# Return of Organization Exempt From Income Tax

**Form 990**

- **Department of the Treasury**
- **Internal Revenue Service**

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

### Part I Summary

1. **Briefly describe the organization's mission or most significant activities:** To provide highest quality education to undergraduate and graduate students, in the Jesuit tradition.

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

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

4. **Number of independent voting members of the governing body (Part VI, line 1b):** 34.

5. **Total number of individuals employed in calendar year 2017 (Part V, line 2a):** 7,623.

6. **Total number of volunteers (estimate if necessary):** 2,112.

7a. **Total unrelated business revenue from Part VIII, column (C), line 12:** 4,042,121.

7b. **Net unrelated business taxable income from Form 990-T, line 34:** 4,051,428.

### Revenue

- **Contributions and grants (Part VIII, line 1h):** $87,458,714
- **Program service revenue (Part VIII, line 2g):** $72,470,418
- **Investment income (Part VIII, column (A), lines 3, 4, and 7d):** $26,596,148
- **Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12):** $836,743,901
- **Grants and similar amounts paid (Part IX, column (A), lines 1-3):** $206,801,137
- **Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10):** $367,408,792
- **Professional fundraising fees (Part IX, column (A), line 11):** $356,509
- **Total fundraising expenses (Part IX, column (D), line 25):** $15,672,925.

### Expenses

- **Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e):** $2,112.
- **Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25):** $800,509,583
- **Revenue less expenses. Subtract line 18 from line 12:** $722,871,200

### Net Assets or Fund Balances

- **Beginning of Current Year:** $1,908,507,983
- **End of Year:** $1,960,346,078

### 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.

**Signature of officer:**

**MARThA K. HiRST**

**SR VP, CFO&TREAS**

**Date:** 05/08/2019

**Paid Preparer Use Only**

**Print/Type preparer's name:**

**Marilyn FARLEY**

**Preparer's signature:**

**Date:** 05/07/2019

**Check self-employed**

**PTIN:** 001231880

**Firm's EIN:** 13-5565207

**Firm's name:** KPMG LLP

**Firm's address:** 345 PARK AVENUE NEW YORK, NY 10154-0102

**Phone no.:** 212-758-9700

**May the IRS discuss this return with the preparer shown above? (see instructions):** [ ] Yes [ ] No

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**For Paperwork Reduction Act Notice, see the separate instructions.**
**Application for Automatic Extension of Time To File an Exempt Organization Return**

**Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer’s identifying number, see instructions

<table>
<thead>
<tr>
<th>Name of exempt organization or other filer, see instructions.</th>
<th>Employer identification number (EIN) or Social security number (SSN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORDHAM UNIVERSITY</td>
<td>13-1740451</td>
</tr>
</tbody>
</table>

Enter the Return Code for the return that this application is for (file a separate application for each return).

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or Form 990-EZ</td>
<td>01</td>
<td>Form 990-T (corporation)</td>
<td>07</td>
</tr>
<tr>
<td>Form 990-BL</td>
<td>02</td>
<td>Form 1041-A</td>
<td>08</td>
</tr>
<tr>
<td>Form 4720 (individual)</td>
<td>03</td>
<td>Form 4720 (other than individual)</td>
<td>09</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>04</td>
<td>Form 5227</td>
<td>10</td>
</tr>
<tr>
<td>Form 990-T (sec. 401(a) or 408(a) trust)</td>
<td>05</td>
<td>Form 6069</td>
<td>11</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
<td>Form 8870</td>
<td>12</td>
</tr>
</tbody>
</table>

**NICHOLAS MILOWSKI**

The books are in the care of FORDHAM UNIVERSITY, 441 E FORDHAM RD BRONX NY 10458

Telephone No. ► 718 817 1000

Fax No. ► 718 817 1000

- If the organization does not have an office or place of business in the United States, check this box .
- If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 05/15, 2019, to file the exempt organization return for the organization named above. The extension is for the organization’s return for:

- □ calendar year 20__
- ❌ tax year beginning 07/01, 2017__, and ending 06/30, 2018__.

2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return

<table>
<thead>
<tr>
<th>Change in accounting period</th>
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<tbody>
<tr>
<td>□</td>
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</tbody>
</table>

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

<table>
<thead>
<tr>
<th>$ 0.</th>
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</table>

3b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

<table>
<thead>
<tr>
<th>$ 0.</th>
</tr>
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</table>

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

<table>
<thead>
<tr>
<th>$ 0.</th>
</tr>
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</table>

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.
Part III  Statement of Program Service Accomplishments

1. Briefly describe the organization's mission:

FORDHAM UNIVERSITY, THE JESUIT UNIVERSITY OF NEW YORK, IS COMMITTED TO THE DISCOVERY OF WISDOM AND THE TRANSMISSION OF LEARNING, THROUGH RESEARCH AND THROUGH EDUCATION OF THE HIGHEST QUALITY. FOR MORE INFORMATION, SEE SCHEDULE O.

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

Yes (X)  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 (X)  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. Higher Education  

(Code: ) (Expenses $662,857,199. including grants of $222,503,978. ) (Revenue $681,875,041. )

HIGHER EDUCATION  

FORDHAM UNIVERSITY IS AN INDEPENDENT, NOT-FOR-PROFIT, COEDUCATIONAL, INSTITUTION OF HIGHER LEARNING, IN THE JESUIT TRADITION, WITH ITS PRINCIPAL CAMPUSES LOCATED IN NEW YORK CITY. FORDHAM UNIVERSITY SERVES AND EDUCATES APPROXIMATELY 9,600 UNDERGRADUATE STUDENTS AND 6,400 GRADUATE AND PROFESSIONAL STUDENTS. FOR MORE INFORMATION, SEE SCHEDULE O.

4b. Auxiliary Enterprises  

(Code: ) (Expenses $91,632,905. including grants of $ ) (Revenue $87,028,657. )

AUXILIARY ENTERPRISES  

THE UNIVERSITY PROVIDES VARIOUS SERVICES FOR THE BENEFIT OF ITS STUDENTS, FACULTY AND STAFF AND IN SUPPORT OF EDUCATIONAL ACTIVITIES. THE MORE SIGNIFICANT AUXILIARY SERVICES INCLUDE STUDENT HOUSING AND FOOD SERVICE.

4c. Other program services (Describe in Schedule O.)  

(Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4d. Total program service expenses  

754,490,104.  

(Expenses $ including grants of $ ) (Revenue $ )
<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
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<tbody>
<tr>
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<td>19</td>
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</table>
Part IV Checklist of Required Schedules (continued)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. ......................... 20a X
   b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .................. 20b
21 Did the organization report more than $5,000 of grants or other assistance to any domestic organization or 21 X
   domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II....................
22 Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on 22 X
   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 23 X
   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 24a X
   $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? ............ 24b X
   c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c X
      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? ...... 24d X
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a X
      transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I .....................
   b If "Yes," complete Schedule L, Part I ..............................................................................................................
   c Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 25c
      year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25d
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 X
   current or former officers, directors, trustees, key employees, highest compensated employees, or 26d X
   disqualified persons? If "Yes," complete Schedule L, Part II .................................................................
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 X
   substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27d
   entity 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 Schedule L, 28 X
   Part IV instructions for applicable filing thresholds, conditions, and exceptions):
   a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X
   b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X
      Schedule L, Part IV ....................................................................................................................................
   c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) 28c X
      was an officer, director, trustee, or direct or indirect owner? 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. 29 X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X
   conservation contributions? If "Yes," complete Schedule M ....................................................................
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X
   Part I ...............................................................................................................................................................
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X
   complete Schedule N, Part II ............................................................................................................................
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X
   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, 34 X
   or IV, and Part V, line 1 ................................................................................................................................
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? ...................... 35a X
   b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 35b X
      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 36 X
   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 37 X
   and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI, 37d
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 X
   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.


1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.  1a  739

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.  1b  0.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c  

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  7,623

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  2b  

Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).

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?  3b  

If "No" to line 3b, provide an explanation in Schedule O.

3c Did the organization have any income from unrelated activities (such as interest, dividends, or royalties) during the tax year?  3c  

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:  


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  

If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  5c  

6a Does the organization have 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 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.  

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  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?  13a  

Note. See the instructions for additional information the organization must report on Schedule O.

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  

13c 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 in Schedule O  14b
### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>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 in Schedule O.</td>
<td>39</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Enter the number of voting members included in line 1a, above, who are independent</td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization become aware during the year of a significant diversion of the organization's assets?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have members or stockholders?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Each committee with authority to act on behalf of the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>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?</td>
<td>X</td>
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</table>

### Section B. Policies

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Did the organization have local chapters, branches, or affiliates?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; 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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Describe in Schedule O the process, if any, used by the organization to review this Form 990.</td>
<td>X</td>
<td></td>
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<tr>
<td>12a</td>
<td>Did the organization have a written conflict of interest policy? If &quot;No,&quot; go to line 13</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Did the organization regularly and consistently monitor and enforce compliance with the policy? If &quot;Yes,&quot; describe in Schedule O how this was done</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Did the organization have a written whistleblower policy?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Did the organization have a written document retention and destruction policy?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The organization's CEO, Executive Director, or top management official</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Other officers or key employees of the organization</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>16a</td>
<td>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; 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?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed as follows:

- [ ] Own website
- [ ] Another's website
- [X] Upon request
- [ ] Other (explain in Schedule O)

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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.

- [ ] Upon request

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicholas Milionis</td>
<td>Fordham University, 441 E Forham Rd Bronx, NY 10458</td>
<td>718-817-1000</td>
</tr>
</tbody>
</table>

Form 990 (2017) 13-1740451 Page 6
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) JOSEPH M. MCSHANE S.J.</td>
<td>35.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>PRESIDENT &amp; TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DONALD ALMEIDA</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) SALLY J. BELLET</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) DARRYL EMERSON BROWN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) JAMES S. BROWN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) VINCENT R. CAPPucci</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) DONNA M. CARROLL</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) MICHAEL J. COSGROVE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9) GERALD C. CROTTY</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) CAROLYN DURSI CUNNIFFE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) ROBERT D. DALEO</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE &amp; CHAIR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) CAROLYN N. DOLAN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) CHRISTOPHER F. FITZMAURICE</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) JAMES P. FLAHERTY</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TRUSTEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15) MARYANNE GILMARTIN TRUSTEE (END 4/18)</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(16) HONORA AHERN GROSE TRUSTEE &amp; VICE CHAIR</td>
<td>1.00</td>
<td>TRUSTEE &amp; VICE CHAIR</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(17) PATRICIA HELLER TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(18) DEBORAH HIRSCH TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(19) JAMES J. HOULIHAN TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(20) DARLENE LUCCIO JORDAN TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(21) SUSHEEL KIRPALANI TRUSTEE (START 07/17)</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(22) BRIAN W. MACLEAN TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(23) J. THOMAS MCCLAIN, S.J. TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(24) SYLVESTER MCCLEARN TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(25) STEPHEN J. MCGUINNESS TRUSTEE</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

**1b Sub-total**

**c Total from continuation sheets to Part VII, Section A**

**d Total (add lines 1b and 1c)**

---

| 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 | 766 |

**3** Did the organization list any **former** officer, director, or 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

**ATTACHMENT 1**

**2** Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization | 265 |
Part VII  
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(26) HENRY S. MILLER TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(27) JAMES J. MIRACKY, S.J. TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(28) ARMANDO NUNEZ, JR. TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(29) JOSEPH P. PARKES, S.J. TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(30) GEORGE QUICKLEY, S.J. TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(31) THOMAS J. REGAN, S.J. TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(32) DENNIS G. RUPPEL TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(33) LUIS E. SAN MIGUEL TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(34) SUSAN CONLEY SALICE TRUSTEE (START 07/17)</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(35) THOMAS SCIRGHI, S.J. TRUSTEE</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(36) EDWARD M. STROZ TRUSTEE &amp; VICE CHAIR</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total ....................................................................................................................

c Total from continuation sheets to Part VII, Section A ...........................................

d Total (add lines 1b and 1c) ..........................................................................................

