSITY OF CENTRAL FLORIDA 12201 RESEARCH PARKWAY, SUITE 501, ORLANDO, FL 32826-3246	59-2924021	501(C)(3)	48,799				SUPPORT OF RESEARCH ACTIVITIES
(239) UNIVERSITY OF CHICAGO 5801 S ELLIS AVE, CHICAGO, IL 60637	36-2177139	501(C)(3)	10,235,582				SUPPORT OF RESEARCH ACTIVITIES
(240) UNIVERSITY OF CHICAGO, NATIONAL OPINION RESEARCH CENTER 1155 EAST 60TH STREET, CHICAGO, IL 60637	36-2167808	501(C)(3)	192,348				SUPPORT OF RESEARCH ACTIVITIES
(241) UNIVERSITY OF CINCINNATI 2600 CLIFTON AVE, CINCINNATI, OH 45221	31-6000989	115	63,014				SUPPORT OF RESEARCH ACTIVITIES
(242) UNIVERSITY OF COLORADO AT BOULDER 914 BROADWAY ST, BOULDER, CO 80302	84-6000555	501(C)(3)	703,748				SUPPORT OF RESEARCH ACTIVITIES
(243) UNIVERSITY OF CONNECTICUT 263 FARMINGTON AVE, FARMINGTON, CT 06030	06-0772160	115	163,765				SUPPORT OF RESEARCH ACTIVITIES
(244) UNIVERSITY OF CONNECTICUT HEALTH CENTER 263 FARMINGTON AVENUE, FARMINGTON, CT 06030-5335	06-6000798	115	12,313				SUPPORT OF RESEARCH ACTIVITIES
(245) UNIVERSITY OF DELAWARE HULLIHEN HALL 175 S COLLEGE AV, NEWARK, DE 19716	51-6000297	501(C)(3)	245,713				SUPPORT OF RESEARCH ACTIVITIES
(246) UNIVERSITY OF DENVER PO BOX 911811, DENVER, CO 80291	84-0404231	501(C)(3)	51,742				SUPPORT OF RESEARCH ACTIVITIES
(247) UNIVERSITY OF FLORIDA 201 CRISER HALL, GAINESVILLE, FL 32611	59-6002052	115	395,307				SUPPORT OF RESEARCH ACTIVITIES
(248) UNIVERSITY OF GEORGIA RESEARCH FOUNDATION, INC. 617 BOYD GRADUATE STUDIES RESE, ATHENS, GA 30602-7411	58-1353149	501(C)(3)	192,159				SUPPORT OF RESEARCH ACTIVITIES
(249) UNIVERSITY OF HAWAII 2840 KOLOWALU ST., HONOLULU, HI 96822	99-6000354	115	25,791				SUPPORT OF RESEARCH ACTIVITIES
(250) UNIVERSITY OF HOUSTON 4800 CALHOUN, 316 E. CULLEN BUILDING, HOUSTON, TX 77204-2015	74-6001399	115	19,390				SUPPORT OF RESEARCH ACTIVITIES

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(251) UNIVERSITY OF ILLINOIS AT CHICAGO 809 S. MARSHFIELD AVENUE, MB 502, M/C 551, CHICAGO, IL 60612-4305	37-6000511	115	5,726,532				SUPPORT OF RESEARCH ACTIVITIES
(252) UNIVERSITY OF IOWA 100 MOSSMAN BUSINESS SVCS BLDG, IOWA CITY, IA 52245	42-6004813	115	251,146				SUPPORT OF RESEARCH ACTIVITIES
(253) UNIVERSITY OF KANSAS 2385 IRVING HILL ROAD, LAWRENCE, KS 66045-7568	48-0680117	501(C)(3)	240,104				SUPPORT OF RESEARCH ACTIVITIES
(254) UNIVERSITY OF KANSAS MEDICAL CENTER RESEARCH INSTITUTE 3901 RAINBOW BOULEVARD, MSN 1039, KANSAS CITY, KS 66160	48-1108830	501(C)(3)	15,538				SUPPORT OF RESEARCH ACTIVITIES
(255) UNIVERSITY OF KENTUCKY 100 FUNKHOUSER BLDG, LEXINGTON, KY 40506	61-6001218	115	55,967				SUPPORT OF RESEARCH ACTIVITIES
(256) UNIVERSITY OF LOUISIANA AT LAFAYETTE 104 UNIVERSITY CIRCLE, LAFAYETTE, LA 70503	72-6000820	115	697,364				SUPPORT OF RESEARCH ACTIVITIES
(257) UNIVERSITY OF MARYLAND 2108 MITCHELL BLDG, COLLEGE PARK, MD 20742	52-6002033	115	14,622				SUPPORT OF RESEARCH ACTIVITIES
(258) UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL 70 BUTTERFIELD TERRACE, AMHERST, MA 01003	04-3167352	115	432,376				SUPPORT OF RESEARCH ACTIVITIES
(259) UNIVERSITY OF MIAMI 1252 MEMORIAL DR, CORAL GABLES, FL 33146	59-0624458	501(C)(3)	404,193				SUPPORT OF RESEARCH ACTIVITIES
(260) UNIVERSITY OF MICHIGAN 515 E JEFFERSON, ANN ARBOR, MI 48109	38-6000134	115	856,932				SUPPORT OF RESEARCH ACTIVITIES
(261) UNIVERSITY OF MINNESOTA 101 PLEASANT ST, MINNEAPOLIS, MN 55455	41-6007513	115	1,381,689				SUPPORT OF RESEARCH ACTIVITIES
(262) UNIVERSITY OF MISSISSIPPI MEDICAL CENTER 2500 N. STATE ST., JACKSON, MS 39216	64-0938566	115	31,450				SUPPORT OF RESEARCH ACTIVITIES
(263) UNIVERSITY OF NEBRASKA MEDICAL CENTER 987835 NEBRASKA MEDICAL CENTER, OMAHA, NE 68198	47-0491233	115	18,226				SUPPORT OF RESEARCH ACTIVITIES
(264) UNIVERSITY OF NEBRASKA-LINCOLN 3835 HOLDREGE ST., LINCOLN, NE 68583	47-0049123	115	55,969				SUPPORT OF RESEARCH ACTIVITIES
(265) UNIVERSITY OF NEVADA, RENO OFFICE OF SPONSORED PROJECTS, RENO, NV 89557	88-6000024	115	122,448				SUPPORT OF RESEARCH ACTIVITIES
(266) UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL 9201 UNIVERSITY CITY BLVD, CHARLOTTE, NC 28223	56-6000642	115	154,138				SUPPORT OF RESEARCH ACTIVITIES

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(267) UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE 9201 UNIVERSITY CITY BLVD., CHARLOTTE, NC 28223-0001	56-0791228	115	89,345				SUPPORT OF RESEARCH ACTIVITIES
(268) UNIVERSITY OF NOTRE DAME 317 MAIN BUILDING, NOTRE DAME, IN 46556	35-0868188	501(C)(3)	16,567				SUPPORT OF RESEARCH ACTIVITIES
(269) UNIVERSITY OF OKLAHOMA 660 PARRINGTON OVAL, NORMAN, OK 73019	73-6017987	115	57,883				SUPPORT OF RESEARCH ACTIVITIES
(270) UNIVERSITY OF PENNSYLVANIA 3451 WALNUT ST, PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	566,005				SUPPORT OF RESEARCH ACTIVITIES
(271) UNIVERSITY OF PITTSBURGH 4227 FIFTH AVE, PITTSBURGH, PA 15260	25-0965591	501(C)(3)	1,501,863				SUPPORT OF RESEARCH ACTIVITIES
(272) UNIVERSITY OF PUERTO RICO MEDICAL SCIENCES CAMPUS P. O. BOX 365067, SAN JUAN, PR 00936- 5067	66-0433760	115	207,312				SUPPORT OF RESEARCH ACTIVITIES
(273) UNIVERSITY OF RHODE ISLAND 70 LOWER COLLEGE ROAD, KINGSTON, RI 02881	22-3011455	115	128,560				SUPPORT OF RESEARCH ACTIVITIES
(274) UNIVERSITY OF ROCHESTER 518 HYLAN BUILDING, ROCHESTER, NY 14627	16-0743209	501(C)(3)	513,670				SUPPORT OF RESEARCH ACTIVITIES
(275) UNIVERSITY OF SOUTH FLORIDA - TAMPA 4202 E. FOWLER AVE, TAMPA, FL 33620	59-3102112	115	120,716				SUPPORT OF RESEARCH ACTIVITIES
(276) UNIVERSITY OF SOUTHERN CALIFORNIA 1540 ALCAZAR ST, LOS ANGELES, CA 90089	95-1642394	501(C)(3)	202,590				SUPPORT OF RESEARCH ACTIVITIES
(277) UNIVERSITY OF TENNESSEE, KNOXVILLE 62 SOUTH DUNLAP ST., SUITE 300, MEMPHIS, TN 38163	62-6001636	501(C)(3)	5,654				SUPPORT OF RESEARCH ACTIVITIES
(278) UNIVERSITY OF TEXAS AT AUSTIN 2100 SAN JACINTO BLVD, AUSTIN, TX 78712	74-6000203	115	324,254				SUPPORT OF RESEARCH ACTIVITIES
(279) UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON 7000 FANNIN, UCT 1006, HOUSTON, TX 77030	74-1761309	115	52,017				SUPPORT OF RESEARCH ACTIVITIES
(280) UNIVERSITY OF TEXAS M. D. ANDERSON CANCER CENTER 1515 HOLCOMBE BLVD, HOUSTON, TX 77030	76-0273984	115	30,592				SUPPORT OF RESEARCH ACTIVITIES
(281) UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON 301 UNIVERSITY BOULEVARD, GALVESTON, TX 77555-0657	74-6000949	501(C)(3)	65,813				SUPPORT OF RESEARCH ACTIVITIES

