Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. Department of the Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 C Name of organization Trustees of Tufts College D Employer identification number B Check if applicable: ☐ Address change 04-2103634 ☐ Name change Doing business as Tufts University ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 169 Holland Street Attn Tax Dept ☐ Amended return ☐ Application pending (617) 627-3264 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 2,752,019,599 Name and address of principal officer: H(a) Is this a group return for Anthony P Monaco □Yes ☑No subordinates? 169 Holland Street Attn Tax Dept H(b) Are all subordinates Somerville, MA 02144 ☐ Yes ☐No included? **☑** 501(c)(3) □ 501(c)() **◄** (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www.tufts.edu L Year of formation: 1852 M State of legal domicile: **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities: Education and Research Activities & Governance 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) . 40 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 37 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 12,303 **6** Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a -4,328,766 **b** Net unrelated business taxable income from Form 990-T, line 34 . **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 266,917,341 331,631,004 Ravenue 715,095,344 9 Program service revenue (Part VIII, line 2g) . 752,115,756 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 160,437,369 147,745,227 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,030,398 2,830,535 1,144,480,452 1,234,322,522 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 170,381,654 179,451,212 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 548,695,387 564,562,046 Expenses 1,402,418 1,281,421 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶24,530,203 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 314,129,269 333,140,398 1,034,608,728 1,078,435,077 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 . 109,871,724 155,887,445 Net Assets or Fund Balances **Beginning of Current Year** End of Year 3,646,586,839 3,756,859,625 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 1,062,412,861 1,084,203,151 22 Net assets or fund balances. Subtract line 21 from line 20 . 2,584,173,978 2,672,656,474 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 Sign Here JAMES M HURLEY VP FINANCE & TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Check | if Paid self-employed Firm's name Firm's EIN ▶ Preparer

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

Firm's address ▶

Use Only

Phone no.

☐ Yes ☐ No

DLN: 93493195016030 OMB No. 1545-0047

Form	990 (2018)					Page 2							
Pa	rt III Statement	of Program Servi	ce Accomplis	hments									
	Check if Sche	dule O contains a resp	onse or note to	any line in this Part III		🗆							
1		organization's mission		•									
SEE	SCHEDULE O												
2	Did the organization undertake any significant program services during the year which were not listed on												
	the prior Form 990 o	or 990-EZ?				🗌 Yes 🗹 No							
	If "Yes," describe the	ese new services on So	hedule O.										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program												
	services?												
	If "Yes," describe the	ese changes on Sched	ule O.										
4	Section 501(c)(3) ar		ions are required	to report the amount of	largest program services, as me of grants and allocations to other								
	(Code:) (Expenses \$	563,426,403	including grants of \$	153,823,590) (Revenue \$	629,472,749)							
	See Additional Data												
4b	(Code:) (Expenses \$	283,840,146	including grants of \$	25,627,622) (Revenue \$	109,305,774)							
	See Additional Data												
4c	(Code:) (Expenses \$	81,718,227	including grants of \$	0) (Revenue \$	10,259,318)							
	See Additional Data												
4d	Other program servi	ces (Describe in Sche	dule O.)										
	(Expenses \$	ine	cluding grants of	\$) (Revenue \$)							
4e	Total program ser	vice expenses ►	928,984,7	76									

Pai	Checklist of Required Schedules			
	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III "	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	A& 1	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	

	tiV Checklist of Required Schedules (continued)			rage -				
Par	Checklist of Required Schedules (continued)	1	Yes	No.				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	No_				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	_				
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No				
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No				
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No				
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.							
	Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No				
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No				
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No				
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No				
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):							
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20-		N				
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No				
	Part IV	28b	Yes					
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M **2	29	Yes					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No				
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes					
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes					
37								
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes					
Pai	Statements Regarding Other IRS Filings and Tax Compliance							
	Check if Schedule O contains a response or note to any line in this Part V	. ;	Т					
•	Enter the number reported in Pay 2 of Form 1006 Faton 0.05 act and limited to 1.05 act.	\square	Yes	No				
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2,565 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0							
ט	Litter the number of Forms w-29 included in line 1a.Enter -0- if not applicable]						

1c

2a	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	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	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
ь	HK , JA , KE , SL , SP , UG , UK , UV , CI , CH , ET , FR , GM			
	If "Yes," enter the name of the foreign country: ▶, GH			
5a	Subsessithsetrocogiamissattion fillanganet quivo empenoths i biothe filip bodo Etal hebbern that Aşacte journ tab fall royr eligne blanding into elipaan yeel raccounts (FBAR).	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5h		No

4a	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)?						
b	$\label{eq:hk} {\sf HK} \; , \; {\sf JA} \; , \; {\sf KE} \; , \; {\sf SP} \; , \; {\sf UG} \; , \; {\sf UK} \; , \; {\sf CI} \; , \; {\sf CH} \; , \; {\sf FR} \; , \; {\sf GM} \\ {\sf If} \; "{\sf Yes}," \; {\sf enter} \; {\sf the} \; {\sf name} \; {\sf of} \; {\sf the} \; {\sf foreign} \; {\sf country:} \; \blacktriangleright, \; {\sf GH} \;$						
5a	இச்சு ithserocojamis aftionilian ganety utionem penoths i biothe fili base bihebbern trads after province Blauming not de it itaan yeed r Accounts (FBAR).	5a		No			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					

5a	இக்கை ithserocogiamis aftio fill an garety பெற்கோற்காயில் librate ili bade bih lebbern "trads a Robert bin fair or eligne Blanding rithde Tibratory end reflection" (FBAR).	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

Section 501(c)(7) organizations. Enter:

11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders .

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

Section 501(c)(29) qualified nonprofit health insurance issuers.

c Enter the amount of reserves on hand

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans

b Enter the amount of reserves the organization is required to maintain by the states in

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .

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

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

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

7d

10a

10b

11a

11b

12b

13b

13c

7e

7f

7g

7h

8

9a

12a

13a

14a

14b

15

No

Nο

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Nο

No

	7550 (2010)			rage						
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	"No" resp	onse to	lines ✓						
Se	ection A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year	40								
	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.									
h	Enter the number of voting members included in line 1a, above, who are independent									
	1b	37								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any oth officer, director, trustee, or key employee?	er 2	Yes							
3	Did the organization delegate control over management duties customarily performed by or under the direct superv of officers, directors or trustees, or key employees to a management company or other person?	3		No						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			No						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6		No No						
6										
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or members of the governing body?	7a		No						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following:	by								
а	The governing body?	8a	Yes							
		. 8b	Yes							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No						
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code	∍.)							
			Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a	Yes							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	s, 10 b	Yes							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing t form?	ne 11a	Yes							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t conflicts?	o 12b	Yes							
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes							
13	Did the organization have a written whistleblower policy?	13	Yes							
14	Did the organization have a written document retention and destruction policy?	14	Yes							
15	Did the process for determining compensation of the following persons include a review and approval by independer persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	nt								
а	The organization's CEO, Executive Director, or top management official	15a	Yes							
b	Other officers or key employees of the organization	15b	Yes							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No						
		ion pt		No						
b	taxable entity during the year?	ion		No						
b	taxable entity during the year?	ion pt 16b		No						
ь S е	taxable entity during the year?	ion pt 16b		No						
b S e	taxable entity during the year?	ion pt 16b		No						
5e 17 18	taxable entity during the year?	ion pt 16b		No						
5e 17 18	taxable entity during the year?	ion pt 16b		No						
5e 17 18	taxable entity during the year?	ion pt 16b		No						

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Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	e in t	his	Part VI	١.			\square
Section	A. Officers, Directors, Tru	stees, Key E	mploy	rees	, an	d F	lighe	st C	Compensated En	nployees	
1a Complete year.	e this table for all persons require	ed to be listed.	Report	comp	ensa	tion	for th	е са	lendar year ending	with or within the o	rganization's tax
 List all 	of the organization's current off ation. Enter -0- in columns (D), (als o	or organizations), re	gardless of amount	
• List all o	of the organization's current key	employees, if	any. Se	e inst	ructi	ons	for de	finit	ion of "key employe	e."	
who receive	organization's five current high d reportable compensation (Box and any related organizations.)
	of the organization's former office e compensation from the organiz							ed e	employees who rece	ived more than \$10	0,000
	of the organization's former dire n, more than \$10,000 of reportab										e
	in the following order: individua d employees; and former such p		ectors;	instit	utior	nal t	rustee	s; of	ficers; key employe	es; highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.	
	(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Addition	al Data Table										
-											

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Par	t VII Section A. Officers, Direc	ctors, Trustees	s, Key	Emp	loye	ees	, and	High	nest Co	mpensa	ate	d Employees	(conti	inued)	
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one b	ox, i an of tor/t	ot che unles officer trust		rson a	Repe comp froi organiz	(D) portable pensation om the zation (W	_{N-}	(E) Reportable compensatior from related organizations (\) 2/1099-MISC	W-	Estima amount o compen from organizat	ated of other sation the
		organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/102	رعديدا- <i>در</i>		, ,		related organizations	
See /	Additional Data Table	+		+	\vdash	+	-	+			\dashv		+		
													\perp		
				igsqcup	igspace	\perp	lacksquare	<u> </u>					$\overline{\perp}$		
			-	\vdash	\vdash	+	┼	<u> </u>	<u> </u>		\dashv		+		
			 	\vdash	\vdash	+	+	+			\dashv		+		
		+		\vdash		+	+	+			+		+		
													ightharpoonup		
		'	<u> </u>	igspace	igspace	\perp	 	<u> </u>	<u> </u>		_		\perp		
1h 5	Sub-Total	'	<u> </u>		\bot		<u> </u> ▶	'					\dashv		
c T	Total from continuation sheets to F	Part VII , Section	Α				▶				_		\pm		
d_ <u>T</u> _2	Total (add lines 1b and 1c) Total number of individuals (including						(a) who			,079,202	<u></u>		0		1,883,153
	of reportable compensation from the			e iisu	eu a	-DOV	e) wno) rece	eiveu mo	Te man	<u></u>				
3	Did the organization list any former	r officer, director	or trus!	tee. k	ev e	emp'	lovee.	or hi	inhest co	mpensat	ted	emplovee on	_	Yes	No
_	line 1a? If "Yes," complete Schedule	e J for such individ	idual .	•	•	•		•			•		3	Yes	
4	For any individual listed on line 1a, is organization and related organization individual											the	4	Yes	
5	Did any person listed on line 1a rece services rendered to the organization												5		No
	ection B. Independent Contrac				_	<u> </u>		<u> </u>			_				
1	Complete this table for your five high from the organization. Report compe	ensation for the c										ı's tax year.	npens		
		(A) e and business addre	ess									(B) ription of services	\Box	Comper	nsation
	SIGLI CONSTRUCTION INC JMNER STREET								١	CONSTRU	JC11	ON		1/	7,180,337
MILFO	DRD, MA 01757 FACILITY SERVICES INC									CLEANIN	IG			11	.,842,590
	SOLUTIONS CENTER AGO, IL 606774000								١						
COLUI	MBIA CONSTRUCTION CO									CONSTRU	UCTI	ION		9	,967,551
NORT	RIVERPARK DRIVE TH READING, MA 018640220									I III	*110	'A CEMENT CEDVIC			757 450
194 S	CT ENERGY BUSINESS LLC S WOOD AVE								ا	UILLIII	MAIN	NAGEMENT SERVICE	ES	,	7,757,450
	N, NJ 08830 MODORE BUILDERS			—	—	—				CONSTRU	UCT:	ION	_	5	5,950,153
404 W 400	WYMAN STREET								١						
WALT	HAM, MA 02451 Fotal number of independent contracto	ors (including bu)	+ not lim	nited	to th	 hose	 listed	abo	ve) who	received	mc		10 of		
_	compensation from the organization	•										10 01011 4 = - 1 - 1		Form 90	2 (2010)