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 ........................................ 766

3 Did the organization list any former officer, director, or 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ........................................................................
### Part VII  
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. EILEEN FITZGERALD SUDLER</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>2. MARY ANNE SULLIVAN</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>3. WILLIAM J. TOPPETA</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>4. JOHN M. ZIZZO</td>
<td>1.00</td>
<td>TRUSTEE</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>5. MARGARET BALL</td>
<td>35.00</td>
<td>SECRETARY OF THE UNIVERSITY</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>6. BRIAN BYRNE</td>
<td>35.00</td>
<td>VP FOR LINCOLN CENTER</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>7. THOMAS A. DUNNE</td>
<td>35.00</td>
<td>VP FOR ADMINISTRATION</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>8. STEPHEN FREEDMAN</td>
<td>35.00</td>
<td>PROVOST (DECEASED 7/18)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>9. JEFFREY GRAY</td>
<td>35.00</td>
<td>SVP OF STUDENT AFFAIRS</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>10. MARTHA K. HIRST</td>
<td>35.00</td>
<td>SV P, CFO &amp; TREASURER</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>11. MICHAEL C. MCCARTHY S.J.</td>
<td>35.00</td>
<td>VP MISSION INTERGRA &amp; PLANNING</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

| 1b Sub-total |  
| 2c Total from continuation sheets to Part VII, Section A |  
| 2d Total (add lines 1b and 2c) |  

Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: 766

<table>
<thead>
<tr>
<th>3</th>
<th>Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If &quot;Yes,&quot; complete Schedule J for such individual.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4</th>
<th>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 &quot;Yes,&quot; complete Schedule J for such individual.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5</th>
<th>Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If &quot;Yes,&quot; complete Schedule J for such person.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5</td>
<td>X</td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

2. Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization: 766
### Part VII  
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
<th>(E)</th>
<th>(F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and title</td>
<td>Average hours per week (list any hours for related organizations below dotted line)</td>
<td>Position (do not check more than one box, unless person is both an officer and a director/trustee)</td>
<td>Reportable compensation from the organization (W-2/1099-MISC)</td>
<td>Reportable compensation from related organizations (W-2/1099-MISC)</td>
<td>Estimated amount of other compensation from the organization and related organizations</td>
</tr>
<tr>
<td>(48) ROGER MILICI</td>
<td>35.00</td>
<td>VP FOR DEV AND UNIV RELATIONS</td>
<td>X</td>
<td>399,742.0</td>
<td>0</td>
</tr>
<tr>
<td>(49) NICHOLAS MILOWSKI</td>
<td>35.00</td>
<td>VP FOR FINANCE</td>
<td>X</td>
<td>336,459.0</td>
<td>0</td>
</tr>
<tr>
<td>(50) FRANK SIRIANNI</td>
<td>35.00</td>
<td>VP FOR TECHNOLOGY AND CIO</td>
<td>X</td>
<td>357,872.0</td>
<td>0</td>
</tr>
<tr>
<td>(51) PETER STACE</td>
<td>35.00</td>
<td>VP FOR ENROLLMENT</td>
<td>X</td>
<td>387,427.0</td>
<td>0</td>
</tr>
<tr>
<td>(52) KAY TURNER (START 09/17)</td>
<td>35.00</td>
<td>VP FOR HUMAN RESOURCES</td>
<td>X</td>
<td>76,545.0</td>
<td>0</td>
</tr>
<tr>
<td>(53) MARCO VALERA</td>
<td>35.00</td>
<td>VP FOR FACILITIES MGMT</td>
<td>X</td>
<td>358,625.0</td>
<td>0</td>
</tr>
<tr>
<td>(54) MATTHEW DILLER</td>
<td>35.00</td>
<td>DEAN</td>
<td></td>
<td>470,398.0</td>
<td>0</td>
</tr>
<tr>
<td>(55) IFTEKHAR HASAN</td>
<td>35.00</td>
<td>PROFESSOR</td>
<td>X</td>
<td>494,162.0</td>
<td>0</td>
</tr>
<tr>
<td>(56) JEFFREY M. NEUBAUER</td>
<td>35.00</td>
<td>MEN'S BASKETBALL COACH</td>
<td>X</td>
<td>608,808.0</td>
<td>0</td>
</tr>
<tr>
<td>(57) DONNA RAPPACCIOLI</td>
<td>35.00</td>
<td>DEAN</td>
<td>X</td>
<td>653,031.0</td>
<td>0</td>
</tr>
<tr>
<td>(58) BENJAMIN ZIPURSKY</td>
<td>35.00</td>
<td>PROFESSOR</td>
<td>X</td>
<td>444,385.0</td>
<td>0</td>
</tr>
</tbody>
</table>

1b Sub-total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

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

Yes | No
---|---
3 | X

3 Did the organization list any former officer, director, or 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.

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and business address</td>
<td>Description of services</td>
<td>Compensation</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(59) FRANK SIMIO (END ROLE 11/15)</strong></td>
<td>35.00</td>
<td>X</td>
<td>373,791.</td>
<td>0.</td>
<td>67,479.</td>
</tr>
</tbody>
</table>

1b Sub-total

c Total from continuation sheets to Part VII, Section A.

d Total (add lines 1b and 1c).

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.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If &quot;Yes,&quot; complete Schedule J for such individual.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule J for such individual.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule J for such person.</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization.
### Part VIII
**Statement of Revenue**

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

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>1,707,917</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>16,147,705</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants,</td>
<td>54,614,796</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f $</td>
<td>3,625,694</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total Add lines 1a-1f</td>
<td>72,470,418</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a TUITION AND FEES</td>
<td>611600</td>
<td>672,579,391.</td>
<td>672,579,391.</td>
<td></td>
</tr>
<tr>
<td>2b AUXILIARY ENTERPRISES</td>
<td>611710</td>
<td>88,477,776.</td>
<td>87,028,657.</td>
<td>1,449,119.</td>
</tr>
<tr>
<td>2c ATHLETIC AND SUMMER PROGRAMS</td>
<td>611710</td>
<td>3,759,914.</td>
<td>3,759,914.</td>
<td></td>
</tr>
<tr>
<td>2d FEES FOR EDUCATIONAL SERVICES</td>
<td>611600</td>
<td>2,183,152.</td>
<td>2,183,152.</td>
<td></td>
</tr>
<tr>
<td>2e FACILITIES RENTAL</td>
<td>611710</td>
<td>930,611.</td>
<td>930,611.</td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total Add lines 2a-2f</td>
<td>770,352,817.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 3 Investment income (including dividends, interest,      |                  |                                        |                               |                                               |
| and other similar amounts)                              |                  |                                        |                               |                                               |
| 4 Income from investment of tax-exempt bond proceeds    |                  |                                        |                               |                                               |
| 5 Royalties                                             |                  |                                        |                               |                                               |
| (i) Real                                                |                  |                                        |                               |                                               |
| (ii) Personal                                           |                  |                                        |                               |                                               |
| 6a Gross rents                                          | 668,474.         |                                        |                               |                                               |
| 6b Less: rental expenses                                |                  |                                        |                               |                                               |
| 6c Rental income or (loss)                              | 668,474.         |                                        |                               |                                               |
| 6d Net rental income or (loss)                          | 668,474.         |                                        |                               |                                               |
| 7a Gross amount from sales of assets other than inventory|                  |                                        |                               |                                               |
| (i) Securities                                          | 270,378,542.     |                                        |                               |                                               |
| (ii) Other                                              |                  |                                        |                               |                                               |
| 7b Less: cost or other basis                            | 248,104,213.     |                                        |                               |                                               |
| and sales expenses                                      |                  |                                        |                               |                                               |
| 7c Gain or (loss)                                       | 22,274,329.      |                                        |                               |                                               |
| 7d Net gain or (loss)                                   | 22,274,329.      |                                        |                               |                                               |

| 8a Gross income from fundraising events (not including $| 1,707,917.       |                                        |                               |                                               |
| 8b Less: direct expenses                                | 1,125,709.       |                                        |                               |                                               |
| 8c Net income or (loss) from fundraising events         | -894,091.        |                                        |                               |                                               |

| 9a Gross income from gaming activities                   |                  |                                        |                               |                                               |
| 9b Less: direct expenses                                |                  |                                        |                               |                                               |
| 9c Net income or (loss) from gaming activities           | 0.               |                                        |                               |                                               |

| 10a Gross sales of inventory, less returns and allowances|                  |                                        |                               |                                               |
| 10b Less: cost of goods sold                            |                  |                                        |                               |                                               |
| 10c Net income or (loss) from sales of inventory        | 0.               |                                        |                               |                                               |

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11a PARKING INCOME - OPEN TO PUBLIC</td>
<td>812930</td>
<td>118,130.</td>
<td>118,130.</td>
<td></td>
</tr>
<tr>
<td>11b TRAVEL TOURS</td>
<td>561500</td>
<td>38,851.</td>
<td>38,851.</td>
<td></td>
</tr>
<tr>
<td>11c All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11e Total Add lines 11a-11d</td>
<td>156,981.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See instructions.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Revenue**: 279222 M20Y

(V 17-7.10 2176184 PAGE 13)
### Statement of Functional Expenses

**Part IX**

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: [X]

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>543,259</td>
<td>543,259</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>221,711,776</td>
<td>221,711,776</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>248,943</td>
<td>248,943</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>5,279,442</td>
<td>2,325,473</td>
<td>2,487,842</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>139,019</td>
<td>126,508</td>
<td>9,731</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>269,659,309</td>
<td>231,184,780</td>
<td>31,559,225</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>19,899,410</td>
<td>17,880,061</td>
<td>1,075,877</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>65,821,593</td>
<td>53,319,473</td>
<td>9,548,573</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>18,247,400</td>
<td>16,395,694</td>
<td>1,564,258</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>930,255</td>
<td></td>
<td>930,255</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>318,500</td>
<td></td>
<td>318,500</td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td>64,228</td>
<td></td>
<td>64,228</td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td>385,322</td>
<td></td>
<td>385,322</td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td>6,745,735</td>
<td></td>
<td>6,745,735</td>
</tr>
<tr>
<td>g</td>
<td>Other. If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>14,908,165</td>
<td>12,415,158</td>
<td>2,200,585</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>10,984,666</td>
<td>7,351,538</td>
<td>3,632,979</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td>60,788</td>
<td>46,260</td>
<td>14,528</td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>57,761,948</td>
<td>49,056,179</td>
<td>7,856,472</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>10,313,563</td>
<td>9,564,385</td>
<td>451,165</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>12,532,028</td>
<td>10,962,391</td>
<td>848,984</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>16,690,987</td>
<td>16,639,956</td>
<td>51,031</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>56,425,686</td>
<td>52,250,189</td>
<td>2,877,709</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>3,411,971</td>
<td>1,013,544</td>
<td>2,395,816</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>STUDENT MEAL COSTS</td>
<td>13,162,497</td>
<td>13,162,497</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>STUDENT EXCHANGE COSTS</td>
<td>6,700,243</td>
<td>6,700,243</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>VOLUNTARY SEPARATION BENEFIT</td>
<td>10,517,000</td>
<td>5,982,340</td>
<td>4,306,928</td>
</tr>
<tr>
<td>d</td>
<td>LIBRARY MATERIALS</td>
<td>2,937,848</td>
<td>2,937,848</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>9,281,690</td>
<td>7,776,943</td>
<td>1,329,195</td>
</tr>
</tbody>
</table>

**25** Total functional expenses. Add lines 1 through 24e

853,244,681 | 754,490,104 | 83,081,652 | 15,672,925 |

**26** Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [ ] if following SOP 98-2 (ASC 958-720). | 0 |
## Part X Balance Sheet

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

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>398,455</td>
<td>12,392,230</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>73,684,737</td>
<td>87,459,050</td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>65,952,842</td>
<td>56,198,243</td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>6,843,902</td>
<td>9,197,896</td>
</tr>
<tr>
<td>5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employee benefit organizations (see instructions) Complete Part II of Schedule L</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td>11,260,478</td>
<td>10,324,688</td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td>943,385</td>
<td>900,661</td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>4,005,436</td>
<td>5,986,735</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D</td>
<td>1,590,823,909</td>
<td></td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>545,294,581</td>
<td>1,045,529,328</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td>65,118,721</td>
<td>210,201,894</td>
</tr>
<tr>
<td>12 Investments - other securities See Part IV, line 11</td>
<td>600,796,916</td>
<td>505,402,642</td>
</tr>
<tr>
<td>13 Investments - program-related See Part IV, line 11</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>15 Other assets See Part IV, line 11</td>
<td>16,257,955</td>
<td>16,752,711</td>
</tr>
<tr>
<td>16 Total assets Add lines 1 through 15 (must equal line 34)</td>
<td>1,908,507,983</td>
<td>1,960,346,078</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>73,486,224</td>
<td>65,888,444</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td>37,098,555</td>
<td>53,859,999</td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td>427,536,619</td>
<td>419,934,097</td>
</tr>
<tr>
<td>21 Escrow or custodial account liability Complete Part IV of Schedule D</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td>10,153,062</td>
<td>352,963,735</td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>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</td>
<td>68,782,409</td>
<td>81,946,871</td>
</tr>
<tr>
<td>26 Total liabilities Add lines 17 through 25</td>
<td>617,056,869</td>
<td>629,326,015</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Assets or Fund Balances</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27 Unrestricted net assets</td>
<td>663,489,391</td>
<td>664,703,803</td>
</tr>
<tr>
<td>28 Temporarily restricted net assets</td>
<td>296,035,657</td>
<td>313,352,525</td>
</tr>
<tr>
<td>29 Permanently restricted net assets</td>
<td>331,926,069</td>
<td>352,963,735</td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 27 through 29 and lines 33 and 34</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>30 Capital stock or trust principal or current funds</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>31 Paid-in or capital surplus or land, building, or equipment fund</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>32 Retained earnings, endowment, accumulated income, or other funds</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>33 Total net assets or fund balances</td>
<td>1,291,451,114</td>
<td>1,331,020,063</td>
</tr>
<tr>
<td>34 Total liabilities and net assets/fund balances</td>
<td>1,908,507,983</td>
<td>1,960,346,078</td>
</tr>
</tbody>
</table>
### Part XI  Reconciliation of Net Assets

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

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>873,402,272.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>853,244,681.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>20,157,591.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>1,291,451,114.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>23,925,306.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>0.0</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>0.0</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>0.0</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>-4,513,948.</td>
</tr>
<tr>
<td>10</td>
<td>Total revenue less expenses (must equal Part X, line 33, column (B))</td>
<td>1,331,020,063.</td>
</tr>
</tbody>
</table>

### Part XII  Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:  Cash  Accrual  Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Separate basis  Consolidated basis  Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Separate basis  Consolidated basis  Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 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.