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(282) UNIVERSITY OF TEXAS SOUTHWESTERN MED CTR AT DALLAS 5323 HARRY HINES BLVD, DALLAS, TX 75390	75-6002868	115	476,800				SUPPORT OF RESEARCH ACTIVITIES
(283) UNIVERSITY OF UTAH 201 S 1460 E, SALT LAKE CITY, UT 84112	87-6000121	115	512,162				SUPPORT OF RESEARCH ACTIVITIES
(284) UNIVERSITY OF VIRGINIA 1 COLLEGE PARK, WISE, VA 24293	54-6001796	115	893,107				SUPPORT OF RESEARCH ACTIVITIES
(285) UNIVERSITY OF WASHINGTON 1410 NE CAMPUS PARKWAY, SEATTLE, WA 98195	91-6001537	115	715,276				SUPPORT OF RESEARCH ACTIVITIES
(286) UNIVERSITY OF WISCONSIN-MADISON 750 UNIVERSITY AVENUE, 4TH FLOOR, A.W. PETERSON BUILDING, MADISON, WI 53706-1490	39-1805963	501(C)(3)	656,157				SUPPORT OF RESEARCH ACTIVITIES
(287) UTAH AIDS FOUNDATION 1408 SOUTH 1100 EAST, SALT LAKE CITY, UT 84105	87-0455172	501(C)(3)	30,152				SUPPORT OF RESEARCH ACTIVITIES
(288) UTAH STATE UNIVERSITY PO BOX 413135, SALT LAKE CITY, UT 84141	87-6000528	115	73,134				SUPPORT OF RESEARCH ACTIVITIES
(289) VANDERBILT UNIVERSITY 2201 WEST END AVE., NASHVILLE, TN 37235	62-0476822	501(C)(3)	914,989				SUPPORT OF RESEARCH ACTIVITIES
(290) VILLAGE OF SKOKIE HEALTH DEPARTMENT 5127 OAKTON STREET, SKOKIE, IL 60077	36-6006103	115	62,603				SUPPORT OF RESEARCH ACTIVITIES
(291) VIRGINIA COMMONWEALTH UNIVERSITY P.O. BOX 980568, RICHMOND, VA 23298- 0568	54-6001758	501(C)(3)	95,492				SUPPORT OF RESEARCH ACTIVITIES
(292) VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY OFFICE OF SPONSORED PROGRAMS, 300 TURNER STREET NW, BLACKSBURG, VA 24061	54-6001805	501(C)(3)	111,836				SUPPORT OF RESEARCH ACTIVITIES
(293) WAKE FOREST UNIVERSITY HEALTH SCIENCES 1834 WAKE FOREST RD, WINSTON-SALEM, NC 27106	90-0222618	501(C)(3)	103,953				SUPPORT OF RESEARCH ACTIVITIES
(294) WALGREEN CO. 200 WILMOT ROAD, DEERFIELD, IL 60015	36-1924025		85,194				SUPPORT OF RESEARCH ACTIVITIES
(295) WASHINGTON UNIVERSITY IN ST. LOUIS ONE BROOKINGS DR, ST. LOUIS, MO 63130	43-0653611	501(C)(3)	1,361,317				SUPPORT OF RESEARCH ACTIVITIES
(296) WAYNE STATE UNIVERSITY P.O. BOX 02759, DETROIT, MI 48202	38-3555142	501(C)(3)	34,794				SUPPORT OF RESEARCH ACTIVITIES
(297) WEST VIRGINIA UNIVERSITY RESEARCH CORPORATION PO BOX 6005, ONE WATERFRONT PLACE, MORGANTOWN, WV 26506	55-0665758	501(C)(3)	23,070				SUPPORT OF RESEARCH ACTIVITIES
(298) WESTERN MICHIGAN UNIVERSITY 1903 W. MICHIGAN AVE., KALAMAZOO, MI 49008-5200	38-6007327	501(C)(3)	6,228				SUPPORT OF RESEARCH ACTIVITIES

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(299) WESTSIDE INSTITUTE FOR SCIENCE AND EDUCATION 820 S. DAMEN AVENUE, CHICAGO, IL 60612	36-3712391	501(C)(3)	6,382				SUPPORT OF RESEARCH ACTIVITIES
(300) WILL COUNTY HEALTH DEPARTMENT 501 ELLA AVE, JOLIET, IL 60433	36-6006672	115	15,000				SUPPORT OF RESEARCH ACTIVITIES
(301) WINGS PROGRAM, INC P.O. BOX 95615, PALATINE, IL 60095	36-3456061	501(C)(3)	42,000				SUPPORT OF COMMUNITY ORGANIZATION
(302) WOMAN'S HOSPITAL FOUNDATION 100 WOMAN'S WAY, BATON ROUGE, LA 70817	72-0652905	501(C)(3)	5,867				SUPPORT OF RESEARCH ACTIVITIES
(303) WOMEN INITIATING NEW DIRECTIONS PO BOX 8101, EVANSTON, IL 60204	84-3592931	501(C)(3)	15,200				SUPPORT OF COMMUNITY ORGANIZATION
(304) WRIGHT STATE UNIVERSITY 3640 COLONEL GLENN HWY, DAYTON, OH 45435	31-0732831	115	254,135				SUPPORT OF RESEARCH ACTIVITIES
(305) YALE UNIVERSITY 140 PROSPECT ST, NEW HAVEN, CT 06511	06-0646973	501(C)(3)	66,941				SUPPORT OF RESEARCH ACTIVITIES
(306) YMCA OF THE USA 101 NORTH WACKER DRIVE, CHICAGO, IL 60606	36-3258696	501(C)(3)	11,519				SUPPORT OF RESEARCH ACTIVITIES
(307) YOUNG, BLACK, AND LIT 1200 PITNER AVE, EVANSTON, IL 60202	83-0750153	501(C)(3)	6,000				SUPPORT OF COMMUNITY ORGANIZATION
(308) YOUTH JOB CENTER 1114 CHURCH STREET, EVANSTON, IL 60201	36-3252809	501(C)(3)	25,000				SUPPORT OF COMMUNITY ORGANIZATION
(309) YWCA EVANSTON/NORTH SHORE 1215 CHURCH STREET, EVANSTON, IL 60201	36-2193618	501(C)(3)	30,500				SUPPORT OF COMMUNITY ORGANIZATION