Part		Statement of	Revenue								rage 3
		Check if Schedul	e O contains a	respo	onse or note to any	line in t	his Part VIII				🗆
							(A) revenue	Rel ex fu	(B) ated or kempt nction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaign	ns	1a				re	venue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues		1b	<u> </u>						
irai 10 u		c Fundraising events		1c	317,498						
Gifts, Grants ilar Amounts		d Related organizatio		1d	1						
활동		e Government grants (co			157 202 624						
s, (imi				1e	157,303,624						
ion S		f All other contributions, and similar amounts no above		1f	174,009,882						
Contributions, and Other Sim		g Noncash contribution	ns included								
들으			ons included	18	,364,236						
ā ē		h Total. Add lines 1a	-1f		•	3	31,631,004				
a :					Business						
ınıe	2a	INSTRUCTION				900099	629,4	172,749	629,472,74	.9	
Service Revenue	b	CLINICAL AND OTHER E	DUCATION			541900	111,3	868,119	109,305,77	2,062,	345
Se F	c	AUXILLIARY ENTERPRIS	ES			900099	11,2	274,888	10,259,31	8 1,015,	570
ervi						300033					
S L	d e	•									
Program	_	All other program se	rvice revenue					0		0	0 0
Pro		, -			752,	115,756					
		Total. Add lines 2a-2			interest and other			T			<u> </u>
		Investment income (ii similar amounts) .			interest, and other	•	14,765,33	0		-7,481,908	22,247,238
	4	Income from investme	ent of tax-exe	mpt b	ond proceeds	•					
	5	Royalties		•	•	•	3,344,95	1			3,344,951
	6-	Gross rents	(i) Real		(ii) Personal						
	Va	GIOSS TEIRS	1,5	18,412							
	Ŀ	Less: rental expenses	2,0	13,442							
		Rental income or	-4	95,030		0					
	Ī	(loss)		,							
	C	Net rental income o					-495,03	0			-495,030
	- -	Gross amount	(i) Securit	ies	(ii) Other						
	<i>7</i> d	from sales of assets other	1,618,6	41,143	29,630,99	9					
		than inventory									
	Ŀ	Less: cost or				_					
		other basis and sales expenses	1,497,6	•							
		Gain or (loss)		06,959	11,972,93	8	400 070 00	_		75.007	
		I Net gain or (loss) . Gross income from for			•		132,979,89	1		75,227	132,904,670
a)	Oa	(not including \$	317,498								
eun		contributions reporte See Part IV, line 18			372,004	1					
}e∨	Ŀ	Less: direct expense		b							
J ie		: Net income or (loss)					-19,38	6			-19,386
Other Revenue	9 a	Gross income from g	aming activiti	es.	·						
0		See Part IV, line 19		а	}						
	Ŀ	Less: direct expense	s	b							
		Net income or (loss)		activit	ies						
	10	Gross sales of invent									
		returns and allowand	ces	a	}						
	Ŀ	Less: cost of goods s	sold	b							
		Net income or (loss)		invent	tory ►						
		Miscellaneous			Business Code						
	11	.a									
	Ł	·									
	c										
	c	All other revenue .						0	0	0	0
	e	Total. Add lines 11a	-11d		•			0			
	12	? Total revenue. See	Instructions.				1,234,322,52	2	749,037,841	-4,328,766	157,982,443
							-,,522,52	-1	, ,5,057,041	4,320,700	Form 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all cc	-	·	lete column (A).	
Check if Schedule O contains a response or note to any	line in this Part IX .		(0)	<u> U</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	22,461,875	22,461,875		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	151,070,483	151,070,483		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	5,918,854	5,918,854		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	8,355,565	2,489,824	5,304,544	561,197
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	201,771	201,771		
7 Other salaries and wages	441,763,369	367,391,578	60,148,887	14,222,904
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	31,638,901	25,520,952	5,006,754	1,111,195
9 Other employee benefits	55,516,656	44,913,652	8,391,876	2,211,128
10 Payroll taxes	27,085,784	21,608,831	4,528,995	947,958
11 Fees for services (non-employees):				
a Management				
b Legal	4,627,058	2,597,878	2,024,691	4,489
c Accounting	537,794		537,794	
d Lobbying	550,424		550,424	
e Professional fundraising services. See Part IV, line 17	1,281,421			1,281,421
f Investment management fees	2,357,526		2,357,526	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	46,570,362	36,003,685	10,440,873	125,804
12 Advertising and promotion	1,245,967	1,007,766	165,348	72,853
13 Office expenses	61,935,760	50,574,227	9,936,094	1,425,439
14 Information technology	12,837,492	2,563,403	10,049,106	224,983
15 Royalties	1,733,105	1,733,105		
16 Occupancy	48,434,564	46,995,293	1,022,434	416,837
17 Travel	14,554,847	12,969,597	1,331,636	253,614
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	5,935,149	4,046,995	1,066,061	822,093
20 Interest	30,553,850	29,645,919	644,979	262,952
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	60,537,001	58,738,098	1,277,911	520,992
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BOOKS, PERIODICALS & MEDIA	12,634,361	12,547,048	28,238	59,075
b SUBSIDIARY EXPENSE-TVETS	12,070,955	12,070,955		
c EQUIPMENT PURCHASES	5,535,897	5,444,013	91,847	37
d GOODS AND SERVICES	6,867,857	6,851,043	11,582	5,232
e All other expenses	3,620,429	3,617,931	2,498	0

1,078,435,077

928,984,776

124,920,098

24,530,203

Form **990** (2018)

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here ► ☐ if following SOP 98-2 (ASC 958-720).

Form 990 (2018)

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Liabilities 22

Fund Balance

ō 30

Assets 31

Net

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons. Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24).

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Intangible assets

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Grants payable . . .

Investments—other securities. See Part IV, line 11 . . .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

Investments—program-related. See Part IV, line 11

Page **11**

1,765,983,550

31.461.185

96.068.866

51.030.493

748,279,252

4,031,399

92.638.610

1.084.203.151

1.341.595.254

604,136,450

726.924.770

2,672,656,474

3,756,859,625

Form **990** (2018)

n

3.756.859.625 188.223.397

		(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing			1	
2 Savings and temporary cash	investments	 46,144,380	2	40,492,664

3	Pledges and grants receivable, net	83,372,888	3	109,670,444
4	Accounts receivable, net	16,325,670	4	14,137,569
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under			

1,740,474,551

29.306.535

100.954.044

160.485.982

63.631.995

756,524,569

3.882.905

77.887.410

1.062.412.861

1.344.081.437

555,653,546

684.438.995

2,584,173,978

3,646,586,839

3.646.586.839

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section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . Assets 44.924.731 44.060.800 Notes and loans receivable, net 1.221.618 8 1.142.467 Inventories for sale or use . Prepaid expenses and deferred charges 1.676.378 9 2.720.572 10a Land, buildings, and equipment: cost or other 10a 1,945,691,575 basis. Complete Part VI of Schedule D 841,155,801 b Less: accumulated depreciation 10b 1,063,886,966 10c 1,104,535,774 518,299,078 546,585,734 11

of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

Yes

Yes

Yes Form 990 (2018)

3a

3b

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 18007697 Software Version: 2018v3.1

EIN: 04-2103634

Form 990 (2018)

AND 218 CERTIFICATE.

Form 990, Part III, Line 4a:

Name: Trustees of Tufts College

INSTRUCTION - DURING THE 2018-2019 ACADEMIC YEAR, THE FOLLOWING DEGREES WERE CONFERRED: 1,377 UNDERGRADUATE, 1,420 GRADUATE, 518 PROFESSIONAL

RESEARCH -THERE WERE 1,907 GOVERNMENT AND 884 NON-GOVERNMENT GRANTS ACTIVE IN FISCAL YEAR 2019. SPONSORED RESEARCH AT TUFTS WAS PERFORMED IN THE MEDICAL, DENTAL, AND VETERINARY SCHOOLS AS WELL AS IN THE BASIC SCIENCE DEPARTMENTS OF ARTS & SCIENCE & ENGINEERING. RESEARCH IS ALSO BEING PERFORMED AT THE USDA HUMAN NUTRITION RESEARCH CENTER ON AGING. ALSO, CLINICAL AND OTHER RESEARCH ACTIVITIES INCLUDE 30 CLINICS THAT ARE OPERATED BY THE DENTAL AND VETERINARY SCHOOLS TO TRAIN STUDENTS AND SUPPORT THEIR RESEARCH. OTHER EDUCATIONAL ACTIVITIES INCLUDE, AMONG

OTHERS, VETERINARY SCHOOL NEWSLETTERS AND CONTINUING EDUCATION PROGRAMS FOR HEALTH SCHOOL PROFESSIONALS.

Form 990, Part III, Line 4b:

Form 990, Part III, Line 4c:

SEMESTER.