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

1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:

<table>
<thead>
<tr>
<th>Reason for Public Charity Status</th>
<th>(All organizations must complete this part.) See instructions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Name of supported organization</td>
<td>(ii) EIN</td>
</tr>
<tr>
<td>(A)</td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
</tr>
</tbody>
</table>

**Part I**

#### Reason for Public Charity Status

- **Type I.** An organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- **Type IV.** A supporting 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).
- **Type V.** An organization organized and operated exclusively to test for public safety. **See section 509(a)(4).**

#### Provide the following information about the supported organization(s):

- | (I) Name of supported organization | (II) EIN |
- | (A) | |
- | (B) | |
- | (C) | |
- | (D) | |
- | (E) | |
- Total | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2017

**Note:** All organizations must complete this part. See instructions.
### 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>82,790,803.</td>
<td>58,119,927.</td>
<td>66,871,154.</td>
<td>87,280,461.</td>
<td>72,470,418.</td>
<td>367,532,763.</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td>82,790,803.</td>
<td>58,119,927.</td>
<td>66,871,154.</td>
<td>87,280,461.</td>
<td>72,470,418.</td>
<td>367,532,763.</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>82,790,803.</td>
<td>58,119,927.</td>
<td>66,871,154.</td>
<td>87,280,461.</td>
<td>72,470,418.</td>
<td>367,532,763.</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>345,522,793.</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>82,790,803.</td>
<td>58,119,927.</td>
<td>66,871,154.</td>
<td>87,280,461.</td>
<td>72,470,418.</td>
<td>367,532,763.</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>12,888,322.</td>
<td>11,045,770.</td>
<td>11,978,403.</td>
<td>6,594,392.</td>
<td>9,041,818.</td>
<td>51,548,705.</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td>1,215,453.</td>
<td>1,211,641.</td>
<td>1,322,144.</td>
<td>1,460,353.</td>
<td>1,449,119.</td>
<td>6,658,710.</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>425,740,178.</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,467,694,233.</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>81.16 %</td>
</tr>
<tr>
<td>15 Public support percentage from 2016 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>79.69 %</td>
</tr>
<tr>
<td>16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>16b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the &quot;facts-and-circumstances&quot; test, check this box and stop here. Explain in Part VI how the organization meets the &quot;facts-and-circumstances&quot; test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>17b 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the &quot;facts-and-circumstances&quot; test, check this box and stop here. Explain in Part VI how the organization meets the &quot;facts-and-circumstances&quot; test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.</td>
</tr>
</tbody>
</table>
### 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2013</th>
<th>(b) 2014</th>
<th>(c) 2015</th>
<th>(d) 2016</th>
<th>(e) 2017</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. Add lines 1 through 5</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Public support. (Subtract line 7c from line 6)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

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

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

**Section C. Computation of Public Support Percentage**

<table>
<thead>
<tr>
<th>(line 8, column (f) divided by line 13, column (f))</th>
<th>15</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Public support percentage for 2017</strong></td>
<td>15</td>
<td>%</td>
</tr>
</tbody>
</table>

**Section D. Computation of Investment Income Percentage**

<table>
<thead>
<tr>
<th>(line 10c, column (f) divided by line 13, column (f))</th>
<th>17</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Investment income percentage for 2017</strong></td>
<td>17</td>
<td>%</td>
</tr>
</tbody>
</table>

**33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line 17 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization.**

**33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3 %, and line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization.**

**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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are all of the organization's supported organizations listed by name in the organization's governing documents? If &quot;No,&quot; 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.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>3a. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If &quot;Yes,&quot; answer (b) and (c) below.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; describe in Part VI when and how the organization made the determination.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>c. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If &quot;Yes,&quot; explain in Part VI what controls the organization put in place to ensure such use.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>4a. Was any supported organization not organized in the United States (&quot;foreign supported organization&quot;)? If &quot;Yes,&quot; and if you checked 12a or 12b in Part I, answer (b) and (c) below.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>b. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If &quot;Yes,&quot; 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.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; 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.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>5a. Did the organization add, substitute, or remove any supported organizations during the tax year? If &quot;Yes,&quot; answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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?</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>c. Substitutions only. Was the substitution the result of an event beyond the organization's control?</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>7. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>8. Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 9? If &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>b. Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>c. Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; answer 10b below.</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
<tr>
<td>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.)</td>
<td>![Yes No]</td>
<td>![Yes No]</td>
</tr>
</tbody>
</table>
**Part IV** Supporting Organizations (continued)

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td>A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td>A family member of a person described in (a) above?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td>A 35% controlled entity of a person described in (a) or (b) above? If “Yes” to a, b, or c, provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section B. Type I Supporting Organizations**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If “No,” describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization’s activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Type II Supporting Organizations**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If “Yes,” describe in Part VI the role the organization’s supported organizations played in this regard.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section E. Type III Functionally Integrated Supporting Organizations**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The organization satisfied the Activities Test. Complete line 2 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>The organization is the parent of each of its supported organizations. Complete line 3 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Activities Test. Answer (a) and (b) below.**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Did the activities described in (a) constitute activities that, but for the organization’s involvement, one or more of the organization's supported organization(s) would have been engaged in? If “Yes,” explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Parent of Supported Organizations. Answer (a) and (b) below.**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td>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? Provide details in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>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.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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.

<table>
<thead>
<tr>
<th>Section A - Adjusted Net Income</th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Net short-term capital gain</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>2 Recoveries of prior-year distributions</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Other gross income (see instructions)</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4 Add lines 1 through 3.</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>5 Depreciation and depletion</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>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)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Other expenses (see instructions)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2017 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by Line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>Excess Distributions</th>
<th>Underdistributions Pre-2017</th>
<th>Distributable Amount for 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2017 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>From 2013 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>From 2014 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>From 2015 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2016 . . . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Total of lines 3a through e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to 2017 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Carryover from 2012 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2017 from Section D, line 7: $</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2017 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2018.</strong> Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2013 . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2014 . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2015 . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2016 . . . .</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2017 . . . .</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2017
**Part VI  Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE A, PART II, LINE 10**

**OTHER INCOME:**

**LINE 10 INCLUDES OTHER PROGRAM REVENUE EXCLUDED FROM UNRELATED BUSINESS**

**TAXABLE INCOME.**
Schedule B
(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

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

Name of the organization
FORDHAM UNIVERSITY

Employer identification number
13–1740451

Organization type (check one):

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

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 or 990-EZ), 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, 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).
### Part I Contributors

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

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$4,400,000.</td>
<td>Person X Payroll Noncash</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$1,950,000.</td>
<td>Person X Payroll Noncash</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$1,600,000.</td>
<td>Person X Payroll Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part II Noncash Property
(see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
</tr>
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</tbody>
</table>
**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.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Transferee’s name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
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</thead>
<tbody>
<tr>
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Transferee’s name, address, and ZIP + 4

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Transferee’s name, address, and ZIP + 4

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</table>

Transferee’s name, address, and ZIP + 4

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</table>

Transferee’s name, address, and ZIP + 4

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<th>Relationship of transferor to transferee</th>
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<tr>
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</tbody>
</table>
**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)

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

<table>
<thead>
<tr>
<th>Limits on Lobbying Expenditures</th>
<th>(a) Filing organization’s totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Total lobbying expenditures (add lines 1a and 1b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Other exempt purpose expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td></td>
<td></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.

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

1h Subtract line 1g from line 1a. If zero or less, enter -0- ..............................................

1i Subtract line 1f from line 1c. If zero or less, enter -0- ..............................................

1j 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? .................................................. □ Yes □ No

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

| Lobbying Expenditures During 4-Year Averaging Period |
|-----------------------------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| Calendar year (or fiscal year beginning in)         | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 |
| 2a Lobbying nontaxable amount                       |         |         |         |         |
| b Lobbying ceiling amount (150% of line 2a, column (e)) |         |         |         |         |
| c Total lobbying expenditures                       |         |         |         |         |
| d Grassroots nontaxable amount                      |         |         |         |         |
| e Grassroots ceiling amount (150% of line 2d, column (e)) |         |         |         |         |
| f Grassroots lobbying expenditures                  |         |         |         |         |
### Part II B

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

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑</td>
<td></td>
<td>8,892.</td>
</tr>
<tr>
<td>☑</td>
<td></td>
<td>6,921.</td>
</tr>
<tr>
<td>☑</td>
<td></td>
<td>58,079.</td>
</tr>
<tr>
<td>☑</td>
<td></td>
<td>31,726.</td>
</tr>
<tr>
<td>☑</td>
<td></td>
<td>213,756.</td>
</tr>
</tbody>
</table>

### Part A

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

### Part 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."

### 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.
SCHEDULE C, PART II-B, LINE 1

LOBBYING ACTIVITIES:

AN INSUBSTANTIAL PART OF THE UNIVERSITY'S ACTIVITIES INCLUDED THOSE ATTEMPTING TO INFLUENCE LOCAL, STATE AND FEDERAL LEGISLATION, REGULATION, AND POLICY BENEFICIAL TO THE UNIVERSITY AND ITS STUDENTS.

LINE 1I

THE UNIVERSITY PAID MEMBERSHIP DUES TO FIVE ORGANIZATIONS, EACH OF WHICH ENGAGED IN SOME DEGREE OF LOBBYING ACTIVITY. TOTAL MEMBERSHIP DUES PAID DURING FISCAL YEAR 2018 (AND THE PORTIONS OF WHICH WERE ATTRIBUTED TO LOBBYING ACTIVITIES) WERE AS FOLLOWS:

THE COMMISSION OF INDEPENDENT COLLEGES AND UNIVERSITIES $89,184 ($5,520)
ASSOCIATION OF JESUIT COLLEGES AND UNIVERSITIES $85,916 ($4,296)
NATIONAL ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES $15,750 ($1,103)
AMERICAN COUNCIL ON EDUCATION $13,441 ($282)
NATIONAL HUMANITIES ALLIANCE $2,500 ($750)

LOBBYING ACTIVITIES DO NOT CONSTITUTE A SUBSTANTIAL PORTION OF FORDHAM'S ACTIVITIES.
**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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

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).
   - Preservation of land for public use (e.g., recreation or education)
   - Protection of natural habitat
   - Preservation of open space
   - Preservation of a historically important land area
   - Preservation of a certified historic structure

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.

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

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 SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

   - (i) Revenue included on Form 990, Part VIII, line 1  
     [ ]
   - (ii) Assets included in Form 990, Part X  
     [ ]

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

   - (a) Revenue included on Form 990, Part VIII, line 1  
     [ ]
   - (b) Assets included in Form 990, Part X  
     [ ]
### Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

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

- [X] Public exhibition
- [X] Scholarly research
- [ ] Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?   Yes  No

### Part IV  Escrow and Custodial Arrangements.

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

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

1b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
<td></td>
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<tr>
<td>1d</td>
<td></td>
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<tr>
<td>1e</td>
<td></td>
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<tr>
<td>1f</td>
<td></td>
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</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?   Yes  No

2b 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.