Part IV

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	EXPLANATION: GRANTS GIVEN TO SUPPORT OF CHARITABLE COMMUNITY ORGANIZATIONS. SUCH GRANTS ARE EXTENDED ONLY FOR CHARITABLE PURPOSES TO ORGANIZATIONS THAT ARE EXEMPT UNDER CODE SECTION 501(C)(3). AFTER QUALIFICATIONS FOR THE GRANT ARE MET AND THE GRANT IS DISBURSED TO THE CHARITABLE ORGANIZATION THERE IS NO SUBSEQUENT MONITORING BY THE UNIVERSITY. GRANTS OR OTHER ASSISTANCE ARE AWARDED TO ORGANIZATIONS OR ENTITIES IN THE U.S. PURSUANT TO THE UNIVERSITY POLICIES AND PROCEDURES FOR ALL GRANT SUBAWARDS. SUCH SUBAWARDS ARE MONITORED THROUGH THE UNIVERSITY'S OFFICE FOR SPONSORED RESEARCH (OSR) AND THE UNIVERSITY'S OFFICE OF ACCOUNTING SERVICES FOR RESEARCH AND SPONSORED PROGRAMS (ASRSP). ALL SUBAWARD DOCUMENTATION INCLUDING PURCHASE ORDERS, RELATED CHARGES AND INVOICES ARE REVIEWED AND MONITORED BY ASRSP AND CONFIRMED WITH THE PRINCIPAL INVESTIGATOR. THE PRINCIPAL INVESTIGATOR MUST CERTIFY THAT THE SUBAWARD COSTS ARE IN ACCORDANCE WITH THE OFFICE OF MANAGEMENT AND BUDGET'S (OMB) UNIFORM GUIDANCE (UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS); ALSO, ASRSP REQUESTS AND COLLECTS AUDIT REPORTS FROM SUBAWARD RECIPIENTS TO MONITOR COMPLIANCE, AS REQUIRED BY THE UNIFORM GUIDANCE. IF THE INFORMATION IS NOT FURNISHED TO ASRSP, PAYMENT MAY BE WITHHELD.
(5) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	AIDS FOUNDATION OF CHICAGO 200 W JACKSON BLVD., SUITE 2100, CHICAGO, IL 60606
(8) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	ALTARUM INSTITUTE 3520 GREEN COURT, SUITE 300, ANN ARBOR, MI 48105
(9) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH 1789 MASSACHUSETTS AVENUE, NW, WASHINGTON, DC 20036
(10) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	AMERICAN LUNG ASSOCIATION 1301 PENNSYLVANIA AVE. NW, SUITE 800, WASHINGTON, DC 20004
(11) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	ANN & ROBERT H. LURIE CHILDREN'S HOSPITAL OF CHICAGO 225 E CHICAGO AVENUE, CHICAGO, IL 60611
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ACADEMY FOR GLOBAL CITIZENSHIP: SUPPORT OF COMMUNITY ORGANIZATION
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ACCESS COMMUNITY HEALTH NETWORK: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ADVOCATES FOR INFORMED CHOICE: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AIDS ARMS, INC.: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AIDS FOUNDATION OF CHICAGO: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALBERT EINSTEIN COLLEGE OF MEDICINE, INC.: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALLIANCECHICAGO: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ALTARUM INSTITUTE: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AMERICAN LUNG ASSOCIATION: SUPPORT OF RESEARCH ACTIVITIES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ANN & ROBERT H. LURIE CHILDREN'S HOSPITAL OF CHICAGO: SUPPORT OF RESEARCH ACTIVITIES

Return Reference - Identifier	Explanation
SCHEDULE I, PART III - PRIZES AND AWARDS	PRIZES AND AWARDS REFLECT PRIZES AND AWARDS EXTENDED TO NON-EMPLOYEES IN RECOGNITION OF AN ACCOMPLISHMENT, ACTIVITY, OR EVENT. PRIZES AND AWARDS GIVEN TO EMPLOYEES ARE INCLUDED AS COMPENSATION AND REPORTED ON AN EMPLOYEE'S FORM W-2.
SCHEDULE I, PART III, COLUMN A - TYPE OF GRANT	STUDENT GRANTS, SCHOLARSHIPS, AND FELLOWSHIPS ARE FINANCIAL AID THAT CAN BE USED TOWARDS EDUCATIONAL RELATED COSTS.
SCHEDULE I, PART III, COLUMN A - TYPE OF GRANT	PRIZES AND AWARDS REFLECT PRIZES AND AWARDS TO NON-EMPLOYEES IN RECOGNITION OF AN ACCOMPLISHMENT, ACTIVITY, OR EVENT.

**SCHEDULE J
(Form 990)**

Compensation Information

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

Part I Questions Regarding Compensation

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.

- | | |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <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 checked="" type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the 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.

- | | |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input 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:

- | | | | |
|--------------------------------------------------------------------------------------------------------|-----------|---|---|
| a Receive a severance payment or change-of-control payment? | 4a | ✓ | |
| b Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | ✓ | |
| c Participate in or receive payment from an equity-based compensation arrangement? | 4c | | ✓ |

Only section 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:

- | | | | |
|----------------------------------------------|-----------|---|---|
| a The organization? | 5a | ✓ | |
| b Any related organization? | 5b | | ✓ |

If "Yes" on line 5a or 5b, describe in Part III.

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:

- | | | | |
|----------------------------------------------|-----------|--|---|
| a The organization? | 6a | | ✓ |
| b Any related organization? | 6b | | ✓ |

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

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	✓	
2	✓	
4a	✓	
4b	✓	
4c		✓
5a	✓	
5b		✓
6a		✓
6b		✓
7	✓	
8	✓	
9		✓

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

For each individual whose compensation must be reported 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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC 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				
1 PATRICK WILLIAM FITZGERALD, II HEAD COACH	(i)	4,961,817	375,000	526,218	29,000	35,102	5,927,137	0
	(ii)	0	0	0	0	0	0	0
2 CHRISTOPHER RYAN COLLINS HEAD COACH	(i)	3,053,317	0	17,108	29,000	34,906	3,134,331	0
	(ii)	0	0	0	0	0	0	0
3 CHAD A MIRKIN PROFESSOR-WCAS CHEMISTRY	(i)	920,960	18,800	2,089,450	62,333	18,578	3,110,121	100,000
	(ii)	0	0	0	0	0	0	0
4 MORTON O SCHAPIRO PRESIDENT	(i)	1,196,409	500,000	526,396	456,138	317,033	2,995,976	236,904
	(ii)	0	0	0	0	0	0	0
5 MOHANBIR S SAWHNEY PROFESSOR-KELLOGG	(i)	271,530	6,050	2,152,471	29,000	66,288	2,525,339	0
	(ii)	0	0	0	0	0	0	0
6 HARISHA KONERU HAIGH MNG DIR PRIV INV & REAL ASSETS	(i)	429,646	859,718	18,360	520,265	29,462	1,857,451	395,362
	(ii)	0	0	0	0	0	0	0
7 PETER A BELYTSCHKO MANAGING DIR ABSOLUTE RETURN	(i)	460,751	827,639	20,052	498,005	11,126	1,817,573	376,680
	(ii)	0	0	0	0	0	0	0
8 MACIEJ S LESNIAK PROFESSOR-NEUROLOGICAL SURGERY	(i)	1,618,917	0	552	29,000	494	1,648,963	0
	(ii)	0	0	0	0	0	0	0
9 AMY FALLS VP & CHIEF INVESTMENT OFFICER	(i)	591,884	880,000	60,688	29,000	26,158	1,587,730	0
	(ii)	0	0	0	0	0	0	0
10 ROBERT E MCQUINN VP OF ALUMNI REL & DEVELOPMENT	(i)	639,577	125,000	283,236	305,667	35,225	1,388,705	130,000
	(ii)	0	0	0	0	0	0	0
11 CRAIG A JOHNSON EXECUTIVE VICE PRESIDENT	(i)	825,941	150,000	19,950	188,000	8,258	1,192,149	0
	(ii)	0	0	0	0	0	0	0
12 JAMES J PHILLIPS FORMER VP ATHLETICS	(i)	155,763	412,500	502,868	15,938	4,398	1,091,467	0
	(ii)	0	0	0	0	0	0	0
13 STEPHANIE MILLS GRAHAM VP & GENERAL COUNSEL	(i)	743,411	100,000	1,032	41,500	44,209	930,152	0
	(ii)	0	0	0	0	0	0	0
14 KATHLEEN M HAGERTY PROVOST	(i)	755,956	100,000	1,745	29,000	408	887,109	0
	(ii)	0	0	0	0	0	0	0
15 MIKE POLISKY FORMER VP ATHLETICS	(i)	98,390	80,000	632,933	11,148	26,499	848,970	0
	(ii)	0	0	0	0	0	0	0
16 (SEE STATEMENT)	(i)							
	(ii)							

Part II

Officers, Directors, Trustees, Key Employees and Highest Compensated Employees (continued)