AUXILIARY ENTERPRISES - ACTIVITIES PRIMARILY CONSIST OF SERVICES FOR STUDENTS, INCLUDING STUDENT HOUSING, DINING SERVICES AND HEALTH SERVICES. DURING THE 2019 FISCAL YEAR THERE WERE 41 RESIDENCE HALLS HOUSING 3,621 STUDENTS. APPROXIMATELY 4,459 MEAL PLANS WERE SOLD TO STUDENTS EACH

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless person compensation compensation amount of other hours per sation the

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

and Independent Contractors

Jeannie H Diefenderfer

Trustee - Vice Chair

Daniel J Doherty III

Trustee - Vice Chair Dina A Al-Tayeb Trustee

John J Bello

Betsy Busch Trustee

Elizabeth Cochary Gross

Trustee

Trustee

Trustee

John H deJong

	week (list any hours	1	oth a direct			and a ee)	ı	from the organization (W-	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
Anthony P Monaco	60.0									
Trustee & University President		×		X				1,033,185	0	180,915
Trustee & University President	1.0									
Peter R Dolan	3.0									

Anthony P Monaco	60.0			_		1,033,185	0	180,915
Trustee & University President	1.0	^		^		1,033,183	0	180,913
Peter R Dolan	3.0	V		,			0	
Trustee - Chairman	0	Х		×		U	0	0
Jonathan M Tisch	3.0							
		X	ı I	ΧI		ı	ı	

Trustee & University President	1.0	^	^		1,033,183		1.
Peter R Dolan	3.0		,				
Trustee - Chairman	0	×	×		0	0	
Jonathan M Tisch	3.0	\ \ \	,				
Trustee - Vice Chair	0	×	×		0	0	
Jeannie H Diefenderfer	3.0	1					

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation week (list is both an officer and a from the from related compensation organization (Worganizations from the

2/1099-MISC)

Former

(W- 2/1099-

MISC)

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organization and

related organizations

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

	any hours		lirect	or/tr	ruste	e)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	
E Michael Fung	3.0						
Trustee	0	X					
Laurie A Gabriel	3.0						I
Trustee		Х					ı
Trustee	l o		l		ı		l

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and Independent Contractors

Steven M Galbraith

Steven A Goldstein

Michael S Gordon

Bruce D Grossman

Diane S Hessan

Varney J Hintlian

Deborah R Jospin

Peter H Kamin

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation is both an officer and a compensation week (list from the from related director/trustee) urs organization (Worganizations from the

Officer

Institutional

Truste

Key employee

Individual trustee or director

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Highest compensated employee

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2/1099-MISC)

(W- 2/1099-

MISC)

0

organization and

related

organizations

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

	any hours for related organizations below dotted line)
Michael A Karsch	3.0
Trustee	0
Brian H Kavoogian	3.0
Trustee	0
	2.0

and Independent Contractors

Diana V Lopez

Steven E Karol

Jeffrey M Moslow

Elyse A Newhouse

Hugh R Roome III

Janis A Savin-Williams

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

David B Rone

Ankur A Sahu

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other hours per than one box, unless person compensation compensation week (list is both an officer and a from the from related compensation izations from the

organization and

related organizations

0

0

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

	any hours		direct			ee)	1	organization (W- 2/1099-MISC)	organizations
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	,,	(W- 2/1099- MISC)
Neal B Shapiro	3.0	1							
Trustee	0	X						0	
Tina H Surh	3.0	l							
Trustee	0	X						0	
Kalahn Taylor-Clark	3.0								

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and Independent Contractors

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Teri C Volpert

James J Wong

Mark D Goodman

Katherine A Kaplan

Christopher J McKown

Maria A Oquendo

Douglas Rachlin

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person hours per compensation compensation amount of other ensation n the

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

and Independent Contractors

Julien C Carter

Michael A Baenen

Paul J Tringale

Eric C Johnson

Elizabeth Mcclain

Barbara Stein

VP Operations

Associate Treasurer

Deborah T Kochevar

Interim Provost & Sr VP - End Date 6/30/2019

VP - Human Resources

See Schedule O for Title

Secretary of Corporation

VP - University Advancement

	week (list any hours		oth a direct		ruste	,	1	from the organization (W-	from related organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	 <u>इ</u>	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Patricia L Campbell	40.0			x				551,853	0	63,724	
Executive VP, End Date 5/31/2019	1.0			``					Ĭ]	
Mary R Jeka	40.0										
VP - University Relations	0			X				431,206	0	63,622	
Thomas S McGurty	40.0			x				412.841	0	79.236	

79,236

71,053

37,512

77,457

76,578

41,549

69,446

57,808

0

0

0

0

0

Executive VP, End Date 5/31/2019	1.0		X		551,853	0	
— Mary R Jeka	40.0						
VP - University Relations	0		X		431,206	0	
Thomas S McGurty	40.0		,		412.041		
VP - Finance & Treasurer	3.0		^		412,841	0	
Julian C Carter	40.0						

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309,157

197,765

164,596

464,246

182,229

307,706

418,122

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1.0 40.0

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(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless person hours per compensation compensation amount of other week (list is both an officer and a from the from related compensation director/trustee) organization (Wany hours organizations from the

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

		-		,		,		2/4 000 14700)	(11/ 2/4000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
Jean E Ayers Interim VP - Communications & Marketing - End Date 8/27/2018	40.0			х				196,756	0	33,099
Michael Rodman VP Communications & Marketing - Start Date 8/27/2018	40.0			×				87,584	0	10,922
Harris A Berman Dean Medical School	40.0				x			484,381	0	63,434
James M Glaser Dean Arts & Sciences	40.0				x			364,343	0	63,532
Jianmin Qu Dean of Engineering	40.0				×			391,792	0	57,286

Χ

Χ

Χ

Χ

Χ

428,283

198,748

239,889

679,756

418,314

0

0

0

0

0

49,954

45,748

50,859

187,451

63,362

40.0

40.0

40.0

40.0

5.0 40.0

......

......

James M Glaser
Dean Arts & Sciences
Jianmin Qu
Dean of Engineering

Interim Dean Cummings School - Start Date

Dean School for Graduate Biomedical Sciences

Huw Thomas

4/16/2018

Daniel Jay

Sally Dungan

Chief Investment Officer

Dariush Mozaffarian

Dean Friedman School

Dean Dental School Joyce S Knoll

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation week (list is both an officer and a from the from related compensation director/trustee) organization (Worganizations from the

Officer

Institutional

Key employee

Individual trustee or director

10.0

40.0 40.0

40.0

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2/1099-MISC)

551,474

432,783

394,897

302,616

236,606

198,074

Former

compensated

Χ

X

Х

(W-2/1099-

MISC)

organization and

related

organizations

56,707

126,993

49,674

92,338

74,844

38,050

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

	any hours for related organizations below dotted line)
Maria Papageorge	40.0
Professor & Chair	
	

and Independent Contractors

TRYFAN D EVANS

DIRECTOR OF INVESTMENTS

ENGINEERING PROFESSOR -START DATE

Provost & Sr VP - End Date 4/15/2018

VP - Information Technology, CIO - End Date

9/01/2015, DEAN OF ENGINEERING - END DATE

Constantinos Laskarides

Associate Professor Linda M Abriola

8/31/2015

David R Harris

David J Kahle

5/11/2018

erne c	SKAPHIC Pr	int - DO NOT PROCESS	As Filed Data -			DLN: 9	3493195016030
	DULE A	Public	Charity Statu	s and Pul	olic Supp	ort -	OMB No. 1545-0047
orm 0EZ)	990 or)	I .	organization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) c mpt charitable	organization or trust.	I	2018
	nt of the Treasury	▶ Go to	www.irs.gov/Form			•	Open to Public Inspection
me o	o f the organiz of Tufts College	ation				Employer identific	ation number
)art i	Peacen	for Bublic Charity Stat	tue (All organization	s must comple	to this part \ C	04-2103634	
art i orga		for Public Charity State a private foundation because				see instructions.	
	A church,	convention of churches, or a	ssociation of churches	described in sec t	tion 170(b)(1)	(A)(i).	
: 5	✓ A school d	escribed in section 170(b)	(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ).)		
	A hospital	or a cooperative hospital se	rvice organization desc	ribed in section	170(b)(1)(A)(iii).	
		research organization opera /, and state:	ted in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	nter the hospital's
		zation operated for the benef)(iv). (Complete Part II.)	fit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
, [A federal,	state, or local government o	r governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
' [zation that normally receives 70(b)(1)(A)(vi). (Complet		s support from a	governmental u	nit or from the gener	al public described in
· [A commur	nity trust described in sectio	n 170(b)(1)(A)(vi).	(Complete Part I	I.)		
	An agricul non-land (tural research organization o grant college of agriculture. S	lescribed in 170(b)(1) See instructions. Enter	(A)(ix) operated the name, city, a	d in conjunction and state of the o	with a land-grant coll college or university:	ege or university or
	from activ investmer	zation that normally receives ities related to its exempt fu It income and unrelated busi See section 509(a)(2). (C	nctions—subject to cer ness taxable income (le	tain exceptions, a	and (2) no more	than 331/3% of its su	ipport from gross
		zation organized and operate		r public safety. S	ee section 509	(a)(4).	
	more publ	zation organized and operate icly supported organizations ta through 12d that describe	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
	Type I. A organizati	supporting organization ope on(s) the power to regularly Part IV, Sections A and B	rated, supervised, or co	ontrolled by its s	upported organiz	zation(s), typically by	
	managem	A supporting organization su ent of the supporting organiz nplete Part IV, Sections A	zation vested in the sar				
		functionally integrated. A organization(s) (see instruc					ted with, its
	Type III functional	non-functionally integrate ly integrated. The organizations). You must complete Pa	ed. A supporting organion generally must satis	zation operated fy a distribution	in connection wi requirement and	th its supported orgar	
	Check this	box if the organization rece or Type III non-functionally	ived a written determir	ation from the II		pe I, Type II, Type II	I functionally
: Er	-	er of supported organizations		-		<u> </u>	
		wing information about the s	T'				T
(i	i) Name of sup organizatio		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (se instructions)
				Yes	No		
tal							
	erwork Redu	ction Act Notice, see the I	Instructions for	Cat. No. 11285	F S	Schedule A (Form 9	90 or 990-EZ) 201

	edule A (101111 950 01 950 EZ) 2018						Page Z
L	Support Schedule for (b)(1)(A)(ix) (Complete only if you cl	_					-
	III. If the organization f						anily under Fait
- 5	Section A. Public Support			,,		,	
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	(B) 2013	(C) 2010	(u) 2017	(e) 2016	(1) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	227,337,686	260,031,001	301,578,645	266,524,449	331,631,00	1,387,102,785
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to						0
	the organization without charge						
4	Total. Add lines 1 through 3	227,337,686	260,031,001	301,578,645	266,524,449	331,631,00	1,387,102,785
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						0
	amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4.						1,387,102,785
	Section B. Total Support				1		1
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c)2016	(d) 2017	(e) 2018	(f)Total
7	Amounts from line 4.	227,337,686	260,031,001	301,578,645	266,524,449	331,631,00	1,387,102,785
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,057,578	10,145,285	11,006,835	16,553,225	19,609,30	7 67,372,230
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	ı	0
11	Total support. Add lines 7 through 10						1,454,475,015
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	3,023,084,311
13	First five years. If the Form 990 is f	or the organization	n's first, second, th	rd, fourth, or fifth	tax year as a sect	tion 501(c)(3) o	rganization,
	check this box and stop here					🕨	
9	Section C. Computation of Publi	ic Support Perc	entage				_
14	Public support percentage for 2018 (I	ine 6, column (f) d	ivided by line 11, o	olumn (f))		14	95.37 %
15	Public support percentage for 2017 Se	chedule A, Part II,	line 14			15	94.69 %
16	33 1/3% support test—2018. If the	e organization did	not check the box	on line 13, and line	e 14 is 33 1/3% or	more, check th	
	and stop here. The organization qua 33 1/3% support test—2017. If tl						

Schedule A (Form 990 or 990-EZ) 2018

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

h 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Р	art IIII Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		1 490 2
	(Complete only if you cl					to qualify und	ler Part II. If
	the organization fails to	qualify under t	the tests listed l	pelow, please co	mplete Part II.)		
Se	ection A. Public Support						_
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
-	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
4	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
_	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
_	13 for the year. Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
J	from line 6.)						
Se	ection B. Total Support				•		•
	Calendar year	(2) 2014	(h) 2015	(a) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30,						
_	1975. Add lines 10a and 10b.						
С 11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c,						
	11, and 12.)						
14	First five years. If the Form 990 is for	r the organization	's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) c	rganization,
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			1 (6)			
15	Public support percentage for 2018 (lin		•	, , ,		15	
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15	· · · · · · · · ·		16	
Se	ction D. Computation of Investr						·
17	Investment income percentage for 201	. 8 (line 10c, colur	nn (f) divided by	line 13, column (f))	17	
18	Investment income percentage from 20		•			18	
19a	331/3% support tests—2018. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not
	more than 33 1/3%, check this box and s	stop here. The or	rganization qualifi	es as a publicly su	ipported organizati	ion	. ▶□
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	and stop here.	The organization (qualifies as a publ	icly supported orga	anization	. ▶□
20	Private foundation. If the organization						►□

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

Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations.