<table>
<thead>
<tr>
<th>1a Beginning of year balance</th>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b Contributions</td>
<td>23,836,007.</td>
<td>9,202,025.</td>
<td>18,161,977.</td>
<td>20,830,715.</td>
<td>34,025,623.</td>
</tr>
<tr>
<td>1c Net investment earnings,</td>
<td>51,431,735.</td>
<td>92,820,000.</td>
<td>-27,474,815.</td>
<td>4,277,830.</td>
<td>73,098,615.</td>
</tr>
<tr>
<td>gains, and losses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Grants or scholarships</td>
<td>12,897,356.</td>
<td>10,699,974.</td>
<td>11,423,562.</td>
<td>8,509,736.</td>
<td>7,645,979.</td>
</tr>
<tr>
<td>1e Other expenditures for</td>
<td>17,522,652.</td>
<td>16,715,781.</td>
<td>18,426,435.</td>
<td>20,954,173.</td>
<td>12,674,108.</td>
</tr>
<tr>
<td>facilities and programs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f Administrative expenses</td>
<td>6,745,735.</td>
<td>5,615,246.</td>
<td>4,283,185.</td>
<td>5,166,535.</td>
<td>4,288,418.</td>
</tr>
<tr>
<td>1g End of year balance</td>
<td>729,179,329.</td>
<td>691,077,330.</td>
<td>622,086,306.</td>
<td>665,532,326.</td>
<td>675,054,225.</td>
</tr>
</tbody>
</table>

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

- Board designated or quasi-endowment 36.7000 %
- Permanent endowment 41.9000 %
- Temporarily restricted endowment 21.4000 %

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:

- [X] unrelated organizations
- [ ] related organizations

3b 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.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>11,907,246.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td>121,598,091.</td>
<td>344,518,792.</td>
<td>871,462,127.</td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td>3,063,707.</td>
<td>2,358,955.</td>
<td>704,752.</td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>294,694,891.</td>
<td>184,383,147.</td>
<td>110,311,744.</td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td>65,177,146.</td>
<td>14,033,687.</td>
<td>51,143,459.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 1,045,529,328.
### 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.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A) NONPUBLIC EQUITY FUNDS</td>
<td>222,535,327</td>
<td>FMV</td>
</tr>
<tr>
<td>(B) HEDGE FUNDS</td>
<td>125,656,654</td>
<td>FMV</td>
</tr>
<tr>
<td>(C) PRIVATE CAPITAL FUNDS</td>
<td>35,244,480</td>
<td>FMV</td>
</tr>
<tr>
<td>(D) PRIVATE REAL ASSET FUNDS</td>
<td>119,915,143</td>
<td>FMV</td>
</tr>
<tr>
<td>(E) OTHER</td>
<td>2,051,038</td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)</strong></td>
<td>505,402,642</td>
<td></td>
</tr>
</tbody>
</table>

### 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.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)</strong></td>
<td></td>
</tr>
</tbody>
</table>

### 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 |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) POST-RETIREMENT BENEFIT OBLIGATION</td>
<td>61,032,000.</td>
<td></td>
</tr>
<tr>
<td>(3) U.S. GOVT REFUNDABLE ADVANCES</td>
<td>4,851,327.</td>
<td></td>
</tr>
<tr>
<td>(4) AMOUNTS HELD ON BEHALF OF OTHERS</td>
<td>3,776,577.</td>
<td></td>
</tr>
<tr>
<td>(5) CAPITALIZED LEASE OBLIGATION</td>
<td>1,769,967.</td>
<td></td>
</tr>
<tr>
<td>(6) PROVISION FOR VOL SEP BENEFITS</td>
<td>10,517,000.</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)</strong></td>
<td>81,946,871.</td>
<td></td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.
**Part XI**  
Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
<th>1</th>
<th>669,325,464.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td>2a</td>
<td>23,925,306.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Donated services and use of facilities</td>
<td>2b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Recoveries of prior year grants</td>
<td>2c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
<td>-222,382,088.</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
<td>-198,456,782.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td>867,782,246.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td>4a</td>
<td>6,745,735.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
<td>-1,125,709.</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
<td>5,620,026.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>5</td>
<td>873,402,272.</td>
<td></td>
</tr>
</tbody>
</table>

**Part XII**  
Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Amount</th>
<th>1</th>
<th>617,106,550.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td>2a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Donated services and use of facilities</td>
<td>2a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prior year adjustments</td>
<td>2b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other losses</td>
<td>2c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
<td>2,842,208.</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
<td>2,842,208.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td>614,264,342.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td>4a</td>
<td>6,745,735.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
<td>232,234,604.</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
<td>238,980,339.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
<td>853,244,681.</td>
<td></td>
</tr>
</tbody>
</table>

**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.

SEE PAGE 5
SCHEDULE D, PART III, LINE 4

COLLECTIONS:

THE UNIVERSITY'S MOST SIGNIFICANT COLLECTION IS EXHIBITED AT ITS MUSEUM OF GREEK, ETRUSCAN AND ROMAN ART. THE MUSEUM OCCUPIES 4,000 SQUARE FEET OF SPACE AND FEATURES MORE THAN 260 ANTIQUITIES DATING FROM THE 10TH CENTURY B.C. THROUGH THE 3RD CENTURY A.D. THE MUSEUM, ADMISSION TO WHICH IS FREE OF CHARGE, IS OPEN TO THE PUBLIC FOR BOTH EDUCATIONAL AND RESEARCH-RELATED PURPOSES.

SCHEDULE D, PART V, LINE 4

ENDOWMENT FUNDS:

THE PURPOSE OF FORDHAM UNIVERSITY'S ENDOWMENT IS TO GENERATE INVESTMENT EARNINGS AS A SOURCE OF REVENUE TO SUPPORT FINANCIAL ASSISTANCE TO STUDENTS, FUND NEW AND CUTTING-EDGE PROGRAMS WHILE MAINTAINING AND IMPROVING EXISTING ONES, AND IMPROVE AND MAINTAIN THE CAMPUS TO MEET THE NEEDS OF THE UNIVERSITY COMMUNITY, AS RESTRICTED BY DONORS OR INTERNALLY DESIGNATED BY THE BOARD OF TRUSTEES.

SCHEDULE D, PART X, LINE 2

UNCERTAIN TAX POSITIONS:

THE UNIVERSITY ACCOUNTS FOR UNCERTAINTIES IN INCOME TAXES RECOGNIZED IN ITS FINANCIAL STATEMENTS USING A THRESHOLD OF MORE-LIKELY-THAN-NOT OF BEING SUSTAINED. INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE UNIVERSITY'S EXEMPT PURPOSE IS SUBJECT TO INCOME TAX. THE UNIVERSITY DID NOT HAVE ANY MATERIAL UNRELATED BUSINESS INCOME TAX LIABILITY AT JUNE 30, 2018.
ON DECEMBER 22, 2017, THE PRESIDENT OF THE UNITED STATES SIGNED INTO LAW
H.R. 1, ORIGINALLY KNOWN AS THE TAX CUTS AND JOBS ACT. THE NEW LAW INCLUDES SEVERAL PROVISIONS THAT RESULT IN SUBSTANTIAL CHANGES TO THE TAX TREATMENT OF ACTIVITIES CARRIED ON BY TAX-EXEMPT ORGANIZATIONS AND THEIR DONORS. THE UNIVERSITY HAS REVIEWED THESE PROVISIONS AND THE POTENTIAL IMPACT, AND CONCLUDED THE ENACTMENT OF H.R. 1 WILL LIKELY NOT HAVE A MATERIAL EFFECT ON THE OPERATIONS OF THE ORGANIZATION.

SCHEDULE D, PART XI, LINE 2D
RECONCILIATION OF REVENUE & EXPENSE PER AUDITED FINANCIAL STATEMENTS & FORM 990
OTHER ADJUSTMENTS:
CHANGE IN FAIR VALUE OF PERPETUAL TRUST  281,648
CHANGE IN FAIR VALUE OF INTEREST RATE SWAP  3,938,653
FINANCIAL AID AWARDS  (221,711,776)
ACTUARIAL GAIN NOT YET RECOG - POSTRETIREMENT PLAN  1,977,000
LOSS ON DEFEASANCE & REFUNDING OF DEBT  (6,861,785)
TRAVEL TOUR EXPENSE  (5,828)

----------
TOTAL  (222,382,088)

SCHEDULE D, PART XI, LINE 4B
OTHER ADJUSTMENTS:
SPECIAL EVENT EXPENSES  (1,125,709)
SCHEDULE D, PART XII, LINE 2D

OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 1,125,709
LONDON PGM EXP & CURRENCY ADJ 1,716,499

-------------
TOTAL 2,842,208

SCHEDULE D, PART XII, LINE 4B

OTHER ADJUSTMENTS:

FINANCIAL AID AWARDS 221,711,776
PROVISION FOR VOLUNTARY SEPARATION BENEFITS 10,517,000
TRAVEL TOUR EXPENSE 5,828

-------------
TOTAL 232,234,604
### Part I

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3. Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If &quot;Yes,&quot; please describe. If &quot;No,&quot; please explain. If you need more space, use Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4. Does the organization maintain the following?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Records indicating the racial composition of the student body, faculty, and administrative staff?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c. Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>d. Copies of all material used by the organization or on its behalf to solicit contributions?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5. Does the organization discriminate by race in any way with respect to:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Students' rights or privileges?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. Admissions policies?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c. Employment of faculty or administrative staff?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>d. Scholarships or other financial assistance?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>e. Educational policies?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>f. Use of facilities?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>g. Athletic programs?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>h. Other extracurricular activities?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>6a. Does the organization receive any financial aid or assistance from a governmental agency?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>6b. Has the organization's right to such aid ever been revoked or suspended?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;No,&quot; explain on Part II</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
**SCHEDULE E, PART I, LINE 3**

**NONDISCRIMINATION POLICY:**

THE UNIVERSITY INCLUDES A STATEMENT OF ITS NON-DISCRIMINATION POLICY ON ITS WEBSITE, AS WELL AS IN STUDENT REGISTRATION MATERIALS, STUDENT COURSE CATALOGS, AND EMPLOYEE JOB POSTINGS.

**SCHEDULE E, PART I, LINE 6A**

**EXPLANATION OF GOVERNMENT FINANCIAL AID:**

**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 or 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.)

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in the region</th>
<th>(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region</th>
<th>(f) Total expenditures for and investments in the region</th>
</tr>
</thead>
<tbody>
<tr>
<td>EUROPE</td>
<td>1.</td>
<td>74. PROGRAM SERVICES GLOBAL STUDIES</td>
<td></td>
<td></td>
<td>7,279,305.</td>
</tr>
<tr>
<td>EAST ASIA AND THE PACIFIC</td>
<td>0.</td>
<td>8. PROGRAM SERVICES GLOBAL STUDIES</td>
<td></td>
<td></td>
<td>1,345,165.</td>
</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td>0.</td>
<td>2. PROGRAM SERVICES GLOBAL STUDIES</td>
<td></td>
<td></td>
<td>301,205.</td>
</tr>
<tr>
<td>SOUTH AMERICA</td>
<td>0.</td>
<td>0. PROGRAM SERVICES STUDY ABROAD</td>
<td></td>
<td></td>
<td>11,000.</td>
</tr>
<tr>
<td>EUROPE</td>
<td>1.</td>
<td>6. PROGRAM SERVICES STUDY ABROAD</td>
<td></td>
<td></td>
<td>449,380.</td>
</tr>
<tr>
<td>EUROPE</td>
<td>0.</td>
<td>11. PROGRAM SERVICES LAW SCHOOL</td>
<td></td>
<td></td>
<td>146,412.</td>
</tr>
<tr>
<td>SUB-SAHARAN AFRICA</td>
<td>1.</td>
<td>2. PROGRAM SERVICES LAW SCHOOL</td>
<td></td>
<td></td>
<td>70,516.</td>
</tr>
<tr>
<td>EAST ASIA AND THE PACIFIC</td>
<td>0.</td>
<td>2. PROGRAM SERVICES LAW SCHOOL</td>
<td></td>
<td></td>
<td>38,867.</td>
</tr>
<tr>
<td>EAST ASIA AND THE PACIFIC</td>
<td>0.</td>
<td>0. GRANTMAKING</td>
<td></td>
<td></td>
<td>248,943.</td>
</tr>
<tr>
<td>CENTRAL AMERICA/ CARIBBEAN</td>
<td>0.</td>
<td>0. INVESTMENTS</td>
<td></td>
<td></td>
<td>214,284,359.</td>
</tr>
<tr>
<td>EUROPE</td>
<td>0.</td>
<td>0. INVESTMENTS</td>
<td></td>
<td></td>
<td>25,502,015.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub-total</td>
<td>3.</td>
<td>105.</td>
<td></td>
<td></td>
<td>249,677,167.</td>
</tr>
<tr>
<td>Total from continuation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sheets to Part I</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals (add lines 3a and 3b)</td>
<td>3.</td>
<td>105.</td>
<td></td>
<td></td>
<td>249,677,167.</td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
## 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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of noncash assistance</th>
<th>(h) Description of noncash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(1) EAST ASIA/PACIFIC</td>
<td>PUBLIC SERVICE</td>
<td></td>
<td></td>
<td>161,624.</td>
<td>WIRE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(2) EAST ASIA/PACIFIC</td>
<td>PUBLIC SERVICE</td>
<td></td>
<td></td>
<td>27,058.</td>
<td>WIRE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(3) EAST ASIA/PACIFIC</td>
<td>PUBLIC SERVICE</td>
<td></td>
<td></td>
<td>60,261.</td>
<td>WIRE</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

3. Enter total number of other organizations or entities.

---

Schedule F (Form 990) 2017
**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.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of noncash assistance</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(3)</td>
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<tr>
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<td>(18)</td>
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<td></td>
</tr>
</tbody>
</table>
### Part IV  Foreign Forms

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Was the organization a U.S. transferor of property to a foreign corporation during the tax year?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2</td>
<td>Did the organization have an interest in a foreign trust during the tax year?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization have an ownership interest in a foreign corporation during the tax year?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4</td>
<td>Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>5</td>
<td>Did the organization have an ownership interest in a foreign partnership during the tax year?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have any operations in or related to any boycotting countries during the tax year?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
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).