(a) Name		(b) Breakdown of W-2 and/or 1099-MISC compensation			(c) Retirement and other deferred compensation	(d) Nontaxable benefits	(e) Total of columns (b)(i)-(d)	(f) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(16) PRIYA JENVEJA HARJANI ASSOC VP & DEP GENERAL COUNSEL & INTERIM VP HR	(i)	427,451	63,500	140,360	58,458	2,558	692,327	0
	(ii)	0	0	0	0	0	0	0
(17) ERIC G NEILSON VP MEDICAL AFFAIRS	(i)	607,330	24,280	8,694	22,763	2,871	665,938	0
	(ii)	0	0	0	0	0	0	0
(18) MILAN MRKSICH VP OF RESEARCH	(i)	504,139	10,500	41,731	27,625	31,006	615,001	0
	(ii)	0	0	0	0	0	0	0
(19) DERRICK L GRAGG VP ATHLETICS REC	(i)	529,310	0	33,194	14,500	17,048	594,052	0
	(ii)	0	0	0	0	0	0	0
(20) SEAN BRIAN REYNOLDS VP & CHIEF INFORMATION OFFICER	(i)	490,988	9,800	44,530	29,000	8,402	582,720	0
	(ii)	0	0	0	0	0	0	0
(21) JULIE ALICE PAYNE-KIRCHMEIER VP OF STUDENT AFFAIRS	(i)	381,927	58,000	103,597	26,617	8,402	578,543	0
	(ii)	0	0	0	0	0	0	0
(22) LUKE FIGORA VP FOR OPERATIONS	(i)	422,970	79,300	216	29,000	34,146	565,632	0
	(ii)	0	0	0	0	0	0	0
(23) AMANDA J DISTEL SR ASC VP FIN & TREASURER	(i)	400,000	88,000	18,000	28,248	23,410	557,658	0
	(ii)	0	0	0	0	0	0	0
(24) MARILYN MCCOY VP OF ADMIN & PLANNING	(i)	465,941	9,900	21,924	29,000	26,089	552,854	0
	(ii)	0	0	0	0	0	0	0
(25) JANNA V BLAIS ASSOC AD INTERCOLLEGIATE SRVCS ATHLETICS & FORMER INTERIM VP ATHLETICS	(i)	235,061	80,500	109,847	25,067	47,945	498,420	0
	(ii)	0	0	0	0	0	0	0
(26) ALEXANDER J DARRAGH VP OF FACILITIES MANAGEMENT	(i)	413,380	8,500	1,715	29,000	24,876	477,471	0
	(ii)	0	0	0	0	0	0	0
(27) JERI BETH WARD VP GLOBAL MKT & COMM	(i)	424,666	8,500	552	23,354	10,338	467,410	0
	(ii)	0	0	0	0	0	0	0
(28) ROBIN RENEE MEANS COLEMAN VP ASSOC PROV DIV AND INC	(i)	324,165	7,300	64,328	28,011	22,761	446,565	0
	(ii)	0	0	0	0	0	0	0
(29) DANIEL LEE DURACK ASSOC VP BUDGET & PLANNING	(i)	246,709	6,600	48,990	25,500	31,020	358,819	0
	(ii)	0	0	0	0	0	0	0
(30) DEVORA GRYNSPAN VP OF INTERNATIONAL RELATIONS	(i)	249,146	5,060	1,854	25,553	10,816	292,429	0
	(ii)	0	0	0	0	0	0	0
(31) ANGEL MANUEL CUEVAS-TRISAN FORMER VP & CHIEF HR OFFICER	(i)	216,475	0	11,697	23,625	18,825	270,622	0
	(ii)	0	0	0	0	0	0	0
(32) ROBERT A GUNDLACH PROFESSOR EMERITUS & FORMER INTERIM VP ATHLETICS	(i)	182,875	23,850	9,949	20,284	23,521	260,479	0
	(ii)	0	0	0	0	0	0	0

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 - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL	<p>SIX INTERESTED PERSONS WERE PROVIDED CHARTER TRAVEL AND WAS TREATED AS A BUSINESS EXPENSE.</p> <p>THE PRESIDENT IS PERMITTED TO TRAVEL FIRST CLASS. THE FIRST CLASS TRAVEL WAS TREATED AS A BUSINESS EXPENSE AND NOT TREATED AS TAXABLE COMPENSATION. ONE OTHER INTERESTED PERSON TRAVELED FIRST CLASS ON ONE BUSINESS TRIP AND THE FIRST CLASS TRAVEL WAS TREATED AS A BUSINESS EXPENSE AND NOT TREATED AS TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS	<p>THE PRESIDENT'S SPOUSE HAS ACCOMPANIED THE PRESIDENT AT DEVELOPMENT EVENTS FOR BUSINESS PURPOSES AND SUCH EXPENSES WERE NOT TREATED AS TAXABLE COMPENSATION.</p> <p>THREE LISTED PERSONS RECEIVED COMPANION TRAVEL WHICH WAS TREATED AS TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 1A - TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	<p>TWO LISTED PERSONS RECEIVED GROSS UP PAYMENTS IN CONNECTION WITH CERTAIN BENEFITS AND SUCH AMOUNTS WERE TREATED AS TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 1A - HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE	<p>THE PRESIDENT IS REQUIRED TO RESIDE IN UNIVERSITY-OWNED HOUSING WHICH IS PROVIDED FOR THE CONVENIENCE OF THE UNIVERSITY AND IS NOT TREATED AS A TAXABLE COMPENSATION PURSUANT TO INTERNAL REVENUE CODE SECTION 119. THE ANNUAL FAIR MARKET RENTAL VALUE OF THE HOUSING IS INCLUDED IN NONTAXABLE BENEFITS LISTED ON SCHEDULE J, PART II, COLUMN (D).</p> <p>THREE OTHER LISTED PERSONS WERE PROVIDED WITH HOUSING OR A HOUSING ALLOWANCE AND THE AMOUNTS WERE TREATED AS TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 1A - HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES	<p>THE PRESIDENT WAS EXTENDED MEMBERSHIPS IN ORGANIZATIONS THAT ARE HELD IN THE PRESIDENT'S INDIVIDUAL NAME BUT THAT REFLECT INSTITUTIONAL BUSINESS REQUIREMENTS AND ARE NOT TREATED AS TAXABLE COMPENSATION.</p> <p>FIVE LISTED PERSONS RECEIVED REIMBURSEMENT OR IMPUTATION FOR SOCIAL CLUB DUES, WHICH WERE TREATED AS TAXABLE COMPENSATION. ONE LISTED PERSON RECEIVED REIMBURSEMENT FOR AN AIRLINE CLUB, WHICH WAS NOT TREATED AS TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 1A - PERSONAL SERVICES	<p>IN CONNECTION WITH THE UNIVERSITY-PROVIDED PRESIDENTIAL HOUSING, THE UNIVERSITY PROVIDES MAID/CLEANING SERVICES AT THE PRESIDENT'S UNIVERSITY RESIDENCE. THE VALUE OF THE BENEFIT FOR CLEANING SERVICES ASSOCIATED WITH THE PERSONAL LIVING QUARTERS IS TREATED AS TAXABLE COMPENSATION.</p> <p>NOMINAL CHAUFFEUR SERVICES WERE PROVIDED TO THE PRESIDENT AND THE VALUE OF THE BENEFIT IS TREATED AS TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 4A - SEVERANCE OR CHANGE-OF-CONTROL PAYMENT	<p>IN CONNECTION WITH SEPARATION OR RETIREMENT FROM NORTHWESTERN UNIVERSITY, THE FOLLOWING RECEIVED COMPENSATION IN THE AMOUNTS DESCRIBED, WHICH WERE INCLUDED IN PART II, COLUMN B (III). M. POLISKY (\$476,190). J. PHILLIPS (\$300,000)</p>
SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	<p>THE FOLLOWING PARTICIPATED IN A 457(F) NONQUALIFIED RETIREMENT PLAN AND THE AMOUNTS ARE SUBJECT TO SUBSTANTIAL RISK OF FORFEITURE AND VEST AFTER A NUMBER OF YEARS</p> <p>NAME AND AMOUNT CONTRIBUTED: MORTON SCHAPIRO (\$427,138), CRAIG JOHNSON (\$159,000), ROBERT MCQUINN (\$276,667), PETER BELYTSCHKO (\$469,005), HARISHA HAIGH (\$491,265), STEPHANIE GRAHAM (\$12,500), PRIYA HARJANI (\$33,333), CHAD MIRKIN (\$33,333)</p> <p>NAME AND AMOUNT PAID: MORTON SCHAPIRO (\$455,521), ROBERT MCQUINN (\$229,018), PETER BELYTSCHKO (\$376,689), HARISHA HAIGH (\$395,362), CHAD MIRKIN (\$1,800,918)</p>
SCHEDULE J, PART I, LINE 5A - COMPENSATION CONTINGENT ON REVENUES OF THE ORGANIZATION	<p>THE CHIEF INVESTMENT OFFICER AND MANAGING DIRECTORS OF INVESTMENTS RECEIVED INCENTIVE COMPENSATION WHICH WAS IN PART CALCULATED CONTINGENT ON THE PERFORMANCE OF THE UNIVERSITY'S LONG TERM INVESTMENTS. THE INCENTIVE COMPENSATION IS BASED ON SPECIFIC METRICS AND FORMULAE WHICH ARE VERIFIED AND CALCULATED BY AN INDEPENDENT THIRD PARTY CONSULTANT.</p>
SCHEDULE J, PART I, LINE 7 - NON-FIXED PAYMENTS	<p>THE PRESIDENT AND 23 INTERESTED PERSONS RECEIVED A NON-FIXED PAYMENT RELATED TO A RECOGNITION BONUS. ONE FORMER OFFICER AND ONE OFFICER WERE OFFERED NON-FIXED PAYMENT RELATED TO APPAREL AND TICKETS TO CERTAIN UNIVERSITY COLLEGIATE ATHLETICS GAMES.</p>
SCHEDULE J, PART I, LINE 8 - PAYMENTS ON CONTRACT THAT IS SUBJECT TO THE INITIAL CONTRACT EXCEPTION	<p>SUBJECT TO THE INITIAL CONTRACT EXCEPTION IS THE LOAN EXTENDED TO MILAN MRKSICH WHICH WAS ENTERED INTO SEVERAL YEARS PRIOR TO THE EMPLOYEE BECOMING AN OFFICER.</p>
SCHEDULE J, PART I, LINE 1A -	SCHEDULE J SUPPLEMENTAL INFORMATION