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b

organization's organizing document? 5с Substitutions only. Was the substitution the result of an event beyond the organization's control?

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

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a 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 "Yes," provide detail in Part VI.

9b

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 "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below. 10a 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). 10b

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 of 990-E2) 2016		- 1	age 3
Pē	Supporting Organizations (continued)		1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			<u> </u>
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			<u> </u>
	governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
С	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.	11c		
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.	_ '		
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	Section D. All Type III Supporting Organizations		<u> </u>	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
5	Section E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
_	a The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	I	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		_

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1				
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1 b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter $1-1/2\%$ of line 3 (for greater amount, see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	Section C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	ntegrate	ed Type III supporting o	ganization (see		

Page **6**

Schedule A (Form 990 or 990-EZ) (2018)

b Applied to 2018 distributable amount
c Remainder. Subtract lines 4a and 4b from 4.
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines

See instructions.

d Excess from 2017.e Excess from 2018.

3j and 4c.

8 Breakdown of line 7:

Additional Data

Software ID: 18007697 **Software Version:** 2018v3.1

EIN: 04-2103634

Name: Trustees of Tufts College

Schedule A (Form 990 or 990-EZ) 2018

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).

instructions).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

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

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

2019

DLN: 93493195016030

2018

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE C (Form 990 or 990-

EZ)

		(01(c)(3)) organizations: Complete Part	ts I-A and C below.	Do not complete Part I-B.			
● : If the	Section 527 organizations: Complet	e Part I-A only. n Form 990, Part IV, Line 4, or Form	990-F7 Part VI lii	ne 47 (Lohbving Activities	s) then		
		have filed Form 5768 (election under					
		have NOT filed Form 5768 (election u					
	e organization answered "Yes" or xy Tax) (see separate instruction	n Form 990, Part IV, Line 5 (Proxy Ta	x) (see separate i	nstructions) or Form 990	-EZ, Part V, line 35c		
	Section 501(c)(4), (5), or (6) organiz						
Nar	me of the organization	·		Employer iden	tification number		
Tru	stees of Tufts College			04-2103634			
Par	t I-A Complete if the organ	nization is exempt under section	on 501(c) or is		zation.		
1		ization's direct and indirect political ca					
2	Political campaign activity expend	litures (see instructions)			\$		
3	Volunteer hours for political camp	aign activities (see instructions)					
Par	t I-B Complete if the organ	nization is exempt under secti	on 501(c)(3).				
1	Enter the amount of any excise ta	ax incurred by the organization under s	ection 4955	>	\$		
2	Enter the amount of any excise ta	ax incurred by organization managers (ınder section 4955	>	\$		
3	If the organization incurred a sect	tion 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.						
Par	t I-C Complete if the orga	nization is exempt under secti	on 501(c), exc	ept section 501(c)(3)			
1	Enter the amount directly expend	ed by the filing organization for section	n 527 exempt func	ion activities 🕨	\$		
2		anization's funds contributed to other			\$		
3	· · · · · ·	es. Add lines 1 and 2. Enter here and c			\$		
4	Did the filing organization file For	m 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	(e) Amount of political		
				filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		
1							
2							
3							
4							
5							
6							
For P	aperwork Reduction Act Notice, see t	the instructions for Form 990 or 990-EZ.	Cat	. No. 500845 Schedule C (Form 990 or 990-EZ) 2018		

551,458

250,000

552,156

250,000

536,814

250,000

550,424

250,000

Schedule C (Form 990 or 990-EZ) 2018

2,190,852

1,000,000

1.500.000

(150% of line 2a, column(e)) Total lobbying expenditures

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots ceiling amount

UI E	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)((b)
ectivit	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Ī	
b	If "Yes," enter the amount of any tax incurred under section 4912			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Pari	III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)$	(5), o	r section	1
				•
C II	501(c)(6).	(-), -		
				Yes I
l.	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes I
l <u>2</u>	Were substantially all (90% or more) dues received nondeductible by members?		1 2	Yes I
1 2 3	Were substantially all (90% or more) dues received nondeductible by members?		3	Yes I
· !	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	 (5), o	1 2 3 r section	Yes M
l 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	 (5), o	1 2 3 r section	Yes M
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	(5), o III-A,	1 2 3 r section	Yes M
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	(5), o III-A,	1 2 3 r section	Yes M
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A,	1 2 3 r section	Yes M
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A,	1 2 3 r section	Yes M
l 2 3 Part L 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A,	1 2 3 r section	Yes M
l 2 3 Part L 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures (agree amounts of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (agree amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o IIII-A, l l l l l l l l l l l l l l l l l l l	1 2 3 r section	Yes M
1 2 2 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A,	1 2 3 r section	Yes M

Explanation

instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference

TY 2018 Affiliated Group Schedule

Name: Trustees of Tufts College

EIN: 04-2103634

Software ID: 18007697 **Software Version:** 2018v3.1

Affiliated Group Business Name: Trustees of Tufts College

Address. Either US or Foreign Type: 169 Holland Street Attn Tax Dept

Somerville, MA 02144

EIN: 04-2103634

Electing Organization Checkbox: **✓**

Total Grassroots Lobbying:

Total Direct Lobbying: 550,424 **Total Lobbying Expenditures:** 550,424

1,053,354,450 Other Exempt Purpose Expenditures: 1,053,904,874 Total Exempt Purpose Expenditures:

Lobbying Nontaxable Amount: 1,000,000 250,000 **Grassroots Nontaxable Amount:**

Tot Lobbying Grassroot Minus Non

Tx:

Tot Lobby Expend Mns Lobbying Non

0 Share Of Excess Lobbying:

THE OMIDYAR-TUFTS MICROFINANCE FUND Affiliated Group Business Name:

169 HOLLAND STREET ATTN TAX DEPT Address. Either US or Foreign Type:

SOMERVILLE, MA 02144

0

04-3828582 EIN:

Electing Organization Checkbox: П

Total Grassroots Lobbying: 0

0 Total Direct Lobbying:

Total Lobbying Expenditures: 0

Other Exempt Purpose Expenditures: 864,737 Total Exempt Purpose Expenditures: 864,737 **Lobbying Nontaxable Amount:** 154,711

38,678 Grassroots Nontaxable Amount:

Tot Lobbying Grassroot Minus Non n Tx:

Tot Lobby Expend Mns Lobbying Non

0 Tx:

Share Of Excess Lobbying: 0

Affiliated Group Business Name:	TUFTS SHARED SERVICES INC
Address. Either US or Foreign Type:	171 HARRISON STREET BOX 821
Address. Little: 05 of Foleigh Type.	BOSTON, MA 02111
EIN:	23-7000827
Electing Organization Checkbox:	
Total Grassroots Lobbying:	0
Total Direct Lobbying:	0
Total Lobbying Expenditures:	0
Other Exempt Purpose Expenditures:	28,217,221
Total Exempt Purpose Expenditures:	28,217,221
Lobbying Nontaxable Amount:	1,000,000
Grassroots Nontaxable Amount:	250,000
Tot Lobbying Grassroot Minus Non Tx:	0
Tot Lobby Expend Mns Lobbying Non Tx:	0
Share Of Excess Lobbying:	0
Affiliated Group Business Name:	TUFTS VETERINARY EMERGENCY TREATMENT SPECIALTIES INC
Address. Either US or Foreign Type:	200 WESTBORO ROAD NORTH GRAFTON, MA 01536
EIN:	04-3430674
Electing Organization Checkbox:	
Total Grassroots Lobbying:	0
Total Direct Lobbying:	0
Total Lobbying Expenditures:	0
Other Exempt Purpose Expenditures:	11,808,215
Total Exempt Purpose Expenditures:	11,808,215
Lobbying Nontaxable Amount:	740,411
Grassroots Nontaxable Amount:	185,103
Tot Lobbying Grassroot Minus Non Tx:	0
Tot Lobby Expend Mns Lobbying Non Tx:	0
Share Of Excess Lobbying:	0

Affiliated Group Business Name:	WALNUT HILL PROPERTIES CORP
-	PO BOX 53 TUFTS UNIVERSITY BRANCH
Address. Either US or Foreign Type:	MEDFORD, MA 02155
EIN:	04-3419100
Electing Organization Checkbox:	П
Total Grassroots Lobbying:	0
Total Direct Lobbying:	0
Total Lobbying Expenditures:	0
Other Exempt Purpose Expenditures:	3,033,560
Total Exempt Purpose Expenditures:	3,033,560
Lobbying Nontaxable Amount:	301,678
Grassroots Nontaxable Amount:	75,420
Tot Lobbying Grassroot Minus Non Tx:	0
Tot Lobby Expend Mns Lobbying Non Tx:	0
Share Of Excess Lobbying:	0
Affiliated Group Business Name:	TUFTS GLOBAL INC
Address. Either US or Foreign Type:	169 HOLLAND STREET ATTN TAX DEPT SOMERVILLE, MA 02144
EIN:	47-4543971
Electing Organization Checkbox:	
Total Grassroots Lobbying:	0
Total Direct Lobbying:	0
Total Lobbying Expenditures:	0
Other Exempt Purpose Expenditures:	859,522
Total Exempt Purpose Expenditures:	859,522
Lobbying Nontaxable Amount:	153,928
Grassroots Nontaxable Amount:	38,482
Tot Lobbying Grassroot Minus Non Tx:	0
Tot Lobby Expend Mns Lobbying Non Tx:	0
Share Of Excess Lobbying:	0

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

(Form 990)

DLN: 93493195016030

OMB No. 1545-0047

Supplemental Financial Statements

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

Open to Public Inspection

Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization **Employer identification number** Trustees of Tufts College 04-2103634 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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 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 ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 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, ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. 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. 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: 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:

Cat. No. 52283D

гаг	Organizations Maintaining Coll	ections of Art, His	STORIC	ai ii	reasur	es, or Oti	ner Similar i	Assets (cont	inued)	
3	Using the organization's acquisition, accession items (check all that apply):	, and other records, ch	neck ar	ny of	the follo	owing that a	are a significan	t use of its col	lection	
а	✓ Public exhibition		d	✓	Loan o	r exchange	programs			
b	Scholarly research		e		Other .					
С	✓ Preservation for future generations									
4	Provide a description of the organization's collegart XIII.	ections and explain ho	w they	furth	ner the o	organization	n's exempt pur	oose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to							✓ Yes		o
Pai	rt IV Escrow and Custodial Arranger Complete if the organization answ X, line 21.		990,	Part	IV, line	e 9, or rep	orted an am			-
1a	Is the organization an agent, trustee, custodia	n or other intermediar	v for c	ontril	butions	or other as:	ets not			
	included on Form 990, Part X?							☐ Yes	☑ N	o
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	wing ta	able:				Amount		_
С	Beginning balance		-			1c				_
d	Additions during the year					. 1d				_
e	Distributions during the year					1e				_
f	Ending balance					1f				_
2a	Did the organization include an amount on For						nt linbility?	✓ voc	□ N	_
									□ N	0
	, ,									
- 6	Irt V Endowment Funds. Complete if	(a)Current year								ra baak
1a	Beginning of year balance	1,893,035,025	(b) Prio	4,579		Two years b: 1,593,24:		2,017,188	our yea 1.625.	056,580
	Contributions	32,989,320		0,995		51,99		6,019,248		369,950
	Net investment earnings, gains, and losses	60,497,350		4,783		224,38:	·	8,477,039		337,135
	Grants or scholarships	23,462,024		3,224		24,50:	<u> </u>	0,620,349		555,041
	Other expenditures for facilities	23,102,021		.5,22	,,,,,,	21,50.	2	.0,020,313		
-	and programs	47,856,371	4	8,773	,468	65,273	3,324	9,664,425	62,	997,156
f	Administrative expenses	5,596,060		5,324	,741	5,26	7,149	6,033,123	5,	194,280
g	End of year balance	1,909,607,240	1,89	3,035	,025	1,774,579	9,213 1,59	3,241,500	1,622,	017,188
2	Provide the estimated percentage of the curre	nt vear end balance (li	ne 1a.	colui	mn (a))	held as:		·		
a	Board designated or quasi-endowment ►	39.1 %	5,		(//					
b	Permanent endowment ► 36.3 %									
^		5 %								
·	The percentages on lines 2a, 2b, and 2c should									
За	Are there endowment funds not in the possess	·	n that a	are h	eld and	administere	ed for the			
	organization by:	-							Yes	No
	(i) unrelated organizations			•				3a(i)		No
	(ii) related organizations							3a(ii)		No
	. ,,				?			. 3b		
4	Describe in Part XIII the intended uses of the		nent fu	nas.						
Pai	rt VI Land, Buildings, and Equipmen Complete if the organization answ		990	Part	TV line	- 11a Soc	Form 990 [Part V line 1	0	
	Description of property (a) Cost or othe (investment)	er basis (b) Cost or					ated depreciation		ook valu	e
1a	Land			75,86	66,576				7.5	5,866,576
	Buildings		1 6		66,679		701,044,77	1		1,221,908
			-,-		,		, 5 = , 5 + 1, 7 7 .	-		-,,500
	Leasehold improvements		7	37 55	58 320		1//0 111 02/	1	0-	7 //7 200
d	Equipment			3/,55	58,320		140,111,030	1	9,	7,447,290

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

1,104,535,774

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	he organization answ	ered "Yes" on Form 99	0, Part IV, line 11b.
	(a) Description of security or category (including name of security)	(b) Book value		od of valuation: -year market value
(1) Financial (2) Closely-h		540,418,770		year market talae
(3) Other (A) Other Inv	vestments	10,499,269		
(B) Common	Trust Equity Index Funds	376,527,943		
(C) Private E	quities	464,768,349		
(D) Real Esta	ate	179,193,702		
(E) Funds He	eld Under Bond Agreements	9,068,922		
(F) UNSETTL	ED INVESTMENTS	0		
(G) Natural R	Resources	126,850,558		
(H) Non-Marl	ketable Credit	58,656,037		
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12.) Investments—Program Related.	1,765,983,550		
	Complete if the organization answered 'Yes' on		<u></u>	Part X, line 13.
	(a) Description of investment	(b) Book value		ed of Valuation: -year market value
(1)				
(2)				
(3) ————				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) ————				
Part IX	n (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets. Complete if the organization answere	ed 'Yes' on Form 990, Par	rt IV, line 11d. See Form 9	990, Part X, line 15.
	(a) Description		·	(b) Book value
(1)				
(3)				
(4)				
(6)				
(7)				
(8)				
Total (Calu	man (h) must aqual Farm 000 Part V sal (P) line 15			
	Other Liabilities. Complete if the organization See Form 990, Part X, line 25.			1e or 11f.
1. (1) Federal ir	(a) Description of liability	(b) Bo	ook value	
-	Agreements		68,916,964	
Government (3)	Advances		23,721,646	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the text of	▶ of the footnote to the or	92,638,610 ganization's financial state	ments that reports the
	s liability for uncertain tax positions under FIN 48 (ASC			

2

4

а

b

C 5

1

2

C

d

3

4

5

b

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2018

Page 4

-575,037

1,234,322,522

957,292,482

34,415,565

922,876,917

155,558,160

1.078.435.077

Schedule D (Form 990) 2018

С	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIII.)	2d		-13	34,4	90,033		
	Add lines 2a through 2d						2e	
2	Subtract line 2e from line 1						2	П

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

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

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Supplemental Information

Total expenses and losses per audited financial statements

Net unrealized gains (losses) on investments

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Other (Describe in Part XIII.) . .

Add lines 2a through 2d .

Return Reference

Subtract line 2e from line 1 .

Prior year adjustments

20	d -134,490,03.					033		
								:

-54,632,548

-575,037

34,415,565

155,558,160

4c

5

2e

3

4c

5

2a

2b

4a

4b

2a 2b

2c

2d

4a 4b

Explanation

-189,122,581 1,234,897,559

	Page 5
Information (continued)	
Explanation	

Schedule D (Form 990) 2018

Additional Data

(D) Funds Held Under Bond Agreements

(E) UNSETTLED INVESTMENTS

(F) Natural Resources

(G) Non-Marketable Credit

Software	Version:	2018v3.1	
	EIN:	04-2103634	
	Name:	Trustees of Tufts College	
Form 990, Schedule D, Part VII - Investments Other	Securities	5	
(a) Description of security or category (including name of security)		(b)Book value	(c) Method of valuation: Cost or end-of-year market value
(A) Other Investments		10,499,269	
(A) Common Trust Equity Index Funds		376,527,943	
(B) Private Equities		464,768,349	
(C) Real Estate		179,193,702	

Software ID: 18007697

9,068,922

126,850,558

58,656,037

 Supplemental Information

 Return Reference
 Explanation

 Schedule D, Part XI FINANCIAL
 THE TRUSTEES OF TUFTS COLLEGE FINANCIAL STATEMENTS WERE AUDITED ON A CONSOLIDATED BASIS.

STATEMENTS

Supplemental Information						
Return Reference	Explanation					
Schedule D, Part III, Line 4 Collections of art - description of collections	THE ART COLLECTIONS AT THE UNIVERSITY ENTAIL PAINTINGS, DISPLAYS, BOOKS AND HISTORICAL ART IFACTS WHICH ARE PUT INTO USE WITHIN THE ORGANIZATIONS INSTRUCTION AND ACADEMIC RESEARCH A REA. THESE COLLECTIONS HELP TO FURTHER OUR EXEMPT PURPOSE BY ENRICHING THE STUDENTS WHICH ENCOURAGES LEARNING AND PROVIDES OPPORTUNITIES THAT ALLOW FOR RESEARCH INTO SPECIFIC ART D ISCIPLINES. FURTHER, THE VARIOUS ART COLLECTIONS BECOME PART OF THE UNIVERSITY ART GALLERY AND ARE DISPLAYED PERIODICALLY DURING ART SHOWS, LECTURE-SERIES AND EXHIBITS AND PROMOTIO NS.					

Supplemental Information					
Return Reference	Explanation				
	TUFTS UNIVERSITY IS THE FISCAL AGENT FOR NUMEROUS UNIVERSITY SPONSORED ACTIVITIES. THE UNIVERSITY HOLDS THESE FUNDS, BUT DOES NOT OWN THEM. AS A RESULT OF THIS ARRANGEMENT THE UNIVERSITY RECORDS A LIABILITY FOLIAL TO THE FUNDS BEING HELD IN ESCROW				

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	THE TRUSTEES OF TUFTS COLLEGE HAS INTENDED USES FOR THE ORGANIZATIONS' ENDOWMENT FUNDS BY PROVIDING RESOURCES TO MAINTAIN REAL ESTATE WITH CAPITAL IMPROVEMENTS AND ENHANCEMENTS; SU PPORTING ACADEMIC AND RESEARCH OPERATIONS; PROVIDING FINANCIAL SUPPORT AND SCHOLARSHIPS FOR STUDENTS AND SUSTAINING FUNDING FOR FUTURE FINANCIAL OBLIGATIONS OF THE UNIVERSITY.

Constituted To Constitute

Supplemental Information					
Return Reference	Explanation				
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	US GAAP requires Trustees of Tufts College (The University) to evaluate tax positions take n by the University and recognize a tax liability (or asset) if the University has taken a n uncertain position that more likely than not would not be sustained upon examination by the IRS. The University has analyzed the tax positions taken and has concluded that as of June 30, 2019, there are no significant uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial st				

atements.

Supplemental Information	
Return Reference	Explanation
	Consolidated entities revenue - 19283061 Change in split interest agreement691228 Tuit ion discount153261656 Investment in Tufts Shared Services, Inc 179790

upplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not n audited financial statements	Rental expense netted with rental income2480152 Inter-departmental requisition revenue - 2296504 Fundraising expense netted with Fundraising income391389

Su

Supplemental Information	
Return Reference	Explanation
Other expenses in audited	Rental expense netted with rental income - 2013442 Inter-departmental requisition revenue - 466710 Consolidated entities expenses - 15781800 Cumulative effect of account change SFA S 158 - 1569692 Change in fair value of interest rate agreements - 14192532 Fundraising ex pense netted with fundraising income - 391389

-

upplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not n audited financial statements	Consolidated entities expenses - 2296504 Tuition discount - 153261656

Su

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493195016030 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ► Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** Trustees of Tufts College 04-2103634 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? 5g Νo 5h Νo If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2018) Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT

Schedule E (Form 990 or 990EZ) (2018)

THERE ARE MANY AREAS FROM WHICH TRUSTEES OF TUFTS COLLEGE RECEIVED FINANCIAL AID AND ASSISTANCE FROM GOVERNMENT AGENCIES, ASSISTANCE WAS RECEIVED IN THE FORM OF HEALTH PROFESSIONS LOAN AND SCHOLARSHIP FUNDS. PELL GRANTS. SUPPLEMENTAL EDUCATION OPPORTUNITY GRANTS, AND FEDERAL WORK STUDY FUNDS. STUDENTS ENROLLED AT THE TRUSTEES OF TUFTS COLLEGE ALSO RECEIVE LOAN FUNDS THROUGH THE FEDERAL DIRECT LOAN PROGRAM AND RECEIVE GRANTS AND FELLOWSHIPS FROM