SCHEDULE F, PART I, LINE 2

GRANT MONITORING:

ANY ORGANIZATION OR ENTITY THAT RECEIVES SUBAWARDS FROM FORDHAM UNIVERSITY IS REQUIRED TO SUBMIT BOTH FINANCIAL AND PROGRAM PROGRESS REPORTS, EITHER ON A MONTHLY OR QUARTERLY BASIS, AS TO THE USE OF FUNDS. THE REQUIRED FREQUENCY OF REPORTING, AS WELL AS OTHER MONITORING CONTROLS, ARE DEPENDENT UPON THE REQUIREMENTS ON THE PRIMARY GRANTING AGENCY AND UPON THE RESULTS OF A PREAWARD RISK ASSESSMENT, WHICH IS PERFORMED ON ALL SUBRECIPIENTS PRIOR TO ISSUING AWARDS.

FINANCIAL AND PROGRAM PROGRESS REPORTS RECEIVED FROM GRANTEES ARE MONITORED AND REVIEWED BY PRINCIPAL INVESTIGATORS, THE OFFICE OF SPONSORED PROGRAMS, AND THE GRANTS ACCOUNTING OFFICE TO ENSURE FUNDS ARE USED APPROPRIATELY. IN ADDITION, PRINCIPAL INVESTIGATORS MEET REGULARLY WITH SUBGRANTEES, WHICH INCLUDES FIELD VISITS TO OBSERVE ACTIVITIES ON A FIRST-HAND BASIS.

SCHEDULE F, PART I, LINE 3, COLUMN (F)

METHOD OF ACCOUNTING:

EXPENSES ARE REPORTED USING THE ACCRUAL METHOD OF ACCOUNTING, CONSISTENT WITH FORDHAM UNIVERSITY'S AUDITED FINANCIAL STATEMENTS.
Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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 the latest instructions.

FORDHAM UNIVERSITY
Employer identification number 13-1740451

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.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>RUFFALO NOEL LEVITZ, LLC</td>
<td>PROF. FUNDRAISING</td>
<td>X</td>
<td>779,554.</td>
<td>385,322.</td>
<td>394,232.</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
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<tr>
<td>4</td>
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<td>5</td>
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<td>9</td>
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<td>10</td>
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</tr>
</tbody>
</table>

Total ............................................................................................................................................... 779,554. 385,322. 394,232.

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.

NY,
### 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.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events</th>
<th>(d) Total events</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FOUNDERS DINNER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Gross receipts</td>
<td>1,939,535.</td>
<td></td>
<td></td>
<td>1,939,535.</td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td></td>
<td>1,707,917.</td>
<td></td>
<td>1,707,917.</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td></td>
<td></td>
<td></td>
<td>231,618.</td>
</tr>
</tbody>
</table>

- **Gross receipts**: 1,939,535.
- **Less: Contributions**: 1,707,917.
- **Gross income**: 231,618.

**Direct Expenses**

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Food and beverages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Cash prizes**: 137,157.
- **Noncash prizes**: 302,756.
- **Food and beverages**: 507,878.
- **Entertainment**: 177,918.

**Direct expense summary**

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
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<tr>
<td>6 Rent/facility costs</td>
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<tr>
<td>7 Food and beverages</td>
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</tr>
<tr>
<td>8 Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Net income summary**

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
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<tr>
<td>7 Food and beverages</td>
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</tr>
<tr>
<td>8 Entertainment</td>
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<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total events**

1,125,709. **Net income summary**: -894,091.

### 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.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Volunteer labor**: 0% 0% 0%

**Direct expense summary**

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2 Cash prizes</td>
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<tr>
<td>3 Noncash prizes</td>
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<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
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</tbody>
</table>

- **Volunteer labor**: 0% 0% 0%

**Direct expense summary**

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2 Cash prizes</td>
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<tr>
<td>3 Noncash prizes</td>
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<tr>
<td>4 Rent/facility costs</td>
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<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Net gaming income summary**

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/ instantaneous bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
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<tr>
<td>3 Noncash prizes</td>
<td></td>
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<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**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?  
  -  
  -  
  -  

- b If "No," explain:

**Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?**  

- a  

- b If "Yes," explain:

---

**Schedule G (Form 990 or 990-EZ) 2017**
Does the organization conduct gaming activities with nonmembers? □ Yes □ No

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

Indicate the percentage of gaming activity conducted in:

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

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

Name ▶
Address ▶

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

If "Yes," enter the amount of gaming revenue received by the organization ▶ $ and the amount of gaming revenue retained by the third party ▶ $.

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

Name ▶
Address ▶

Gaming manager information:

Name ▶
Gaming manager compensation ▶ $ ▶
Description of services provided ▶

Director/officer □ Employee □ Independent contractor

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

Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $.

**Supplemental Information.** Provide the explanation 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).

**RUFFALO NOEL LEVITZ, LLC PROVIDES CONSULTING SERVICES TO FORDHAM UNIVERSITY FOR ITS TELEMARKETING FUNDRAISING STRATEGY. THE FIRM ALSO PERFORMS SEGMENTATION AND PLEDGE FULFILLMENT VIA DIRECT MAIL.**

**RUFFALO NOEL LEVITZ, LLC'S CORPORATE HEADQUARTERS ARE LOCATED AT 1025 KIRKWOOD PARKWAY SW, CEDAR RAPIDS, IA 52404.**
**Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

**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 [x]  
   - 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.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>2 (b) EIN</th>
<th>3 (c) IRC section (if applicable)</th>
<th>4 (d) Amount of cash grant</th>
<th>5 (e) Amount of non-cash assistance</th>
<th>6 (f) Method of valuation (book, FMV, appraisal, other)</th>
<th>7 (g) Description of noncash assistance</th>
<th>8 (h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 ALBERT EINSTEIN COLLEGE OF MEDICINE</td>
<td>47-2209056</td>
<td>501 (C) (3)</td>
<td>66,319</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>2 MEMORIAL SLOAN KETTERING CANCER CENTER</td>
<td>13-1924236</td>
<td>501 (C) (3)</td>
<td>150,938</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>3 MORNINGSIDE CENTER FOR TEACHING SOCIAL RESP</td>
<td>13-3185340</td>
<td>501 (C) (3)</td>
<td>43,152</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>4 THE NEW JEWISH HOME</td>
<td>13-1624033</td>
<td>501 (C) (3)</td>
<td>27,063</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>5 PENNSYLVANIA STATE UNIVERSITY</td>
<td>24-6000376</td>
<td>115</td>
<td>29,096</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>6 NEW YORK UNIVERSITY</td>
<td>13-5562308</td>
<td>501 (C) (3)</td>
<td>17,897</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>7 RESEARCH FOUNDATION OF CUNY</td>
<td>13-1988190</td>
<td>501 (C) (3)</td>
<td>15,072</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>8 RESEARCH FOUNDATION OF SUNY</td>
<td>14-1368361</td>
<td>501 (C) (3)</td>
<td>5,494</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>9 UNIVERSITY OF MASSACHUSETTS - BOSTON</td>
<td>04-3167352</td>
<td>115</td>
<td>12,285</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>10 UNIVERSITY OF VIRGINIA</td>
<td>54-6001796</td>
<td>115</td>
<td>122,300</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>11 UNIVERSITY OF UTAH</td>
<td>115</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
<tr>
<td>12 SAN FRANCISCO STATE UNIVERSITY</td>
<td>93-1137247</td>
<td>115</td>
<td>5,967</td>
<td></td>
<td></td>
<td>RESEARCH</td>
<td></td>
</tr>
</tbody>
</table>

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**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 [X]  
   - 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.

<table>
<thead>
<tr>
<th>No.</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DEPAUL UNIVERSITY</td>
<td>36-2167048</td>
<td>501 (C) (3)</td>
<td>13,379.</td>
<td></td>
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<td>RESEARCH</td>
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<tr>
<td>2</td>
<td>MIRIAM HOSPITAL</td>
<td>05-0377502</td>
<td>501 (C) (3)</td>
<td>14,962.</td>
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<td>RESEARCH</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table: 14.

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III: Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 STUDENT SCHOLARSHIPS</td>
<td>15,255</td>
<td>221,711,776</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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</table>

### Part IV: Supplemental Information

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

**SCHEDULE I, PART I, LINE 2**

**GRANT MONITORING:**

ANY ORGANIZATION OR ENTITY THAT RECEIVES SUBAWARDS FROM FORDHAM UNIVERSITY IS REQUIRED TO SUBMIT BOTH FINANCIAL AND PROGRAM PROGRESS REPORTS, EITHER ON A MONTHLY OR QUARTERLY BASIS, AS TO THE USE OF FUNDS.

THE REQUIRED FREQUENCY OF REPORTING, AS WELL AS OTHER MONITORING CONTROLS, ARE DEPENDENT UPON REQUIREMENTS OF THE PRIMARY GRANTING AGENCY AND UPON THE RESULTS OF A PREAWARD RISK ASSESSMENT, WHICH IS PERFORMED ON ALL SUBRECIPIENTS PRIOR TO ISSUING AWARDS.
**Part III** Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
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<td>1</td>
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</table>

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

Financial and program progress reports received from grantees are monitored and reviewed by principal investigators, the office of sponsored programs and the grants accounting office to ensure funds are used appropriately. In addition, principal investigators meet regularly with subgrantees, which includes field visits to observe activities on a first-hand basis.

Scholarship grant monitoring:

Fordham provides various types of financial assistance to promote access and affordability to students. Fordham's student financial aid department
### Part III Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
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</tbody>
</table>

### Part IV Supplemental Information

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

WORKS WITH STUDENTS TO HELP THEM DEVISE A PLAN TO FUND THEIR EDUCATION.

ASSISTANCE MAY INCLUDE A COMBINATION OF GRANTS, LOANS AND PAYMENT PLANS DEPENDING ON INDIVIDUAL CIRCUMSTANCES AND RESOURCES. SCHOLARSHIP GRANTS ARE AWARDED ON THE BASIS OF FINANCIAL NEED AND/OR SCHOLASTIC ACHIEVEMENT, AND ON A NON-DISCRIMINATORY BASIS. STUDENTS MUST COMPLETE CERTAIN QUESTIONNAIRES AND APPLICATIONS TO DEMONSTRATE THEIR QUALIFICATION FOR VARIOUS TYPES OF FEDERAL, STATE, LOCAL, AND INSTITUTIONAL FINANCIAL ASSISTANCE. THE VARIOUS FINANCIAL ASSISTANCE PROGRAMS HAVE PARTICULAR ELIGIBILITY AND MONITORING REQUIREMENTS, SUCH AS THOSE PROVIDED BY THE CODE OF FEDERAL REGULATIONS. THESE REQUIREMENTS MAY INCLUDE A MINIMUM
### Part III  Grants and Other Assistance to Domestic Individuals
Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
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<tbody>
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<td>7</td>
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</tbody>
</table>

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

COURSE LOAD, DEMONSTRATED ACADEMIC PROGRESS, AND OTHER SIMILAR REQUIREMENTS.