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization
NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	ILLINOIS FINANCE AUTHORITY	86-1091967	45200BFC7	09/09/2004	135,800,000	(SEE STATEMENT)		✓		✓		✓
B	ILLINOIS FINANCE AUTHORITY	86-1091967	45200FKZ1	06/25/2008	125,000,000	(SEE STATEMENT)		✓		✓		✓
C	ILLINOIS FINANCE AUTHORITY	86-1091967	45203H2A9	06/04/2015	146,017,057	(SEE STATEMENT)		✓		✓		✓
D												

Part II Proceeds

	A		B		C		D		
1 Amount of bonds retired									
2 Amount of bonds legally defeased									
3 Total proceeds of issue		144,677,217		126,815,680		146,081,419			
4 Gross proceeds in reserve funds									
5 Capitalized interest from proceeds									
6 Proceeds in refunding escrows									
7 Issuance costs from proceeds		1,039,400		1,250,000		886,268			
8 Credit enhancement from proceeds									
9 Working capital expenditures from proceeds									
10 Capital expenditures from proceeds		143,637,817		125,565,680		145,195,151			
11 Other spent proceeds									
12 Other unspent proceeds									
13 Year of substantial completion		2008		2011		2017			
		Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?			✓		✓		✓		
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?			✓		✓		✓		
16 Has the final allocation of proceeds been made?		✓		✓		✓			
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?		✓		✓		✓			

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		✓		✓		✓		
2 Are there any lease arrangements that may result in private business use of bond-financed property?	✓		✓			✓		
3a Are there any management or service contracts that may result in private business use of bond-financed property?	✓		✓		✓			
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		✓		✓		✓		
c Are there any research agreements that may result in private business use of bond-financed property?	✓		✓			✓		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		✓		✓				
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government . . . ▶		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . ▶		0.39 %		0.38 %		1.62 %		%
6 Total of lines 4 and 5		0.39 %		0.38 %		1.62 %		%
7 Does the bond issue meet the private security or payment test?		✓		✓		✓		
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		✓		✓		✓		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	✓		✓		✓			

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		✓		✓		✓		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		✓		✓		✓		
b Exception to rebate?		✓		✓		✓		
c No rebate due?	✓		✓		✓			
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed		09/09/2009		06/25/2018		02/02/2022		
3 Is the bond issue a variable rate issue?	✓		✓			✓		

Part VI

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

Return Reference - Identifier	Explanation
SCHEDULE K, PART I, COLUMN (C) - BOND ISSUE A: IFA-SERIES 2004	ADDITIONAL CUSIP: 45200B FD5
SCHEDULE K, PART I, COLUMN (C) - BOND ISSUE B: IFA - SERIES 2008	ADDITIONAL CUSIPS: 45200F LA5, 45200F LB3
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: ILLINOIS FINANCE AUTHORITY	ACQUIRÉ, CONSTRUCT OR RENOVATE UNIVERSITY FACILITIES
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: ILLINOIS FINANCE AUTHORITY	ACQUIRE, CONSTRUCT OR RENOVATE UNIVERSITY FACILITIES & EQUIPMENT
SCHEDULE K, PART I, COLUMN (F) - DESCRIPTION OF PURPOSE ISSUER NAME: ILLINOIS FINANCE AUTHORITY	ACQUIRE, CONSTRUCT OR RENOVATE UNIVERSITY FACILITIES
SCHEDULE K, PART I, COLUMN (F) - PURPOSES	IN ADDITION TO THE PURPOSES LISTED IN PART I, COLUMN (F), BONDS WERE ALSO ISSUED TO PAY COSTS OF ISSUANCE.
SCHEDULE K, PART II, LINE 3 - TOTAL PROCEEDS OF ISSUE	THE DIFFERENCE BETWEEN ISSUE PRICES AND PROCEEDS OF BONDS ARE A RESULT OF INVESTMENT INCOME EARNED.
SCHEDULE K, PART III, LINE 3B - REVIEWS BY BOND COUNSEL	THE UNIVERSITY MONITORS CHANGES IN PRIVATE USE ON AN ONGOING BASIS INTERNALLY.
SCHEDULE K, PART III, LINE 4 - PRIVATE BUSINESS USE	THE UNIVERSITY FINANCES ACQUISITION, CONSTRUCTION AND RENOVATION OF UNIVERSITY FACILITIES WITH MULTIPLE FUNDING SOURCES INCLUDING TAX EXEMPT BOND ISSUES. THERE IS A SMALL AMOUNT OF MONITORED PRIVATE BUSINESS USE WITHIN THE FACILITIES PARTIALLY FUNDED BY BONDS; HOWEVER, SUCH USAGE WAS FINANCED FROM OTHER SOURCES.
SCHEDULE K, PART IV, LINE 2C - COLUMN A	ISSUER NAME: ILLINOIS FINANCE AUTHORITY THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 09/09/2009
SCHEDULE K, PART IV, LINE 2C - COLUMN B	ISSUER NAME: ILLINOIS FINANCE AUTHORITY THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 06/25/2018
SCHEDULE K, PART IV, LINE 2C - COLUMN C	ISSUER NAME: ILLINOIS FINANCE AUTHORITY THE CALCULATION FOR COMPUTING NO REBATE DUE WAS PERFORMED ON 02/02/2022
SCHEDULE K, PART IV, LINE 4B - BOND ISSUE B: IFA - SERIES 2008	MORGAN STANLEY CAPITAL SERVICES LLC; BANK OF AMERICA, NA; JP MORGAN

**SCHEDULE L
(Form 990)**

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 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.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021

Open To Public Inspection

Name of the organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

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

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1) MILAN MRKSICH	EMPLOYEE			COMPENSATION		✓	150,000	75,436	
(2) DERRICK GRAGG	EMPLOYEE	COMPENSATION		✓	1,000,000	800,000		✓	✓		✓	
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						▶ \$	875,436					

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)		25,632	SCHOLARSHIP	EDUCATIONAL SCHOLARSHIP
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV**Business Transactions Involving Interested Persons (continued)**

(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) GREAT LAKES COCA-COLA	M. JUDE REYES, TRUSTEE, OWNERSHIP INTEREST OVER 35%	\$1,328,889	SOFT DRINK PURCHASES, MERCHANDISE, COMMISSIONS		✓
(2) LINDA DARRAGH	FAMILY MEMBER TO ALEX DARRAGH, OFFICER	\$119,453	EMPLOYMENT		✓
(3) RCPI LANDMARK PROPERTIES, LLC/TISHMAN SPEYER CROWN EQUITIES LLC	A. STEVEN CROWN, TRUSTEE, OWNERSHIP INTEREST OVER 35%	\$223,736	LEASE OF REAL ESTATE		✓
(4) SAMUEL STUPP	FAMILY MEMBER OF DEVORA GRYNSPAN, OFFICER	\$477,159	EMPLOYMENT		✓
(5) ANTHONY KIRCHMEIER	FAMILY MEMBER OF JULIE PAYNE- KIRCHMEIER, OFFICER	\$91,880	EMPLOYMENT		✓
(6) WILLIAM ROGERSON	FAMILY MEMBER OF KATHLEEN HAGERTY, OFFICER	\$241,220	EMPLOYMENT		✓

Part V**Supplemental Information.** Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE L, PART II, COLUMN (H) - EMPLOYEE LOAN	THE LOAN EXTENDED TO MILAN MRKSICH WAS ENTERED INTO SEVERAL YEARS PRIOR TO THE EMPLOYEE BECOMING AN OFFICER.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization NORTHWESTERN UNIVERSITY	Employer identification number 36-2167817
------------------------------------------------------------	-----------------------------------------------------