Page 2

efile GRAPHIC print -	DO NOT PROCE	SS A	As Filed Data	-		DLN:	93493195016030
SCHEDULE F	Statemer	nt of A	Activities	Outside the Un	ited Sta	tes ☐	OMB No. 1545-0047
(Form 990) Department of the Treasury	► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16 ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.					r 16.	2018 Open to Public
Internal Revenue Service							Inspection
Name of the organization Trustees of Tufts College					Er	nployer iden	tification number
Tradices of Taris conege					04	-2103634	
	ormation on Ac rt IV, line 14b.	tivities	Outside the U	United States. Comple	ete if the org	ganization a	nswered "Yes" to
other assistance, the	grantees' eligibili	ty for th	e grants or assi	substantiate the amoun stance, and the selection	criteria use		☑ Yes □ No
2 For grantmakers. D outside the United St		the orga	inization's proce	edures for monitoring the	use of its g	rants and oth	ner assistance
3 Activites per Region. (The following Part I	I, line 3 t	able can be dupli	icated if additional space is	s needed.)		
(a) Region	office	umber of s in the gion	(c) Number of employees, agents and independent contractors in region		program sen specific	isted in (d) is a vice, describe type of) in region	(f) Total expenditures for and investments in region
See Add'l Data				,			
3a Sub-total		10	g	9			596,845,888
b Total from continuation Part I .	sheets to						3,222,153
c Totals (add lines 3a an	1 21/7	10	g	7			600,068,04

(a) Name of

(b) IRS code

(c) Region

(h) Description

Page 2

(i) Method of

organization	section and EIN (if applicable)	(c) Kegion	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
See Add'l Data								

(e) Amount of

(f) Manner of

(g) Amount

IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(d) Purpose of

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

swered res to roill 9:	uie organization alis	d States. Complete II				
(g) Description of non-cash assistance	(f) Amount of non-cash assistance	(e) Manner of cash disbursement	(d) Amount of cash grant	(c) Number of recipients	(b) Region	Type of grant or assistance
						See Add'l Data
	(g) Description of non-cash	(f) Amount of (g) Description of non-cash	(e) Manner of cash (f) Amount of (g) Description of non-cash of non-cash	eeded. (d) Amount of (e) Manner of cash (f) Amount of (g) Description cash grant disbursement non-cash of non-cash	(c) Number of (d) Amount of (e) Manner of cash (f) Amount of (g) Description recipients cash grant disbursement non-cash of non-cash	uplicated if additional space is needed. (b) Region (c) Number of recipients (d) Amount of cash disbursement (f) Amount of of non-cash of non-cash

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☑ Yes	□No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	✓ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	√ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	✓ Yes	□No

Schedule F (Form	990) 2018 Page 5
Prov amo met	pplemental Information vide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; bunts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting chod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide additional information (see instructions).
990 Schedule	F, Supplemental Information
Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	DUE TO THE VARIOUS TYPES OF GRANT FUND EXPENDITURES THE UNIVERSITY USES MULTIPLE INTERNAL CONTROL PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS AND ASSISTANCE OUTSIDE THE UNITED STATES. FOR FELLOWSHIPS, PRIZES AND STIPENDS, PAYMENTS ARE MADE THROUGH OUR FINANCIAL SERVICES-ACCOUNTS PAYABLE DEPARTMENT. THE PROCESS REQUIRES PRE-APPROVAL BY A PARTICULAR DEPARTMENT-HEAD AND SPECIFIC DOCUMENTATION AND AUTHORIZATIONS ARE NECESSARY IN ORDER TO PROCESS A PAYMENT. FOR INTERNATIONAL PROJECT ADVANCES, A MAJORITY OF THE PAYMENTS ARE WIRED DIRECTLY TO A DESIGNATED FOREIGN BANK ACCOUNT. THE UNIVERSITY HAS REPRESENTATIVES IN THE SPECIFIC REGION WHO MAINTAIN THE CASH FOR EXPENDITURES AND THEIR INTENDED PURPOSES. FOR SCHOLARSHIPS, ALL FOREIGN ADDRESS STUDENTS ARE PROVIDED WITH A CHECK PAYMENT THAT IS PROCESSED FROM THE ACCOUNTS PAYABLE DEPARTMENT. THE FINANCIAL AID OFFICE ADMINISTERS THE LISTING OF PAYEES AND THE FINANCIAL SERVICES OFFICE RECORDS THE TRANSACTIONS AFTER ALL REQUIRED DOCUMENTATION HAS BEEN RECEIVED.

FOR SUBCONTRACT RESEARCH GRANTS, A PRINCIPAL INVESTIGATOR (PI) IS RESPONSIBLE FOR ALL ASPECTS OF A GRANT ALONG WITH THE COMPLIANCE ACTIVITIES. ALL OF THESE PROCEDURES ENSURE THAT GRANT FUNDS USED OUTSIDE THE UNITED STATES ARE BEING PROPERLY MONITORED.

990 Schedule F, Supplemental Information

Deturn Deference

Return Reference	Explanation
Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS	DUE TO THE VARIOUS TYPES OF GRANT FUND EXPENDITURES THE UNIVERSITY USES MULTIPLE INTERNAL CONTROL PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS AND ASSISTANCE OUTSIDE THE UNITED STATES. FOR FELLOWSHIPS, PRIZES AND STIPENDS, PAYMENTS ARE MADE THROUGH OUR FINANCIAL SERVICES-ACCOUNTS PAYABLE DEPARTMENT. THE PROCESS REQUIRES PRE-APPROVAL BY A PARTICULAR DEPARTMENT-HEAD AND SPECIFIC DOCUMENTATION AND AUTHORIZATIONS ARE NECESSARY IN ORDER TO PROCESS A PAYMENT. FOR INTERNATIONAL PROJECT ADVANCES, A MAJORITY OF THE PAYMENTS ARE WIRED DIRECTLY TO A DESIGNATED FOREIGN BANK ACCOUNT. THE UNIVERSITY HAS REPRESENTATIVES IN THE SPECIFIC REGION WHO MAINTAIN THE CASH FOR EXPENDITURES AND THEIR INTENDED PURPOSES. FOR SCHOLARSHIPS, ALL FOREIGN ADDRESS STUDENTS ARE PROVIDED WITH A CHECK PAYMENT THAT IS PROCESSED FROM THE ACCOUNTS PAYABLE DEPARTMENT. THE FINANCIAL AID OFFICE ADMINISTERS THE LISTING OF PAYEES AND THE FINANCIAL SERVICES OFFICE RECORDS THE TRANSACTIONS AFTER ALL REQUIRED DOCUMENTATION HAS BEEN RECEIVED. FOR SUBCONTRACT RESEARCH GRANTS, A PRINCIPAL INVESTIGATOR (PI) IS RESPONSIBLE FOR ALL ASPECTS OF A GRANT ALONG WITH THE COMPLIANCE ACTIVITIES. ALL OF THESE PROCEDURES ENSURE THAT GRANT FUNDS USED OUTSIDE THE UNITED STATES ARE BEING PROPERLY MONITORED.

Cymlonotics

Additional Data

Greenland)

East Asia and the Pacific

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 04-2103634

Name: Trustees of Tufts College

Program

Program

Study-Abroad Education

466,131

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and	5	6	Program Services	Study-Abroad Education	4,012,375

2 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) South America 1 |Program Services Study-Abroad Education 383,411 Program Sub-Saharan Africa 0 | Program Services Study-Abroad Education 209,117 Program

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Central America and the 21.519 0 |Grantmaking Caribbean 1,171,295 East Asia and the Pacific 0 |Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe (Including Iceland and 1,135,015 0 |Grantmaking Greenland) Middle East and North Africa 285,180 0 |Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) 58,263 North America (Canada & 0 |Grantmaking Mexico only) Russia and Neighboring States 66,886 0 |Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America 0 |Grantmaking 127,615 South Asia 0 Grantmaking 452,005

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Sub-Saharan Africa 2,601,076 0 |Grantmaking Central America and the 0 Investments 510,956,000 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Europe (Including Iceland and 0 Investments 62,627,000 Greenland) North America (Canada & 0 Investments 12,273,000 Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures for region offices in the employees or in region (by type) (i.e., is a program service, fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Sub-Saharan Africa 2.341.000 0 IInvestments Central America and the 0 Program Services Travel for Mission Related 25,745 Caribbean Activities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Fast Asia and the Pacific 0 Program Services Travel for Mission Related 128,522 Activities Europe (Including Iceland and 0 | Program Services Travel for Mission Related 356,145 Greenland) Activities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Middle Fast and North Africa 0 Program Services Travel for Mission Related 41,918 Activities North America (Canada & 0 | Program Services Travel for Mission Related 48,064 Mexico only) Activities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Russia and Neighboring States 0 Program Services Travel for Mission Related 25,357 Activities South America 0 | Program Services Travel for Mission Related 27,799 Activities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) South Asia 0 Program Services Travel for Mission Related 58,465 Activities Sub-Saharan Africa 0 | Program Services Travel for Mission Related 161,163 Activities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) East Asia and the Pacific 0 | Fundraising 1,727 Europe (Including Iceland and 0 Fundraising 5,839 Greenland)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Middle East and North Africa 0 | Fundraising 240 North America (Canada & 0 Fundraising 105 Mexico only)

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program services, grants to service(s) in region reaion recipients located in the reaion) South America 0 | Fundraising 64

(i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation section (d) Purpose of (e) Amount of (a) Name of (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) 41,913 Check North America Subcontract

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

Iceland and Greenland)

	(Canada & Mexico only)	Research Grant				
	'	Subcontract Research Grant	30,630	Check/Wire		

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 50,211 Wire South Asia Subcontract Research Grant Subcontract 60.025 Wire lEurope l(Includina Research Grant Iceland and

Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Subcontract 355,381 Wire lthe Pacific Research Grant Middle East 76,589 Check Subcontract land North Research Grant

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East and Subcontract 161,236 Wire North Africa Research Grant 85.966 Electronic Funds Europe Subcontract l(Includina Research Grant Transfer

Iceland and Greenland)

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Subcontract 178,146 Check Europe (Includina Research Grant Iceland and Greenland)

268.868 Wire

Sub-Saharan

Africa

Subcontract

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia Subcontract 25,000 Wire Research Grant East Asia and Subcontract 31.047 Check

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of | (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Subcontract 211,371 Wire Africa Research Grant Sub-Saharan 35,592 Wire Subcontract lAfrica Research Grant

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Subcontract 37,832 Wire Africa Research Grant South Asia Subcontract 38.957 Wire Research Grant

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 13,108 Check Subcontract Europe (Includina Research Grant Iceland and Greenland) 17.488 Wire Europe Subcontract

(Includina Research Grant

Iceland and (Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia Subcontract 18,656 Wire Research Grant East Asia and Subcontract 274,510 Wire Ithe Pacific Research Grant

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Subcontract 74,321 Wire lthe Pacific Research Grant East Asia and Subcontract 108,885 Wire

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of | (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Subcontract 103,836 Wire Africa Research Grant Sub-Saharan 76,862 Wire Subcontract lAfrica Research Grant

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Subcontract 34,646 Wire the Pacific Research Grant Sub-Saharan Subcontract 18.226 Wire Africa Research Grant