SCHOLARSHIP GRANTS ARE APPLIED DIRECTLY TOWARD A STUDENT'S TUITION AND ROOM AND BOARD COSTS, THEREBY INSURING THE FUNDS ARE USED AS INTENDED.
### Questions Regarding Compensation

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1a</strong> 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>First-class or charter travel</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Tax indemnification and gross-up payments</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Discretionary spending account</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Housing allowance or residence for personal use</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Payments for business use of personal residence</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health or social club dues or initiation fees</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Personal services (such as, maid, chauffeur, chef)</td>
<td></td>
</tr>
<tr>
<td><strong>1b</strong> 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 &quot;No,&quot; complete Part III to explain.</td>
<td></td>
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</tr>
<tr>
<td></td>
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</tr>
<tr>
<td><strong>2</strong> 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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>3</strong> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Compensation committee</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Independent compensation consultant</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Form 990 of other organizations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Compensation survey or study</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Written employment contract</td>
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</tr>
<tr>
<td></td>
<td>Approval by the board or compensation committee</td>
<td></td>
</tr>
<tr>
<td><strong>4</strong> 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:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Receive a severance payment or change-of-control payment?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b Participate, or receive payment from, a supplemental nonqualified retirement plan?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c Participate, or receive payment from, an equity-based compensation arrangement?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes&quot; to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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? |
|   | b Any related organization? |
| **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? |
|   | b Any related organization? |

For persons listed on Form 990, Part VII, Section A, line 1a, if "Yes" on line 5a or 5b, 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)?
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.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>MARGARET BALL</td>
<td>(i) 184,818.</td>
<td>(ii) 1,298.</td>
<td>(iii) 20,287.</td>
<td>(iv) 874.</td>
<td>(v) 207,277.</td>
</tr>
<tr>
<td>Secretary of the University</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BRIAN BYRNE</td>
<td>(i) 329,234.</td>
<td>(ii) 3,052.</td>
<td>(iii) 29,700.</td>
<td>(iv) 37,701.</td>
<td>(v) 399,687.</td>
</tr>
<tr>
<td>VP for Lincoln Center</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>THOMAS A. DUNNE</td>
<td>(i) 397,845.</td>
<td>(ii) 6,034.</td>
<td>(iii) 29,700.</td>
<td>(iv) 39,486.</td>
<td>(v) 473,065.</td>
</tr>
<tr>
<td>VP for Administration</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>STEPHEN FREEDMAN</td>
<td>(i) 524,597.</td>
<td>(ii) 6,850.</td>
<td>(iii) 29,700.</td>
<td>(iv) 37,883.</td>
<td>(v) 599,030.</td>
</tr>
<tr>
<td>Provost (Deceased 7/18)</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>JEFFREY GRAY</td>
<td>(i) 352,201.</td>
<td>(ii) 25,783.</td>
<td>(iii) 29,700.</td>
<td>(iv) 61,170.</td>
<td>(v) 468,854.</td>
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<tr>
<td>EVP of Student Affairs</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SR VP, CFO &amp; Treasurer</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>ROGER MILICI</td>
<td>(i) 398,275.</td>
<td>(ii) 1,467.</td>
<td>(iii) 29,700.</td>
<td>(iv) 915.</td>
<td>(v) 430,357.</td>
</tr>
<tr>
<td>VP for Dev and Univ Relations</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>NICHOLAS MILOWSKI</td>
<td>(i) 328,723.</td>
<td>(ii) 7,736.</td>
<td>(iii) 20,640.</td>
<td>(iv) 35,956.</td>
<td>(v) 392,695.</td>
</tr>
<tr>
<td>VP for Finance</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>FRANK SIRIANNI</td>
<td>(i) 348,671.</td>
<td>(ii) 9,201.</td>
<td>(iii) 29,700.</td>
<td>(iv) 39,507.</td>
<td>(v) 427,079.</td>
</tr>
<tr>
<td>VP for Technology and CIO</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>PETER STACE</td>
<td>(i) 381,702.</td>
<td>(ii) 5,725.</td>
<td>(iii) 29,700.</td>
<td>(iv) 37,472.</td>
<td>(v) 454,599.</td>
</tr>
<tr>
<td>VP for Enrollment</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
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<tr>
<td>VP for Facilities Mgmt</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>MATTHEW DILLER</td>
<td>(i) 467,851.</td>
<td>(ii) 2,547.</td>
<td>(iii) 29,700.</td>
<td>(iv) 39,416.</td>
<td>(v) 539,514.</td>
</tr>
<tr>
<td>Dean</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>IFTEKHAR HASAN</td>
<td>(i) 491,615.</td>
<td>(ii) 2,547.</td>
<td>(iii) 29,700.</td>
<td>(iv) 37,183.</td>
<td>(v) 561,045.</td>
</tr>
<tr>
<td>Professor</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>JEFFREY M. NEUBAUER</td>
<td>(i) 549,889.</td>
<td>(ii) 8,919.</td>
<td>(iii) 29,700.</td>
<td>(iv) 37,680.</td>
<td>(v) 676,188.</td>
</tr>
<tr>
<td>Men's Basketball Coach</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DONNA RAPPACCIOLI</td>
<td>(i) 622,762.</td>
<td>(ii) 30,269.</td>
<td>(iii) 29,700.</td>
<td>(iv) 37,779.</td>
<td>(v) 720,510.</td>
</tr>
<tr>
<td>Dean</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BENJAMIN ZIPURSKY</td>
<td>(i) 404,195.</td>
<td>(ii) 40,190.</td>
<td>(iii) 29,700.</td>
<td>(iv) 36,035.</td>
<td>(v) 510,120.</td>
</tr>
<tr>
<td>Professor</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
**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.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>FRANK SIMIO (END ROLE)</td>
<td></td>
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</tr>
<tr>
<td>(PR INT SR VP,CFO,TREAS&amp;VP FIN)</td>
<td>(i) 371,244.</td>
<td>(ii) 0.</td>
<td>(iii) 2,547.</td>
<td>(iv) 29,700.</td>
<td>(v) 37,779.</td>
</tr>
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<td>1</td>
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<tr>
<td>16</td>
<td></td>
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</tr>
</tbody>
</table>
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.

SCHEDULE J, PART I


SCHEDULE J, PART I, LINE 1A

FIRST-CLASS OR CHARTER TRAVEL:

FORDHAM UNIVERSITY DOES NOT GENERALLY PERMIT FIRST CLASS TRAVEL. HOWEVER, FOR BUSINESS TRIPS IN EXCESS OF 6 HOURS, EMPLOYEES ARE PERMITTED TO UPGRADE FROM THE LOWEST COACH FARE OFFERED BY THE AIRLINE TO THE NEXT CLASS AVAILABLE. IN CONNECTION WITH ITS ATHLETICS PROGRAM, CERTAIN TEAMS UTILIZE CHARTER TRAVEL. THE MEN’S BASKETBALL COACH FLIES WITH THE ATHLETIC TEAMS AS PART OF HIS RESPONSIBILITIES AS AN EMPLOYEE OF FORDHAM UNIVERSITY. THE VALUE OF TRAVEL WAS NOT INCLUDED IN TAXABLE COMPENSATION.
HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE:

HOUSING WAS PROVIDED TO MICHAEL MCCARTHY S.J., VP FOR MISSION INTEGRATION & PLANNING. HE IS A MEMBER OF THE SOCIETY OF JESUS AND LIVES AS A RESIDENT MINISTER IN A UNIVERSITY DORMITORY ON CAMPUS, PROVIDING GUIDANCE TO STUDENTS FOR THE CONVENIENCE OF THE UNIVERSITY. ACCORDINGLY, THE HOUSING BENEFITS PROVIDED TO HIM ARE NOT INCLUDABLE AS GROSS INCOME UNDER SECTION 119 OF THE INTERNAL REVENUE CODE.

TAX INDEMNIFICATIONS AND GROSS-UP PAYMENTS:

TAX INDEMNIFICATIONS AND GROSS-UP PAYMENTS ARE TREATED AS TAXABLE COMPENSATION TO THE INTERESTED PERSONS AT TIME OF PAYMENT. FROM TIME TO TIME, GIFT CARDS ARE GIVEN FOR EXTRAORDINARY SERVICES. THE UNIVERSITY GROSSED UP THE AMOUNT OF ANY GIFT CARD AND APPLICABLE TAXES THAT WERE WITHHELD FROM EMPLOYEES PAY.
### Part I: Bond Issues

<table>
<thead>
<tr>
<th>(a) Issuer name</th>
<th>(b) Issuer EIN</th>
<th>(c) CUSIP #</th>
<th>(d) Date issued</th>
<th>(e) Issue price</th>
<th>(f) Description of purpose</th>
<th>(g) Defeased</th>
<th>(h) On behalf of issuer</th>
<th>(i) Pooled financing</th>
</tr>
</thead>
<tbody>
<tr>
<td>A DASNY SERIES 2008A</td>
<td>14-6000293</td>
<td>649903C33</td>
<td>05/21/2008</td>
<td>96,895,000.</td>
<td>REFUNDING 2005 DEBT ISSUE</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>B DASNY SERIES 2011B</td>
<td>14-6000293</td>
<td>649505CX0</td>
<td>04/28/2011</td>
<td>152,929,720.</td>
<td>2011 ISSUE - NEW CONSTRUCTION</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>C DASNY SERIES 2012</td>
<td>14-6000293</td>
<td>649906Z23</td>
<td>10/25/2012</td>
<td>46,206,812.</td>
<td>REFUNDING 2002 &amp; 1998 DEBT ISSUE</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>D DASNY SERIES 2014</td>
<td>14-6000293</td>
<td>649907YZ9</td>
<td>04/03/2014</td>
<td>66,182,433.</td>
<td>REFUND 2014 ISSUE AND CO-OP ACQ</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Part II: Proceeds

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Amount of bonds legally defeased</td>
<td>133,440,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Total proceeds of issue</td>
<td>96,895,000.</td>
<td>152,929,720.</td>
<td>46,206,812.</td>
<td>66,182,432.</td>
</tr>
<tr>
<td>4 Gross proceeds in reserve funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Capitalized interest from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Proceeds in refunding escrows</td>
<td></td>
<td></td>
<td></td>
<td>45,346,922.</td>
</tr>
<tr>
<td>7 Issuance costs from proceeds</td>
<td>602,276.</td>
<td>1,416,066.</td>
<td>784,889.</td>
<td>867,654.</td>
</tr>
<tr>
<td>8 Credit enhancement from proceeds</td>
<td>59,047.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Working capital expenditures from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Capital expenditures from proceeds</td>
<td>151,513,654.</td>
<td></td>
<td></td>
<td>53,755,763.</td>
</tr>
<tr>
<td>11 Other spent proceeds</td>
<td>96,233,677.</td>
<td></td>
<td></td>
<td>75,000.</td>
</tr>
<tr>
<td>12 Other unspent proceeds</td>
<td></td>
<td></td>
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</tbody>
</table>

### Part III: Private Business Use

<table>
<thead>
<tr>
<th>1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?</th>
<th>A Yes</th>
<th>B No</th>
<th>C Yes</th>
<th>D No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Are there any lease arrangements that may result in private business use of bond-financed property?</td>
<td>A Yes</td>
<td>B X</td>
<td>C Yes</td>
<td>D No</td>
</tr>
</tbody>
</table>
**Supplemental Information on Tax-Exempt Bonds**

**Part I  Bond Issues**

<table>
<thead>
<tr>
<th>(a) Issuer name</th>
<th>(b) Issuer EIN</th>
<th>(c) CUSIP #</th>
<th>(d) Date issued</th>
<th>(e) Issue price</th>
<th>(f) Description of purpose</th>
<th>(g) Defeased</th>
<th>(h) On behalf of issuer</th>
<th>(i) Pooled financing</th>
</tr>
</thead>
<tbody>
<tr>
<td>A DASNY SERIES 2016A</td>
<td>14-6000293</td>
<td>64990BD75</td>
<td>05/05/2016</td>
<td>169,720,220</td>
<td>REF PRIOR ISSUES &amp; REN ACAD BLG</td>
<td>X</td>
<td>X</td>
<td>Yes</td>
</tr>
<tr>
<td>B DASNY SERIES 2017</td>
<td>14-6000293</td>
<td>64990C586</td>
<td>12/21/2017</td>
<td>91,211,092</td>
<td>REFUNDING 2011 DEBT ISSUE</td>
<td>X</td>
<td>X</td>
<td>No</td>
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</tbody>
</table>

**Part II  Proceeds**

<table>
<thead>
<tr>
<th>Amount</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Amount of bonds retired</td>
<td>5,610,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2  Amount of bonds legally defeased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3  Total proceeds of issue</td>
<td>169,720,220.</td>
<td>91,211,032.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4  Gross proceeds in reserve funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5  Capitalized interest from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6  Proceeds in refunding escrows</td>
<td>1,209,489.</td>
<td>826,227.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7  Issuance costs from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8  Credit enhancement from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9  Working capital expenditures from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10  Capital expenditures from proceeds</td>
<td>15,075,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11  Other spent proceeds</td>
<td>153,435,731.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12  Year of substantial completion</td>
<td>2016</td>
<td>2017</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part III  Private Business Use**

<table>
<thead>
<tr>
<th>Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>X</td>
<td>X</td>
<td></td>
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</tr>
</tbody>
</table>

**For Paperwork Reduction Act Notice, see the Instructions for Form 990.**
### Part III: Private Business Use (Continued)