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	✓	42	801,745	MARKET VALUE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	✓		1,400,983	MARKET VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	609	43,445,991	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SEE STATEMENT))				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29	3
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		Yes	No
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 isn't required to be used for exempt purposes for the entire holding period?	30a	✓	
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	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		✓
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part I**Types of Property (continued)**

Property Type	(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
EQUIPMENT, COMPUTERS, SOFTWARE	✓	6	19,533	MARKET VALUE
EVENTS, TICKETS	✓	97	76,856	MARKET VALUE

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 - Identifier	Explanation
SCHEDULE M, PART I - COLUMN (B)	THE UNIVERSITY IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED.
SCHEDULE M, PART I, LINE 30B - PROPERTY CONTRIBUTIONS THAT MUST BE HELD FOR THREE YEARS	A PORTION OF PUBLICLY TRADED STOCK RECEIVED CANNOT BE SOLD WITHIN FIVE YEARS UNLESS APPROVED BY DONOR. EVENTUAL PROCEEDS FROM SALE OF STOCK WILL BE APPLIED TO SUPPORT THE SCHOOL OF MEDICINE'S INSTITUTE FOR GLOBAL HEALTH AND FURTHER EXEMPT PURPOSES. EARNINGS DURING THE HOLDING PERIOD ARE EXPECTED TO BE TREATED FOR THE SAME PURPOSE.

**SCHEDULE O
(Form 990)**

Department of Treasury Internal
Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

- ▶ Attach to Form 990 or 990-EZ.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the Organization
NORTHWESTERN UNIVERSITY

Employer Identification Number
36-2167817

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES IS COMPRISED OF 23 MEMBERS OF THE GOVERNING BODY. THE EXECUTIVE COMMITTEE MAY EXERCISE THE POWER OF THE BOARD OF TRUSTEES BETWEEN MEETINGS WITH RESPECT TO ORDINARY BUSINESS TRANSACTIONS.
FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	JAY C. HOAG AND PATRICK G. RYAN JR. - BUSINESS RELATIONSHIP M. JUDE REYES AND A. STEVEN CROWN - BUSINESS RELATIONSHIP M. JUDE REYES AND PATRICK RYAN JR. - BUSINESS RELATIONSHIP M. JUDE REYES AND FREDERICK H. WADDELL - BUSINESS RELATIONSHIP DAVID B. WEINBERG AND M. JUDE REYES - BUSINESS RELATIONSHIP MUNEER A. SATTER AND PATRICK RYAN JR. - BUSINESS RELATIONSHIP
FORM 990, PART VI, LINE 10A - LOCAL CHAPTERS, BRANCHES	THE UNIVERSITY DOES NOT HAVE LOCAL CHAPTERS, BRANCHES, LODGES, UNITS OR SIMILAR AFFILIATES. AS DESCRIBED IN SCHEDULE F, THE UNIVERSITY HAS ONE INTERNATIONAL CAMPUS, LOCATED IN DOHA, QATAR. THE UNIVERSITY HAS A NUMBER OF AFFILIATION AGREEMENTS AND ARRANGEMENTS WITH OTHER RESEARCH AND EDUCATIONAL INSTITUTIONS BUT THE UNIVERSITY DOES NOT HAVE AUTHORITY TO EXERCISE SUPERVISION AND CONTROL OF SUCH INSTITUTIONS.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	AN ELECTRONIC COPY OF THE UNIVERSITY'S FINAL FORM 990 (INCLUDING ALL REQUIRED SCHEDULES), WAS PROVIDED TO EACH VOTING MEMBER OF THE UNIVERSITY'S GOVERNING BODY PRIOR TO FILING. THAT VERSION OF THE FORM 990 IS IDENTICAL TO THE ONE ULTIMATELY FILED WITH THE IRS. PRIOR TO PROVIDING A COPY TO THE GOVERNING BODY, A DRAFT OF THE FORM 990 WAS PROVIDED FOR REVIEW TO THE AUDIT, RISK, AND COMPLIANCE COMMITTEE OF THE BOARD OF TRUSTEES, WHICH IS COMPRISED OF A SUBSET OF MEMBERS FROM THE GOVERNING BODY WHO REVIEW THE ACCOUNTING PROCEDURES AND CONTROLS OF THE UNIVERSITY.
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	<p>UNIVERSITY BYLAWS AND STATUTES REQUIRE THAT ANY CONFLICT OF INTEREST OF ANY TRUSTEE, OFFICER OR THEIR IMMEDIATE FAMILIES BE DISCLOSED TO THE UNIVERSITY IN WRITING. AN OFFICER SHALL CALL ANY CONFLICT OF INTEREST TO THE ATTENTION OF THE PRESIDENT (UNLESS THE CONFLICT IS ON THE PART OF THE PRESIDENT, IN WHICH CASE IT SHALL BE CALLED TO THE ATTENTION OF THE VICE PRESIDENT AND GENERAL COUNSEL AND THE CHAIR OF THE BOARD OF TRUSTEES). IF THE MATTER IS BEING CONSIDERED BY THE BOARD OF TRUSTEES OR ONE OF ITS COMMITTEES, SUCH OFFICER IS NOT PERMITTED TO PARTICIPATE IN OR MAKE RECOMMENDATIONS ABOUT THE CONFLICT OF INTEREST UNDER DISCUSSION, EXCEPT TO THE EXTENT THE OFFICER IS REQUIRED BY THE TRUSTEES OF OTHER OFFICERS TO ANSWER PERTINENT QUESTIONS RELATED TO THE CONFLICT. A TRUSTEE HAVING A CONFLICT OF INTEREST SHALL CALL IT TO THE ATTENTION OF THE BOARD OR COMMITTEE AND SHALL ABSTAIN ON VOTING ON THE SUBJECT. THE TRUSTEE IS ENCOURAGED TO ANSWER PERTINENT QUESTIONS WHEN HIS/HER KNOWLEDGE OF THE SUBJECT WILL ASSIST THE BOARD OR ANY OF ITS COMMITTEES. IN ADDITION, TRUSTEES ARE SUBJECT TO A CONFLICT OF INTEREST POLICY, WHICH HAS BEEN ADOPTED BY THE BOARD OF TRUSTEES. POTENTIAL CONFLICTS OF INTEREST ARE FURTHER SCRUTINIZED UNDER A UNIVERSITY INVESTMENT POLICY GOVERNING TRUSTEE RELATIONSHIP INVESTMENTS WHEREBY, AMONG OTHER THINGS, AFFECTED TRUSTEES MUST RECUSE THEMSELVES FROM ANY DISCUSSION AND VOTE RELATED TO THE INVESTMENT.</p> <p>PURSUANT TO THE UNIVERSITY'S STAFF AND FACULTY CONFLICT OF INTEREST POLICIES, EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST TO THE UNIVERSITY ON AN ANNUAL BASIS. EMPLOYEES RECEIVE ANNUAL REMINDERS TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE AND RESPONSES ARE SUBMITTED ELECTRONICALLY AND REVIEWED BY EACH EMPLOYEE'S SUPERVISOR. POTENTIAL CONFLICTS ARE FURTHER REVIEWED BY THE UNIVERSITY'S DEPARTMENT OF HUMAN RESOURCES AND ACTION TAKEN BY SENIOR MANAGEMENT AS NEEDED.</p>
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	<p>THE COMPENSATION COMMITTEE OF THE BOARD INCLUDES MEMBERS OF THE UNIVERSITY'S GOVERNING BODY WHO ARE NOT RELATED OR CONTROLLED BY THE EMPLOYEES WHOSE COMPENSATION THEY ARE REVIEWING. TO ASSESS THE REASONABLENESS OF EMPLOYEE COMPENSATION, THE COMPENSATION COMMITTEE OF THE BOARD RELIES ON (I) FORMAL SURVEY AND COMPARABILITY DATA PREPARED AND COMPILED BY AN OUTSIDE CONSULTANT WHO HAS EXPERTISE IN THE FIELD OF EXECUTIVE COMPENSATION ASSESSMENT AND BENCHMARKING AND (II) COMPENSATION RECOMMENDATIONS FROM THE PRESIDENT, PROVOST AND EXECUTIVE VP FOR THEIR DIRECT REPORTS. THE COMPENSATION COMMITTEE OF THE BOARD MEETS EVERY JUNE FOR THE PURPOSE OF REVIEWING AND APPROVING EXECUTIVE COMPENSATION RECOMMENDATIONS FOR THE NEXT FISCAL YEAR.</p> <p>AFTER REVIEW AND THE APPROVAL, THE COMMITTEE'S DECISIONS ARE DOCUMENTED WITH INTERNAL COMMUNICATIONS TO THE EXECUTIVE VICE PRESIDENT AND VICE PRESIDENT AND GENERAL COUNSEL. THE OFFICE OF THE EXECUTIVE VICE PRESIDENT SENDS THE FINAL COMPENSATION DECISIONS TO THE VICE PRESIDENT AND GENERAL COUNSEL, THE PAYROLL DEPARTMENT, AND THE VICE PRESIDENT FOR HUMAN RESOURCES FOR IMPLEMENTATION AND PROCESSING.</p>