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Subcontract 15,000 Wire Africa Research Grant East Asia and 75.376 Wire Subcontract the Pacific Research Grant

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 23,331 Check Subcontract Europe (Includina Research Grant Iceland and Greenland)

521,921 Wire

Sub-Saharan

Africa

Subcontract

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 21,242 Wire Subcontract Europe (Includina Research Grant Iceland and Greenland) 79,576 Wire Europe Subcontract

(Includina

Iceland and Greenland)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (b) Region (c)Number (e) Manner of cash (a) Type of grant (d) Amount of (f) Amount of (a) Description of (h) Method of or assistance cash grant disbursement valuation (book, non-cash non-cash recipients assistance assistance FMV, appraisal, other) Fellowships 17,911 Electronic Funds East Asia and Transfer the Pacific Fellowships 58,917 Electronic Funds Europe Transfer/Wire (Including Iceland and

(Greenland

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients FMV, appraisal, assistance assistance other) Fellowships 1.500 Check Russia and Neiahborina States Fellowships 3,500 Wire South America

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S											
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
Fellowships	South Asia	6		Electronic Funds Transfer/Check							
Fellowships	Sub-Saharan Africa	17	63,141	Wire/Check							

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (a) Description of (h) Method of (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) International 304,270 Wire ISub-Saharan Program Advances Africa Scholarships 21,519 Check Central America land the Caribbean

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (g) Description of (h) Method of (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Scholarships 34 160,130 Electronic Funds East Asia and Transfer/Check the Pacific 42 Scholarships 562.073 Electronic Funds lEurope Transfer/Check (Including Iceland and (Greenland

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Scholarships 43,920 Electronic Funds Middle East Transfer/Wire/Check and North Africa Scholarships 9,800 Electronic Funds North America Transfer/Wire/Check (Canada & Mexico only)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Scholarships 19 65.386 Wire/Check Russia and Neighboring States Scholarships 13 122.685 Electronic Funds South America Transfer/Check

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Scholarships 33 291,071 Electronic Funds South Asia Transfer/Check Scholarships 47 709,064 Electronic Funds Sub-Saharan Transfer/Check Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of or assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Student Prizes 10 5,115 Check East Asia and the Pacific Student Prizes 2.409 Electronic Funds |Europe Transfer/Check (Includina Iceland and Greenland)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (e) Manner of cash (h) Method of (d) Amount of (f) Amount of (a) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients FMV, appraisal, assistance assistance other) Student Prizes 1,035 | Check Middle East and North Africa Student Prizes 6.300 Electronic Funds North America Transfer/Check (Canada & Mexico only)

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients FMV, appraisal, assistance assistance other) Student Prizes 1,430 Electronic Funds South America Transfer/Check 536 Check Student Prizes South Asia

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S											
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
	Sub-Saharan Africa	3		Electronic Funds Transfer/Check							
	Middle East and North Africa	1	2,400	Wire							

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S											
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)				
Student Stipends	North America (Canada & Mexico only)	1	250	Electronic Funds Transfer							
Student Stipends	Sub-Saharan Africa	1	3,800	Wire							

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) Subcontract 33,973 Wire East Asia and Research Grants the Pacific Subcontract 218,178 Wire Sub-Saharan Research Grants Africa

Department of the Treasury

Internal Revenue Service

DLN: 93493195016030

Inspection

2018

OMB No. 1545-0047

SCHEDULE G Supplemental Information Regarding (Form 990 or 990-EZ) Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

Open to Public

number	ntification nu	Employer ider							of the organization	
		04-2103634							s of Tufts College	rustees
	7.	Part IV, line 17	rm 990,	ered "Yes" on Fo			_	•	Fundraising Activities Form 990-EZ filers	Part 1
		pply.	all that ap	activities. Check	llowing	of the f	ough any	ation raised funds thr	ndicate whether the organiza	L In
		ent grants	-governme	Solicitation of non-	✓ 9	e			Mail solicitations	a 🗸
		rants	ernment g	Solicitation of gove	✓ 9	f		ations	Internet and email solicitation	b 🗸
			events	Special fundraising	✓ 9	g			Phone solicitations	с 🗸
									In-person solicitations	d 🗸
	s 🗆 No								old the organization have a w r key employees listed in Fo	
	er is	ich the fundraise	under wh	ant to agreements	pursua	draisers	ities (fun ation.	aid individuals or ent 5,000 by the organiza	f "Yes," list the ten highest po be compensated at least \$	b If to
ained by)	(vi) Amoun (or retain organiza	nount paid to etained by) iser listed in col. (i)	(or re fundrai	Gross receipts om activity		Did ser have ody or rol of outions?	fundrais custo cont	(ii) Activity	ne and address of individual or entity (fundraiser)	
						No	Yes	TELEFLIND VENDOR		
132,552		543,783		676,335		No		TELEFOND VENDOR		65 k SW
									DAK (VALIDS, 1A 32-10-1	CLD
132,552		543.783		676.335		. ▶				otal .
1	organiza	543,783	fundrai c	676,335		No	custo contrib	TELEFUND VENDOR	FFALO NOEL LEVITZ LLC KIRKWOOD NORTH ROAD DAR RAPIDS, IA 52404	RUF 65 k SW CED

Sche	dule G (Form 990 or 990-EZ) 2018					F	Page 3					
11	Does the organization conduct gam	ing activities with nonmembe	rs?		Yes	Пио						
12	Is the organization a grantor, benef formed to administer charitable gan		a member of a partnership or other entity		Yes							
13	Indicate the percentage of gaming a	activity conducted in:										
а	The organization's facility			13a			%					
b	An outside facility			13b			%					
14	Enter the name and address of the	person who prepares the orga	anization's gaming/special events books and re	ecords:								
	Name ►											
	Address ►											
15a			om the organization receives gaming		· 🗌 Yes	□No						
b	If "Yes," enter the amount of gamin amount of gaming revenue retained		ganization 🕨 \$ and th									
С	If "Yes," enter name and address of	the third party:										
	Name •											
	Address ▶											
16	Gaming manager information:											
	Name ►											
	Gaming manager compensation ► \$											
	Description of services provided ▶											
	☐ Director/officer	☐ Employee	☐ Independent contractor									
17	Mandatory distributions:											
а	Is the organization required under state the state gaming license? .		listributions from the gaming proceeds to		□Yes	Пио						
b	Enter the amount of distributions re in the organization's own exempt ac	•	outed to other exempt organizations or spent • \$									
Pai	t IV Supplemental Informa	ition. Provide the explana	itions required by Part I, line 2b, columnablicable. Also provide any additional infor				 s.					
	Return Reference		Explanation									

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

(Form 990)

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

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

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

OMB No. 1545-0047

DLN: 93493195016030

Open to Public

Schedule I (Form 990) 2018

Department of the Treasury Internal Revenue Service		► Go to <u>w</u> u	► Attach to Form ww.irs.gov/Form990 fo		on.		Inspection
Name of the organization Trustees of Tufts College						Employer identification 04-2103634	ation number
Part I General Inform	ation on Grants	s and Assistance					
 Does the organization mai the selection criteria used Describe in Part IV the org Part II Grants and Other 	to award the grants anization's procedu	s or assistance? ires for monitoring the u	se of grant funds in the U	nited States.			Yes No
that received more	than \$5,000. Part I	I can be duplicated if ad	ditional space is needed.	T	1		1
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of sect		-					112
3 Enter total number of other	er organizations liste	ed in the line 1 table.				<u> ▶</u>	10

Cat. No. 50055P

Return Reference

grant funds.

Schedule I. Part I. Line 2 Procedures for monitoring use of

(4)

Page **2**

Schedule I (Form 990) 2018

(b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book. (f) Description of noncash assistance (a) Type of grant or assistance recipients cash grant noncash assistance FMV, appraisal, other)

DUE TO THE VARIOUS TYPES OF GRANT FUND EXPENDITURES THE UNIVERSITY USES MULTIPLE INTERNAL CONTROL PROCEDURES FOR MONITORING THE USE OF

INDIVIDUAL STUDENT ACCOUNT. THE FINANCIAL SERVICES OFFICE INDEPENDENTLY RECORDS THE TRANSACTIONS AFTER ALL REQUIRED SYSTEM-FEED DOCUMENTATION HAS BEEN RECEIVED. ADDITIONALLY, ALL FEDERAL SCHOLARSHIP ACTIVITIES ARE MONITORED SEPARATELY BY THE SPONSORED ACCOUNTING DEPARTMENT (SPA). FOR SUBCONTRACT RESEARCH GRANTS, THE UNIVERSITY MAINTAINS A SPONSORED RESEARCH ACCOUNTING (SPA) DEPARTMENT WHICH HAS FINANCIAL OVERSIGHT FOR ALL GRANT AND CONTRACT ACTIVITY. THE PRINCIPAL INVESTIGATOR (PI) IS RESPONSIBLE FOR ALL ASPECTS OF A GRANT ALONG WITH THE COMPLIANCE ACTIVITIES. SPECIFIC GRANT-RELATED EXPENDITURE ACTIVITIES ARE PROCESSED BY THE UNIVERSITY ACCOUNTS PAYABLE DEPARTMENT. SUB-RECIPIENT MONITORING: A PRINCIPAL INVESTIGATOR (PI) NEGOTIATES SUBCONTRACTS WITH SUB-RECIPIENTS THROUGH THE OFFICE OF THE VICE PROVOST. WHEN AN AGREEMENT IS FULLY EXECUTED. IT MUST BE SUBMITTED TO THE OFFICE OF SPONSORED PROGRAMS ACCOUNTING (SPA) ALONG WITH A COMPLETED CONSULTANT PAYMENT FORM, ANY ISSUES REGARDING SUB-RECIPIENT PERFORMANCE ARE REPORTED TO THE OFFICE OF THE VICE PROVOST AND SPA. ALSO, SPA

IS RESPONSIBLE FOR ENSURING THAT ALL SUB-RECIPIENTS ARE IN COMPLIANCE WITH OMB CIRCULAR A-133 REOUIREMENTS.