<table>
<thead>
<tr>
<th></th>
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<th>A</th>
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<th>C</th>
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</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td>Are there any management or service contracts that may result in private business use of bond-financed property?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td></td>
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<tr>
<td></td>
<td>If &quot;Yes&quot; 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?</td>
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<tr>
<td>3b</td>
<td>Are there any research agreements that may result in private business use of bond-financed property?</td>
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</tr>
<tr>
<td></td>
<td>If &quot;Yes&quot; to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?</td>
<td></td>
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</tr>
<tr>
<td>4</td>
<td>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</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
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<td></td>
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</tr>
<tr>
<td>5</td>
<td>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</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
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<tr>
<td>6</td>
<td>Total of lines 4 and 5</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Does the bond issue meet the private security or payment test?</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a</td>
<td>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?</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes&quot; to line 8a, enter the percentage of bond-financed property sold or disposed of</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>8b</td>
<td>If &quot;Yes&quot; to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>9</td>
<td>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?</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
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</tbody>
</table>

### Part IV: Arbitrage

<table>
<thead>
<tr>
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<th>A</th>
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<th></th>
<th>C</th>
<th></th>
<th></th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>If &quot;No&quot; to line 1, did the following apply?</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Rebate not due yet?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Exception to rebate?</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>No rebate due?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes&quot; to line 2c, provide in Part VI the date the rebate computation was performed.</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Is the bond issue a variable rate issue?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</td>
<td>X</td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Name of provider</td>
<td>BOA ML</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Term of hedge</td>
<td>3.248</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Was the hedge superintegrated?</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Was the hedge terminated?</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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### Part III  Private Business Use (Continued)

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<td>X</td>
<td>X</td>
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<tr>
<td>3b</td>
<td>Are there any research agreements that may result in private business use of bond-financed property?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td></td>
<td>If &quot;Yes&quot; to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>4</td>
<td>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</td>
<td>%</td>
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<td>Total of lines 4 and 5</td>
<td>%</td>
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<td>%</td>
<td>%</td>
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<td>7</td>
<td>Does the bond issue meet the private security or payment test?</td>
<td>X</td>
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<td>X</td>
<td>X</td>
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<tr>
<td>8a</td>
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<td>X</td>
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<td>X</td>
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<td>If &quot;Yes&quot; to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?</td>
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<td>X</td>
<td>X</td>
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<td>9</td>
<td>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?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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### Part IV  Arbitrage

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<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>If &quot;No&quot; to line 1, did the following apply?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>2a</td>
<td>Rebate not due yet?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Exception to rebate?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>No rebate due?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes&quot; to line 2c, provide in Part VI the date the rebate computation was performed.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>Is the bond issue a variable rate issue?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>4a</td>
<td>Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Name of provider</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Term of hedge</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>4d</td>
<td>Was the hedge superintegrated?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>4e</td>
<td>Was the hedge terminated?</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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</table>
### Part IV  Arbitrage (Continued)

#### 5a Were gross proceeds invested in a guaranteed investment contract (GIC)?

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

#### b Name of provider

- [ ]

#### c Term of GIC

- [ ]

#### d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?

- [ ]

#### 6 Were any gross proceeds invested beyond an available temporary period?

- [ ]

#### 7 Has the organization established written procedures to monitor the requirements of section 148?

- [ ]

### Part V  Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

### Part VI  Supplemental Information

Provide additional information for responses to questions on Schedule K. See instructions.

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JSA
7E1328 1.000

Schedule K (Form 990) 2017
13-1740451

Page 3

FORDHAM UNIVERSITY

Schedule K (Form 990) 2017
13-1740451

Page 3
**Part IV  Arbitrage (Continued)**

<table>
<thead>
<tr>
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<th>D</th>
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<tbody>
<tr>
<td>5a</td>
<td>Were gross proceeds invested in a guaranteed investment contract (GIC)?</td>
<td>Yes</td>
<td>X</td>
<td>No</td>
</tr>
<tr>
<td>b</td>
<td>Name of provider</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Term of GIC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Were any gross proceeds invested beyond an available temporary period?</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Has the organization established written procedures to monitor the requirements of section 148?</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Part V  Procedures To Undertake Corrective Action**

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
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<tbody>
<tr>
<td></td>
<td>Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Part VI  Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions

---

---
SCHEDULE K, PART I, BOND ISSUES:

2011 BOND ISSUE

(A) ISSUER NAME: DORMITORY AUTHORITY OF THE STATE OF NEW YORK

(F) DESCRIPTION OF PURPOSE: LAW SCHOOL BUILDING AND RESIDENCE HALL CONSTRUCTION

2014 BOND ISSUE

(A) ISSUER NAME: DORMITORY AUTHORITY OF THE STATE OF NEW YORK

(F) DESCRIPTION OF PURPOSE: ACQUISITION OF BUILDING AND REFUND 2004 DEBT ISSUE

2016 BOND ISSUE

(A) ISSUER NAME: DORMITORY AUTHORITY OF THE STATE OF NEW YORK

(F) DESCRIPTION OF PURPOSE: REFUND CERTAIN TRANCHES OF THE 2011 DEBT ISSUE, DEFEASE AND ADVANCE REFUND ALL OF THE 2008B DEBT ISSUE, AND REFURBISH ACADEMIC BUILDING.

2017 BOND ISSUE

(A) ISSUER NAME: DORMITORY AUTHORITY OF THE STATE OF NEW YORK

(F) DESCRIPTION OF PURPOSE: REFUND CERTAIN TRANCHES OF THE 2011 DEBT ISSUE AND COVER COSTS OF ISSUANCE.
SCHEDULE K, PART IV, LINE 2C, COLUMN A

SCHEDULE K, PART IV, LINE 2C, COLUMN B

SCHEDULE K, PART IV, LINE 2C, COLUMN C

SCHEDULE K, PART IV, LINE 4C, COLUMN A

ARBITRAGE

THE UNIVERSITY PAYS A FIXED RATE OF 3.2475% AND RECEIVES 67% OF ONE MONTH LIBOR ON THE NOTIONAL PRINCIPAL AMOUNT OF THE 2008A BONDS.
Name of the organization: FORDHAM UNIVERSITY
Employer identification number: 13-1740451

**Part I: Excess Benefit Transactions**

(Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations only)

<table>
<thead>
<tr>
<th>(a) Name of disqualified person</th>
<th>(b) Relationship between disqualified person and organization</th>
<th>(c) Description of transaction</th>
<th>(d) Corrected?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes No</td>
</tr>
</tbody>
</table>

1. Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958: $ ________________

2. 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.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship with organization</th>
<th>(c) Purpose of loan</th>
<th>(d) Loan to or from the organization?</th>
<th>(e) Original principal amount</th>
<th>(f) Balance due</th>
<th>(g) In default?</th>
<th>(h) Approved by board or committee?</th>
<th>(i) Written agreement?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes No</td>
<td>Yes No</td>
<td>Yes No</td>
</tr>
</tbody>
</table>

1. (1)
2. (2)
3. (3)
4. (4)
5. (5)
6. (6)
7. (7)
8. (8)
9. (9)
10. (10)

Total: $ ________________

**Part III: Grants or Assistance Benefiting Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of assistance</th>
<th>(d) Type of assistance</th>
<th>(e) Purpose of assistance</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

1. (1) 26,800. STUDENT SCHOLARSHIPS COVER COSTS OF TUITION
2. (2) 57,391. TUITION REMISSION COVER COSTS OF TUITION
3. (3)
4. (4)
5. (5)
6. (6)
7. (7)
8. (8)
9. (9)
10. (10)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
**Part IV  Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization's revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>BRENDAN MCGUINNESS</td>
<td>SEE PART V</td>
<td>119,941</td>
<td>EMPLOYEE COMPENSATION</td>
<td>X</td>
</tr>
<tr>
<td>(2)</td>
<td>STEPHEN C. MCGUINNESS</td>
<td>SEE PART V</td>
<td>19,078</td>
<td>EMPLOYEE COMPENSATION</td>
<td>X</td>
</tr>
</tbody>
</table>

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

SCHEDULE L, PART IV
BRENDAN MCGUINNESS AND STEPHEN C. MCGUINNESS ARE FAMILY MEMBERS OF

STEPHEN J. MCGUINNESS, CURRENT TRUSTEE.
**Part I: Types of Property**

<table>
<thead>
<tr>
<th></th>
<th>Check if applicable</th>
<th>Number of contributions or items contributed</th>
<th>Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td>X</td>
<td>3. 168,000. APPRAISAL</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Art - Historical treasures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities - Publicly traded</td>
<td>X</td>
<td>48. 2,769,336. MARKET QUOTATION</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate - Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate - Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
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<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
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<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
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<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other (SPORT EVNT TKTS)</td>
<td>X</td>
<td>2. 4,038. COST</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Other (RECEPTIONS)</td>
<td>X</td>
<td>16. 69,945. COST</td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Other (PRINTED MAT)</td>
<td>X</td>
<td>1. 14,375. COST</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**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? .................................

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

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

**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.
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.

SCHEDULE M, PART I, COLUMN (B)

NUMBER OF CONTRIBUTORS:

THE AMOUNT LISTED IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTORS.
FORM 990, PART I, LINE 7B
INCLUDES 512(A)(7) AMOUNTS THAT ARE NOT REVENUE AND, THEREFORE, NOT REPORTED AS SUCH ON FORM 990.

FORM 990, PART III, LINE 1
MISSION STATEMENT:
THE MISSION OF THE UNIVERSITY

CHARACTERISTICS OF THE UNIVERSITY

AS A UNIVERSITY -
FORDHAM STRIVES FOR EXCELLENCE IN RESEARCH AND TEACHING, AND GUARANTEES THE FREEDOM OF INQUIRY REQUIRED BY RIGOROUS THINKING AND THE QUEST FOR TRUTH.
FORDHAM AFFIRMS THE VALUE OF A CORE CURRICULUM ROOTED IN THE LIBERAL ARTS AND SCIENCES. THE UNIVERSITY SEeks TO FOSTER IN ALL ITS STUDENTS LIFE-LONG HABITS OF CAREFUL OBSERVATION, CRITICAL THINKING, CREATIVITY, MORAL REFLECTION AND ARTICULATE EXPRESSION.
IN ORDER TO PREPARE CITIZENS FOR AN INCREASINGLY MULTICULTURAL AND
MULTINATIONAL SOCIETY, FORDHAM SEEKS TO DEVELOP IN ITS STUDENTS AN
UNDERSTANDING OF AND REVERENCE FOR CULTURES AND WAYS OF LIFE OTHER THAN
THEIR OWN.

AS A CATHOLIC UNIVERSITY -
FORDHAM AFFIRMS THE COMPLEMENTARY ROLES OF FAITH AND REASON IN THE
PURSUIT OF WISDOM AND LEARNING. THE UNIVERSITY ENCOURAGES THE GROWTH OF A
LIFE OF FAITH CONSONANT WITH MORAL AND INTELLECTUAL DEVELOPMENT.
FORDHAM ENCOURAGES FACULTY TO DISCUSS AND PROMOTE AN UNDERSTANDING OF THE
ETHICAL DIMENSION OF WHAT IS BEING STUDIED AND WHAT IS BEING TAUGHT.
FORDHAM GIVES SPECIAL ATTENTION TO THE STUDY OF THE LIVING TRADITION OF
CATHOLICISM, AND IT PROVIDES A PLACE WHERE RELIGIOUS TRADITIONS MAY
INTERACT WITH EACH OTHER AND WITH CONTEMPORARY CULTURES.
FORDHAM WELCOMES STUDENTS, FACULTY, AND STAFF OF ALL RELIGIOUS TRADITIONS
AND OF NO RELIGIOUS TRADITION AS VALUED MEMBERS OF THIS COMMUNITY OF
STUDY AND DIALOGUE.

AS A JESUIT UNIVERSITY -
FORDHAM DRAWS ITS INSPIRATION FROM THE DUAL HERITAGE OF CHRISTIAN
HUMANISM AND IGNATIAN SPIRITUALITY, AND CONSEQUENTLY SEES ALL DISCIPLINES
AS POTENTIAL PATHS TO GOD.
FORDHAM RECOGNIZES THE DIGNITY AND UNIQUENESS OF EACH PERSON. A FORDHAM
EDUCATION AT ALL LEVELS IS STUDENT-CENTERED, AND ATTENTIVE TO THE
DEVELOPMENT OF THE WHOLE PERSON. SUCH AN EDUCATION IS BASED ON CLOSE
COLLABORATION AMONG STUDENTS, FACULTY, AND STAFF.

FORDHAM IS COMMITTED TO RESEARCH AND EDUCATION THAT ASSIST IN THE
RIGHTS AND RESPECT FOR THE ENVIRONMENT.

JESUIT EDUCATION IS COSMOPOLITAN EDUCATION. THEREFORE, EDUCATION AT
FORDHAM IS INTERNATIONAL IN ITS SCOPE AND IN ITS ASPIRATIONS. THE
WORLD-WIDE NETWORK OF JESUIT UNIVERSITIES OFFERS FORDHAM FACULTY AND
STUDENTS DISTINCTIVE OPPORTUNITIES FOR EXCHANGE AND COLLABORATION.