Return Reference - Identifier	Explanation				
FORM 990, PART VI, LINE 16B - JOINT VENTURES	THE UNIVERSITY DOES NOT HAVE A WRITTEN POLICY REGARDING JOINT VENTURES IN GENERAL. HOWEVER, JOINT VENTURE AGREEMENTS ARE REVIEWED BY THE UNIVERSITY'S OFFICE OF GENERAL COUNSEL TO EVALUATE WHETHER THE AGREEMENT FURTHERS THE MISSION OF THE UNIVERSITY AND TO ENSURE THE SAFEGUARDING OF UNIVERSITY'S ASSETS. THE UNIVERSITY ALSO HAS GUIDELINES CONCERNING JOINT VENTURES IN ITS TECHNOLOGY TRANSFER AND INVESTMENT POLICIES.				
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	GOVERNING DOCUMENTS: THE UNIVERSITY MAINTAINS AN OFFICE FOR GLOBAL MARKETING AND COMMUNICATION WHERE INFORMATION REQUESTS FROM THE PUBLIC ARE PROCESSED. THE ORGANIZING DOCUMENT BY WHICH THE UNIVERSITY WAS CREATED, ITS CHARTER, IS AVAILABLE UPON REQUEST. THE UNIVERSITY'S EMPLOYEE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE UNIVERSITY WEBSITE.				
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%; text-align: center;">(a) Description</th> <th style="width: 20%; text-align: center;">(b) Amount</th> </tr> </thead> <tbody> <tr> <td>CHANGE IN VALUE OF DERIVATIVE INSTRUMENTS</td> <td style="text-align: right;">8,266,866</td> </tr> </tbody> </table>	(a) Description	(b) Amount	CHANGE IN VALUE OF DERIVATIVE INSTRUMENTS	8,266,866
(a) Description	(b) Amount				
CHANGE IN VALUE OF DERIVATIVE INSTRUMENTS	8,266,866				
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES - 8,266,866	CHANGE IN VALUE OF DERIVATIVE ASSETS \$8,269,153 PLUS MISC. -\$2,287				
PART VI, LINE 15B - COMPENSATION OF OFFICERS	<p>CALENDAR YEAR 2021 COMPENSATION WAS REVIEWED AND APPROVED BY AN INDEPENDENT AND AUTHORIZED COMMITTEE OF THE BOARD FOR PRESIDENT MORTON SCHAPIRO, PROVOST KATHLEEN HAGERTY, EXECUTIVE VP CRAIG JOHNSON, VP AND GENERAL COUNSEL STEPHANIE GRAHAM, VP AND CHIEF INVESTMENT OFFICER AMY FALLS, VP OF ALUMNI RELATIONS AND DEVELOPMENT ROBERT MCQUINN, AND ATHLETIC DIRECTOR VP DERRICK GRAGG. THE ANNUAL REVIEW PROCESS INCLUDES REVIEW OF COMPARABILITY DATA PREPARED AND PROVIDED BY AN INDEPENDENT THIRD PARTY COMPENSATION CONSULTANT AND CONTEMPORANEOUS SUBSTANTIATION.</p> <p>WITH EXCEPTION TO INTERIM OFFICER APPOINTMENTS, THE ANNUAL REVIEW PROCESS FOR ALL OTHER OFFICERS INCLUDED A REVIEW BY AN INDEPENDENT AND AUTHORIZED COMMITTEE OF THE BOARD OF COMPARABILITY DATA PREPARED AND PROVIDED BY AN INDEPENDENT THIRD PARTY COMPENSATION CONSULTANT.</p> <p>FISCAL YEAR 2022 NEWLY APPOINTED OFFICERS LORRAINE GOFFE AND PATRICIA LAMPKIN WERE NOT COMPENSATED IN CALENDAR YEAR 2021.</p>				
SCHEDULE F, PART I, LINE 1 - PROGRAM SERVICES	THE PROGRAM SERVICES LISTED IN PART I REFLECT INTERNATIONAL EDUCATIONAL PROGRAMS IN WHICH THE UNIVERSITY HAS MATERIAL INVOLVEMENT IN THE DESIGN, DEVELOPMENT AND/OR CONTROL OF THE PROGRAM AND/OR CURRICULUM. WHILE NORTHWESTERN UNIVERSITY PROVIDES ITS STUDENTS WITH ACCESS TO A MULTITUDE OF STUDY ABROAD PROGRAMS AND EXCHANGES LOCATED THROUGHOUT THE WORLD, THE UNIVERSITY DOES NOT ADMINISTER OR OPERATE THE EDUCATIONAL COURSES TAUGHT BY ALL OF THESE PROGRAMS. RATHER, UNDER RECIPROCITY AND AFFILIATION AGREEMENTS, THE UNIVERSITY HELPS FACILITATE ITS STUDENTS' ACCESS TO SUCH INTERNATIONAL PROGRAMS AND RECOGNIZES CREDIT EARNED BY STUDENTS AT SUCH FOREIGN EDUCATIONAL INSTITUTIONS, AND SUCH EXCHANGE PROGRAMS ARE EXCLUDED FROM SCHEDULE F, PART I. UNDER NORTHWESTERN UNIVERSITY'S CURRENT ACCOUNTING PROCEDURES, ALL EXPENSES ASSOCIATED WITH STUDY ABROAD PROGRAMS ARE NOT SEPARATELY TRACKED, AND THEREFORE SOME EXPENDITURES PER PROGRAM ARE NOT LISTED IN PART I, COLUMN (F).				
SCHEDULE F, PART I, LINE 3(F) - METHOD USED TO ACCOUNT FOR EXPENDITURES	EXPENDITURES REPORTED IN PART I ARE PREPARED USING THE ACCRUAL METHOD OF ACCOUNTING. UNIVERSITY ACTIVITIES ARE ASSIGNED A UNIQUE IDENTIFYING NUMBER. DIRECT EXPENSES ARE RECORDED WITH RESPECT TO EACH ACTIVITY IN THE UNIVERSITY'S ELECTRONIC FINANCIAL RECORDING SYSTEM. SUCH DIRECT EXPENSES, FOR THE RELEVANT TAX YEAR, ARE REFLECTED IN COLUMN (F).				
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR CASH GRANTS	IN CONNECTION WITH THE MONITORING OF SUBAWARDS THROUGH OSR, APPROVED PURCHASE ORDERS AND INVOICES ARE DOCUMENTED AND ACCOUNTED FOR IN THE UNIVERSITY'S ELECTRONIC FINANCIAL RECORDING SYSTEM, AND SUCH AMOUNTS ARE REFLECTED IN PART II, LINE 1. OF THE 39 ORGANIZATIONS THAT RECEIVED GRANTS IN PART II, 33 ARE UNIVERSITIES, COLLEGES, AND HOSPITALS; 6 ARE RESEARCH CENTERS.				
SCHEDULE F, PART III(C) - ESTIMATED NUMBER OF RECIPIENTS	CASH GRANTS GIVEN TO INDIVIDUALS ARE RECORDED IN AN ELECTRONIC REPORTING TOOL. THE DATA RECORDED INCLUDES INFORMATION AS TO PARTICIPATION BY UNDERGRADUATE STUDENTS IN STUDY ABROAD PROGRAMMING. INDIVIDUAL RECIPIENTS OF CASH GRANTS ARE CODED WITH UNIQUE IDENTIFYING NUMBERS. GRANTS ASSOCIATED WITH UNDERGRADUATE STUDENTS CODED AS PARTICIPATING IN A STUDY ABROAD ARE REVIEWED TO ASSESS WHETHER THERE IS AN OVERLAP BETWEEN THE GRANT DISBURSEMENT DATE AND THE DATE OF THE APPLICABLE STUDY ABROAD PROGRAM. THE NUMBER OF SUCH STUDENTS, BASED ON THEIR UNIQUE IDENTIFYING NUMBERS, ARE SUMMED AND REFLECTED IN PART III, COLUMN (C).				

**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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization
NORTHWESTERN UNIVERSITY

Employer identification number
36-2167817

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" 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) TRIAD WIS NWU, LLC (47-3504918) 550 N GREEN BAY RD, LAKE FOREST, IL 60045	INVESTMENT	IL	12,543,942	0	NORTHWESTERN UNIVERSITY
(2) NORTHWESTERN UNIVERSITY USA FOUNDATION LIMITED (98-1458225) 21 HOLBORN VIADUCT, LONDON, ENGLAND, EC1A2DY, UK	FUNDRAISING	UNITED KINGDOM (ENGLAND, NORTHERN IRELAND, SCOTLAND, AND WALES)	350,289	34,027	NORTHWESTERN UNIVERSITY
(3)					
(4)					
(5)					
(6)					

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) (SEE STATEMENT)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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	
(1) (SEE STATEMENT)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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) (SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	✓	
b Gift, grant, or capital contribution to related organization(s)	✓	
c Gift, grant, or capital contribution from related organization(s)	✓	
d Loans or loan guarantees to or for related organization(s)		✓
e Loans or loan guarantees by related organization(s)		✓
f Dividends from related organization(s)		✓
g Sale of assets to related organization(s)		✓
h Purchase of assets from related organization(s)		✓
i Exchange of assets with related organization(s)		✓
j Lease of facilities, equipment, or other assets to related organization(s)	✓	
k Lease of facilities, equipment, or other assets from related organization(s)		✓
l Performance of services or membership or fundraising solicitations for related organization(s)	✓	
m Performance of services or membership or fundraising solicitations by related organization(s)	✓	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	✓	
o Sharing of paid employees with related organization(s)	✓	
p Reimbursement paid to related organization(s) for expenses	✓	
q Reimbursement paid by related organization(s) for expenses	✓	
r Other transfer of cash or property to related organization(s)	✓	
s Other transfer of cash or property from related organization(s)	✓	

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
RUBICON INSURANCE COMPANY	Q	1,382,601	CASH
(1) RUBICON INSURANCE COMPANY	R	4,063,613	CASH
(2) MCGAW MEDICAL CENTER	A	167,408	CASH
(3) MCGAW MEDICAL CENTER	M	12,148,961	CASH
(4) MCGAW MEDICAL CENTER	O	137,766	CASH
(5) (SEE STATEMENT)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part II**Identification of Related Tax-Exempt Organizations (continued)**

(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) RUBICON INSURANCE COMPANY (36-3694409) 2020 RIDGE AVENUE, EVANSTON, IL 60208	PROVIDING MEDICAL MALPRACTICE, GENERAL/PROF SSIONAL/AUTO LIABILITY INSURANCE TO THE UNIVERSITY	IL	501(C)(3)	12 TYPE I	NORTHWESTER N UNIVERSITY	✓	
(2) STUDENTS PUBLISHING COMPANY (36-6002654) 1999 SHERIDAN RD, EVANSTON, IL 60208	PUBLISHES STUDENT PERIODICALS	IL	501(C)(3)	12 TYPE II			✓
(3) MCGAW MEDICAL CENTER OF NORTHWESTERN UNIVERSITY (36-2656113) 420 E. SUPERIOR ST., CHICAGO, IL 60611	COORDINATION OF MEDICAL RESIDENTS	IL	501(C)(3)	12 TYPE I	NORTHWESTER N UNIVERSITY	✓	
(4) THE BIG TEN CONFERENCE INC. (36-3640583) 1500 W HIGGINS RD., PARK RIDGE, IL 60068	FACILITATE QUALITY INTERCOLLEGIA TE ATHLETIC COMPETITION	IL	501(C)(3)	12 TYPE II			✓
(5) BIG TEN ACADEMIC ALLIANCE (46-3254996) 1819 S NEIL ST, CHAMPAIGN, IL 61820	ACADEMIC CONSORTIUM TO ADVANCE MISSION OF MEMBER INSTITUTIONS	IL	501(C)(3)	12 TYPE I			✓

Part III
Identification of Related Organizations Taxable as a Partnership (continued)

(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	
(1) KURAMO AFRICA OPPORTUNITY FUND II, LP (47-3117325) 500 5TH AVE, 44TH FL, NEW YORK, NY 10110	INVESTMENT	NY	NORTHWESTERN UNIVERSITY	EXCLUDED	462,508	9,888,918		✓	0		✓	99.00
(2) KCG 64 CI-1, L.P. (82-3391115) 7121 FAIRWAY DR, STE 410, PALM BEACH GARDENS, FL 33418	INVESTMENT	FL	NORTHWESTERN UNIVERSITY	EXCLUDED	3,280,501	2,637,388		✓	0		✓	84.99
(3) NIGHTHAWK PARTNERS LP (82-5246719) 2000 MCKINNEY AVENUE, SUITE 2125, DALLAS, TX 75201	INVESTMENT	DE	NORTHWESTERN UNIVERSITY	EXCLUDED	(5096646)	143,424,453		✓	(8,489)		✓	100.00
(4) FOREST HILL STRATEGIC VALUE FUND, L.P. (45-3638016) 100 RIVER BLUFF DR, STE. 430, LITTLE ROCK, AR 72202-2284	INVESTMENT	AR	NORTHWESTERN UNIVERSITY	EXCLUDED	4,815,703	94,020,755		✓	0		✓	71.47

Part IV**Identification of Related Organizations Taxable as a Corporation or Trust (continued)**

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER UNITRUSTS/ANNUITY TRUSTS/PIF (58. 7, 2, RESPECTIVELY)	CHARITABLE TRUST	IL	N/A	TRUST			N/A	✓	
(2) BENSELL US FEEDER, L.P. (98-0492320) 50 LOTHIAN RD, FESTIVAL SQUARE, EDINBURGH, EH3 9WJ, UK	INVESTMENTS	UNITED KINGDOM (ENGLAND, NORTHERN IRELAND, SCOTLAND, AND WALES)	NORTHWEST ERN UNIVERSITY	C CORPORATION	173,776	193,931	56.60	✓	
(3) GOTHAM NEUTRAL STRATEGIES LTD CORPORATE SERVICES (CAYMAN) LIMITED, 190 ELGIN AVE, GEORGE TOWN, GRAND CAYMAN, KT1-9005, CJ	INVESTMENT	CAYMAN ISLANDS	NORTHWEST ERN UNIVERSITY	C CORPORATION	28,670,951	154,284,088	88.86	✓	
(4) FOUR PINES OFFSHORE FUND LP (98-1494503) WALKERS CORP LTD, 190 ELGIN AVE, CAYMAN ISLANDS GEORGE TOWN, GRAND CAYMAN, KY1-9008, CJ	INVESTMENTS	CAYMAN ISLANDS	NORTHWEST ERN UNIVERSITY	C CORPORATION	(1,285,239)	25,052,893	99.95	✓	
(5) SABA CAPITAL W FUND, LTD (98-1588335) CAYMAN CORPORATE CENTRE, 27 HOSPITAL RD CAYMAN ISL GEORGE TN, GRAND CAYMAN, KY1-9008, CJ	INVESTMENTS	CAYMAN ISLANDS	NORTHWEST ERN UNIVERSITY	C CORPORATION	(5,799,783)	280,965,182	100.00	✓	

Part V**Transactions with Related Organizations (continued)**

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount Involved	(d) Method of determining amount involved
(6) MCGAW MEDICAL CENTER	P	186,941	CASH
(7) MCGAW MEDICAL CENTER	Q	149,876	CASH
(8) MCGAW MEDICAL CENTER	L	550,000	CASH
(9) KCG 64 CI-1, L.P.	S	70,730	CASH
(10) NIGHTHAWK PARTNERS LP	R	4,732,038	CASH
(11) NIGHTHAWK PARTNERS LP	S	3,765,282	CASH
(12) BENSELL US FEEDER, L.P.	S	249,134	CASH

Part VII**Supplemental Information.** Provide additional information for responses to questions on Schedule R (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE R, PART III, COLUMN (G) -	NORTHWESTERN UNIVERSITY USED THE TOTAL AMOUNT REPORTED BY THE PARTNERSHIP ON SCHEDULE K-1 FOR THE PARTNERSHIP'S YEAR ENDING WITH OR WITHIN THE ORGANIZATION'S TAX YEAR. SCHEDULE K-1 AMOUNTS ARE BASED ON TAX BASIS AS PER IRS REQUIREMENTS
SCHEDULE R, PART IV, COLUMN (C) -	THE CHARITABLE REMAINDER UNITRUSTS AND CHARITABLE REMAINDER ANNUITY TRUSTS ARE PREDOMINANTLY DOMICILED IN ILLINOIS