AS A UNIVERSITY IN NEW YORK CITY –

AS HOME TO PEOPLE FROM ALL OVER THE GLOBE, AS A CENTER OF INTERNATIONAL
BUSINESS, COMMUNICATION, DIPLOMACY, THE ARTS AND THE SCIENCES, NEW YORK
CITY PROVIDES FORDHAM WITH A SPECIAL KIND OF CLASSROOM. ITS UNPARALLELED
RESOURCES SHAPE AND ENHANCE FORDHAM'S PROFESSIONAL AND UNDERGRADUATE
PROGRAMS.

FORDHAM IS PRIVILEGED TO SHARE A HISTORY AND A DESTINY WITH NEW YORK
CITY. THE UNIVERSITY RECOGNIZES ITS DEBT OF GRATITUDE TO THE CITY AND
ITS OWN RESPONSIBILITY TO SHARE ITS GIFTS FOR THE ENRICHMENT OF OUR CITY,
OUR NATION AND OUR WORLD.

STRATEGIC PLANNING

FORDHAM INSTITUTED A CONTINUOUS UNIVERSITY STRATEGIC PLANNING (CUSP)
PROCESS IN SEPTEMBER 2015 TO FOSTER A CULTURE OF STRATEGIC THINKING
THROUGHOUT THE UNIVERSITY AND PRODUCE A STRATEGIC FRAMEWORK OF PRIORITIES
TO GUIDE PLANNING. A DEDICATED COMMITTEE OF FACULTY AND ADMINISTRATORS
ENGAGED THE UNIVERSITY COMMUNITY IN A PROCESS OF DISCERNMENT THAT YIELDED "A STRATEGIC FRAMEWORK FOR FORDHAM'S FUTURE: BOTHERED EXCELLENCE" WHICH THE BOARD OF TRUSTEES APPROVED IN SEPTEMBER 2016. SINCE THEN, LOCAL PLANNING UNITS HAVE DEVELOPED A SERIES OF INITIATIVES THAT ADVANCE THE PRIORITIES IN WAYS APPROPRIATE TO THE UNIT'S SPHERE OF ACTIVITY AND IN 2019 THE UNIVERSITY ESTABLISHED A STRATEGIC INITIATIVES FUND TO SUPPORT SIGNIFICANT SIGNATURE PROJECTS.

THROUGH THIS CONTINUOUS PLANNING PROCESS FORDHAM IS ATTUNED TO THE OPPORTUNITIES AND RISKS IN A RAPIDLY CHANGING ENVIRONMENT AND ABLE TO ADVANCE ITS MISSION AS THE JESUIT UNIVERSITY OF NEW YORK GUIDED BY THE SIX PRIORITY AREAS IDENTIFIED IN THE STRATEGIC FRAMEWORK:

- CONTEMPORARY TEACHING AND LEARNING INFUSED WITH ETHICS AND JUSTICE
- STRATEGICALLY FOCUSED RESEARCH
- THE INSPIRATION AND CHALLENGE OF NEW YORK CITY
- A GLOBAL PERSPECTIVE
- A DIVERSE AND INCLUSIVE COMMUNITY
- A STRATEGIC AND AGILE INSTITUTION

FORM 900, PART III, 4A

PROGRAM SERVICE ACCOMPLISHMENTS:

FORDHAM UNIVERSITY IS AN INDEPENDENT, NOT-FOR-PROFIT, COEDUCATIONAL, INSTITUTION OF HIGHER LEARNING, IN THE JESUIT TRADITION, WITHIN ITS PRINCIPAL CAMPUSES LOCATED IN NEW YORK CITY. FORDHAM UNIVERSITY SERVES AND EDUCATES APPROXIMATELY 9,600 UNDERGRADUATE STUDENTS AND 6,400 GRADUATE AND PROFESSIONAL STUDENTS. THE UNIVERSITY AWARDS
BACCALAUREATE, GRADUATE, AND PROFESSIONAL DEGREES TO STUDENTS FROM FORDHAM COLLEGE AT ROSE HILL, FORDHAM COLLEGE AT LINCOLN CENTER, THE GABELLI SCHOOL OF BUSINESS (UNDERGRADUATE AND GRADUATE), THE SCHOOL OF PROFESSIONAL AND CONTINUING STUDIES, THE GRADUATE SCHOOLS OF ARTS AND SCIENCES, EDUCATION, RELIGION AND RELIGIOUS EDUCATION, SOCIAL SERVICE, AND THE SCHOOL OF LAW. A SIGNIFICANT AMOUNT OF FINANCIAL ASSISTANCE IS PROVIDED TO ENABLE QUALIFIED STUDENTS TO STUDY AT THE UNIVERSITY.

FORM 990, PART VI, LINE 2
RELATIONSHIPS:
FAMILY RELATIONSHIP – PETER STACE, OFFICER/VP FOR ENROLLMENT, HAS A FAMILY RELATIONSHIP WITH MARGARET BALL, OFFICER/SECRETARY OF THE UNIVERSITY.

FORM 990, PART VI, LINE 11B
FORM 990 REVIEW:
FORM 990, PART VI, LINE 12C

CONFLICT OF INTEREST REVIEW:

THE UNIVERSITY HAS A WRITTEN CONFLICT OF INTEREST POLICY COVERING ALL TRUSTEES, OFFICERS, AND EMPLOYEES THAT REQUIRES, AMONG OTHER THINGS, NO INDIVIDUAL MAY PARTICIPATE IN A DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL FINANCIAL INTEREST. ALL TRUSTEES, OFFICERS AND INDIVIDUALS WHO HAVE SIGNING AUTHORITY ARE REQUIRED TO CERTIFY COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND TO INDICATE WHETHER THE UNIVERSITY DOES BUSINESS WITH AN ENTITY IN WHICH THEY HAVE A MATERIAL FINANCIAL INTEREST. WHEN SUCH RELATIONSHIPS EXIST, MEASURES ARE TAKEN TO MITIGATE ANY ACTUAL OR PERCEIVED CONFLICT, INCLUDING REQUIRING THAT SUCH TRANSACTIONS BE CONDUCTED AT ARM'S LENGTH, FOR GOOD AND SUFFICIENT CONSIDERATION, BASED ON TERMS THAT ARE FAIR AND REASONABLE TO AND FOR THE BENEFIT OF THE UNIVERSITY.

FORM 990, PART VI, LINE 15A & 15B

COMPENSATION REVIEW:

COMPENSATION FOR THE UNIVERSITY'S PRESIDENT IS REVIEWED ON A REGULAR BASIS BY A COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES USING SALARY DATA FROM SIMILAR INSTITUTIONS.

ONCE DETERMINED, THE PRESIDENT'S PROPOSED COMPENSATION IS SUBMITTED FIRST TO THE EXECUTIVE COMMITTEE, WHICH CONSISTS OF INDEPENDENT BOARD MEMBERS, THEN TO THE FULL BOARD OF TRUSTEES, FOR REVIEW AND ACCEPTANCE.

COMPENSATION FOR OTHER UNIVERSITY OFFICERS IS ESTABLISHED USING SALARY
BENCHMARKING DATA, AS WELL AS REVIEWS OF COMPENSATION DATA INCLUDED IN PUBLIC FILINGS OF COMPARABLE INSTITUTIONS. COMPENSATION LEVELS ARE REVIEWED AND ACCEPTED BY THE BOARD OF TRUSTEES BASED ON A REVIEW OF KEY DOCUMENTS, FILINGS, AND EMPLOYEE PERFORMANCE DISCUSSIONS. THE PROCESS OF DETERMINING COMPENSATION IS CONDUCTED IN EXECUTIVE SESSION OF THE BOARD OF TRUSTEES MEETINGS IN ORDER TO PRESERVE CONFIDENTIALITY. COMPENSATION LEVELS THAT ARE AUTHORIZED AS A RESULT OF THIS PROCESS ARE DOCUMENTED.

FORM 990, PART VI, LINE 19
DOCUMENT AVAILABILITY:
FORDHAM UNIVERSITY'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE CURRENTLY AVAILABLE ON THE UNIVERSITY'S WEBSITE, AND THE AUDITED FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 24C
VOLUNTARY SEPARATION BENEFITS:

FORM 990, PART X
RECLASSIFICATIONS:
CERTAIN RECLASSIFICATIONS OF PRIOR YEAR AMOUNTS HAVE BEEN MADE TO CONFORM
TO THE CURRENT YEAR PRESENTATION.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS:

CHANGE IN FAIR VALUE OF INTEREST RATE SWAP 3,938,653
ACTUARIAL GAIN NOT YET RECOGNIZED – POSTRETIREMENT PLAN 1,977,000
LOSS ON DEFEASANCE & REFUNDING OF DEBT (6,861,785)
CHANGE IN FAIR VALUE OF PERPETUAL TRUST 281,648
LONDON PGM EXP & CURRENCY ADJ (1,716,499)
LONDON NET ASSETS (1,958,401)
LONDON UNSPENT CASH (174,564)

-------------

TOTAL TO FORM 990, PART XI, LINE 9 (4,513,948)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<table>
<thead>
<tr>
<th>NAME AND ADDRESS</th>
<th>DESCRIPTION OF SERVICES</th>
<th>COMPENSATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARAMARK SERVICES, INC.</td>
<td>FOOD SERVICE</td>
<td>19,167,983.</td>
</tr>
<tr>
<td>1101 MARKET STREET</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PHILADELPHIA, PA 19107</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUMMIT SECURITY SERVICES</td>
<td>SECURITY SERVICE</td>
<td>7,287,689.</td>
</tr>
<tr>
<td>390 REXCORP PLAZA/LOBBY LEVEL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNIONDALE, NY 11553</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TISHMAN INTERIORS CORPORATION</td>
<td>CONSTRUCTION</td>
<td>6,947,685.</td>
</tr>
<tr>
<td>100 PARK AVENUE, 18TH FLOOR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEW YORK, NY 10017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIGHSTREET IT SOLUTIONS LLC</td>
<td>IT SERVICE</td>
<td>4,132,853.</td>
</tr>
<tr>
<td>2600 TOWER OAKS BLVD., SUITE 240</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ROCKVILLE, MD 20852</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CALDWELL &amp; WALSH BUILDING CONSTRUCTION</td>
<td>CONSTRUCTION</td>
<td>3,930,118.</td>
</tr>
<tr>
<td>60 EAST 42ND STREET, SUITE 601</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEW YORK, NY 10165</td>
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<td></td>
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</tbody>
</table>

ATTACHMENT 1
**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](http://www.irs.gov/Form990) for instructions and the latest information.

**Part I**

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 FORDHAM AIRVANA HOLDINGS, LLC 13-1740451 888 SEVENTH AVE., 7TH FLOOR NEW YORK, NY 10019 HOLDING CO. NY</td>
<td>0.</td>
<td>0.</td>
<td>FORDHAM U.</td>
<td></td>
<td></td>
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<tr>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
<td>(5)</td>
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</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
<th>(f) Yes</th>
<th>(f) No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 FORDHAM UNIVERSITY (USA) UK PROGRAM LTD 15 BY BOTOLPH STREET EC1A 7NJ LONDON, UK EC1A 7NJ EDUCATION UK</td>
<td>FORDHAM U.</td>
<td>X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(2) FORDHAM UNIVERSITY UK CHARITABLE TRUST 15 BY BOTOLPH STREET EC1A 7NJ LONDON, UK EC1A 7NJ EDUCATION UK</td>
<td>FORDHAM U.</td>
<td>X</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2017

JSA

27922M M20Y V 17-7.10 2176184 PAGE 81
### 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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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### 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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) CHARITABLE REMAINDER TRUST (OH)</td>
<td>INVESTMENT</td>
<td>OH</td>
<td>N/A</td>
<td>TRUST</td>
<td></td>
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<td>X</td>
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<tr>
<td>(2) CHARITABLE REMAINDER TRUST (NY)</td>
<td>INVESTMENT</td>
<td>NY</td>
<td>N/A</td>
<td>TRUST</td>
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## Transactions With Related Organizations
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of related organization</td>
<td>Transaction type (a-s)</td>
<td>Amount involved</td>
<td>Method of determining amount involved</td>
</tr>
<tr>
<td><strong>(1)</strong> FORDHAM UNIVERSITY (USA) UK PROGRAM LTD</td>
<td>P</td>
<td>4,370,009.</td>
<td>COST</td>
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<tr>
<td><strong>(2)</strong> FORDHAM UNIVERSITY (USA) UK PROGRAM LTD</td>
<td>R</td>
<td>695,109.</td>
<td>COST</td>
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</table>

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.
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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners section 501(c)(3) organizations?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportional allocations?</th>
<th>(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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JSA
Part VII  Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.