5896 147,063,470 (1) SCHOLARSHIPS (2) FELLOWSHIPS 680 2,622,304 (3) STUDENT PRIZES 617 834,323 (4) STUDENT STIPENDS 503 550,386

(5)

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

> U.S. GRANT FUNDS AND ASSISTANCE. FELLOWSHIPS, PRIZES AND STIPEND PAYMENTS ARE MADE THROUGH OUR FINANCIAL SERVICES AND ACCOUNTS PAYABLE DEPARTMENT. THE PROCESS REQUIRES PRE-APPROVAL BY A PARTICULAR DEPARTMENT-HEAD AND SPECIFIC DOCUMENTATION AND AUTHORIZATIONS ARE NECESSARY IN ORDER TO PROCESS A PAYMENT. A MAJORITY OF PAYMENTS ARE MADE VIA CHECK. FOR DOMESTIC SCHOLARSHIPS, THE FINANCIAL AID OFFICE (FAO) MAINTAINS AN INDEPENDENT FINANCIAL AID ACCOUNTING SYSTEM. THE FAO ADMINISTERS THE LISTING OF AWARD RECIPIENTS AND RECONCILES, ON A MONTHLY BASIS, THE CORRESPONDING EXPENSES WITH THE UNIVERSITY GENERAL LEDGER SYSTEM. THE CASH GRANTS ARE ALSO REFLECTED ON EACH

Explanation

Additional Data

33Sigma Learning Labs

Arlington, MA 02474 Aerogel Technologies LLC

270 Dorchester Ave

Boston, MA 02127

22 College Ave

47-1956657

26-4780499

Software ID: 18007697 **Software Version:** 2018v3.1

EIN: 04-2103634

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.	
(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	

organization	(-,	if applicable	grant	cash	(book, FMV, appraisal,	İ
or government				assistance	other)	İ
						İ

501(C)(3)

FOR PROFIT

(d) Amount of cash (e) Amount of non- (f) Method of valuation (c) IRC section

45,000

67,900

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

Subcontract Grant

Subcontract Grant

Award

Award

Name: Trustees of Tufts College

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 86-0196696 501(C)(3) 32,910 Subcontract Grant Arizona State University

PO Box 876011 Tempe, AZ 852876011					Award
Battelle Pacific Northwest Division	31-4379427	501(C)(3)	59,840		Subcontract Grant Award

PO Box 84391

Seattle, WA 981245691

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Baystate Medical Center 04-2790311 501(C)(3) 257.418 Subcontract Grant

PO Box 414168 Boston, MA 022414168		,,,,	,		Award
Beth Israel Deaconess Medical Center	04-2103881	501(C)(3)	77,813		Subcontract Grant Award

330 Brookline Ave Boston, MA 02215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government C D . ~ II 04 0400545 E04(0)(3) 400 000 ontract Grant

Poston Modical Contor	04 2214002	E01(C)(2)	20.072		Cubaas
140 Commonwealth Ave Chestnut Hill, MA 02467	04-2103545	501(C)(3)	108,936		Award

Boston, MA 02118

Subcontract Grant Boston Medical Center 04-3314093 501(C)(3)| 28.9/31 660 Harrison Ave lAward

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Boston University 04-2103547 501(C)(3) 96.711 Subcontract Grant PO Box 28763 Award

Subcontract Grant

lAward

23,444

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

501(C)(3)

New York, NY 100878763
Brandeis University

Waltham, MA 024549110

PO Box 549110

04-2103552

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Bridgewater State University 04-3010428 501(C)(3) 16.355l Subcontract Grant Award

131 Summer St Bridgewater, MA 02325

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

Boston, MA 02241

Brigham & Women's Hospital 04-2312909 501(C)(3) 556,187 Subcontract Grant PO Box 3887 lAward

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance assistance other) or government The Broad Institute Inc. 26-3428781 501(C)(3) 26.061 Subcontract Grant 415 Main St Award Cambridge, MA 02142

Subcontract Grant

lAward

528,753

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

501(C)(3)

05-0258809

Brown University

Providence, RI 02912

PO Box 1911

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Child Trends Inc 13-2982969 501(C)(3) 24,014 Subcontract Grant

Award

7315 Wisconsin Ave Ste					Award
1200W					
Bethesda, MD 208143666					
Children's Hospital Boston	04-2774441	501(C)(3)	195,798		Subcontract Grant

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

Children's Hospital Boston PO Box 414413

Boston, MA 02241

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 04-2631569 501(C)(3) 34.644 Subcontract Grant Chinese Progressive Association Inc Award 28 Ash St

 28 Ash St
 Boston, MA 021111517

 The Cleveland Clinic
 34-0714585
 501(C)(3)
 615,715
 Subcontract Grant Award

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

PO Box 931562

Cleveland, OH 441935012

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 54-0734117 501(C)(3) 130.404 Subcontract Grant

lAward

 College of William and Mary PO Box 8795 Williamsburg, VA 231878795
 54-0734117
 501(C)(3)
 130,404
 Subcontract Grant Award

 Colorado State University
 84-6000545
 501(C)(3)
 28,005
 Subcontract Grant

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

2002 Campus Delivery

Fort Collins, CO 805232002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Trustees of Columbia 13-5598093 501(C)(3) 546.325 Subcontract Grant University Award PO Box 29789 New York, NY 10087

Subcontract Grant

Award

149.192

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

FOR PROFIT

ConvergeOne Systems

Integration Inc

PO Box 4869 Houston, TX 77210 33-1009098

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ntract Grant

Dairy Crazing Appropriate Chin	46 2604047	E01(C)(2)	E 222		Cubaaab
Ithaca, NY 148510022					Awaru
Cornell University PO Box 22	15-0532082	501(C)(3)	142,455		Subcont Award

Hudson, WI 54016

Subcontract Grant Dairy Grazing Apprenticeship 46-269404/ 501(C)(3)| 5.3331 Award 522 4th St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 02-0222111 501(C)(3) 77.474 Subcontract Grant Dartmouth College

11 Rope Ferry Rd 6210 Hanover, NH 037551404					Award
Design Urbanism Architectural LLC	86-1126424	FOR PROFIT	22,131		Subcontract Grant Award

299 Broadway Ste 1010 New York, NY 100071952

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Dimagi Inc 83-0343298 FOR PROFIT 121.812 Subcontract Grant

585 Massachusetts Ave Ste 4 Cambridge, MA 02139			·		Award
Dudley Street Neighborhood Initiative	04-2859066	501(C)(3)	11,299		Subcontract Grant Award

550 Dudley St Roxbury, MA 02119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Fox Chase Cancer Center 23-2003072 501(C)(3) 173.386 Subcontract Grant

lAward

Fox Chase Cancer Center 23-2003072 501(C)(3) 173,386 Subcontract Grant Award

Philadelphia, PA 19111

Fuller Theological Seminary 95-1699394 501(C)(3) 137,520 Subcontract Grant

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

180 N Oakland Ave

Pasedena, CA 91101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ontract Grant

The Coneya Foundation	01-1502012	E01(C)(2)	E7 0E7		Cubconi
Fund for the City of New York 110 W 34th St Ste 807 New York, NY 10001	13-2612524	501(C)(3)	13,200		Subcont Award

Tacoma, WA 98402

|Subcontract Grant The Geneva Foundation 91-1593913 501(C)(3)] 5/,85/ 917 Pacific Ave Ste 600 Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government George Washington University 53-0196584 501(C)(3) 103.770 Subcontract Grant Award

lAward

George Washington University 45155 Research Place Ste 205 Ashburn, VA 20147

Georgia Tech Research Corp 58-0603146 501(C)(3) 177,999

Subcontract Grant 103,770

Subcontract Grant 103,770

Subcontract Grant 103,770

Subcontract Grant 103,770

Subcontract Grant 103,770

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

PO Box 100117

Atlanta, GA 30384

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Global Food & Nutrition Inc. 52-1931539 FOR PROFIT 128.380 Subcontract Grant 1300 L St NW 920 Award Washington, DC 20005

Subcontract Grant

lAward

328,539

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

501(C)(3)

Harvard University

Boston, MA 02241

PO Box 415649

04-2103580

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Heifer International 35-1019477 501(C)(3) 5.569 Subcontract Grant

1 World Ave Little Rock, AR 72202		, , ,	·		Award
International Food Policy Research Inst	52-1041632	501(C)(3)	178,651		Subcontract Grant Award

2033 K Street NW Washington, DC 20006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Jackson Lab 01-0211513 501(C)(3) 58.770 Subcontract Grant 610 Main St Award

Subcontract Grant

lAward

643.775

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

501(C)(3)

Bar Harbor, ME 04609

Johns Hopkins University

Chicago, IL 60693

12529 Collections Center Dr.

52-0595110

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 48-1108830 501(C)(3) 20.497 KUMC Research Institute Inc Subcontract Grant Award

3901 Rainbow Blvd Kansas City, KS 66160 Lahev Hospital & Medical 04-2704686 501(C)(3) 17.597

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

Burlington, MA 01805

Subcontract Grant Center Award 41 Mall Rd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 47-1339554 501(C)(3) 27.695 Life Connection Center Subcontract Grant 192 Appleton St Award Lowell, MA 01852

Subcontract Grant

Award

6.192

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

501(C)(3)

LosAngeles Biomedical

1124 W Carson St Bldg J-3 Torrance, CA 90502

Research Institute

95-2138184

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Maine Medical Contes AT ASSOCES E01/C1/21 144 0201 Subcontract Grant

Portland, ME 04102	01-0238552	501(C)(3)	144,930		Award
Mass Eve and Ear Infirmary	04-2103591	501(C)(3)	17 296		Subcont

Boston, MA 02114

|Subcontract Grant Mass Eye and Ear Inniniary 201(C)(2) 1/.290 Award 243 Charles St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Macc Conoral Hospital 04-2607083 E01(C)(3) 221 720 Subcontract Grant

PO Box 3829	04-2097983	301(0)(3)	231,/39		Award
Boston, MA 02241					
Mass Institute of Technology	04 2102504	E01(C)(2)	604 750		Cubcont

Cambridge, MA 02139

Subcontract Grant Mass Institute of Technology 04-2103594 501(C)(3)] 604,/58 77 Massachusetts Ave Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ntract Grant

MDI Biological Laboratory PO Box 35 Salisbury Cove, ME 04672	01-0202467	501(C)(3)	75,477		Subcontr Award

Medical College of Wisconsin 39-0806261 501(C)(3) 114.761 Subcontract Grant 8701 Watertown Rd Award

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

Milwaukee, WI 53226

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 57-6000722 501(C)(3) 14.600 Subcontract Grant Medical University South Carolina Award

19 Hagood Ave Ste 805 Charleston, SC 294258040 Metropolitan Area Planning 04-2472296 501(C)(3) 36.197

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

Boston, MA 02111

Subcontract Grant Council Award 60 Temple Place

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 04-2868893 501(C)(3) 8.172 Subcontract Grant The MGH Institute of Health Profession Award

Subcontract Grant

lAward

Award
399 Revolution Dr 7th Fl Ste
745
Somerville, MA 021451444

44.671

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

501(C)(3)

81-6010045

Montana State University

Bozeman, MT 597172470

PO Box 172470

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ntract Grant

Museum of Science Science Park	04-2103916	501(C)(3)	18,225		Subcont
Boston, MA 021141099					Award

Natl Kidney Foundation Inc 13-1673104 501(C)(3) 9.540 Subcontract Grant 30 E 33rd St lAward

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

New York, NY 10016

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Now Jorcov Institute of 22-6000910 E01/C)/3) 7 896 Subcontract Grant

Award

New Sersey Institute of	22 0000310	301(0)(3)	,,050		Joaneona
Technology					Award
323 Dr Martin Luther King Jr					
Blvd					
Newark, NJ 071021982					

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

1216 Fifth Ave

New york, NY 10029

501(C)(3) New York Academy of Medicine 13-1656674 14.515 Subcontract Grant

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government V I M I I O II 43 4000430 E04(6)(3) 4 5 7 2 2 2 2 tract Grant

Award

New York Medical College 40 Sunshine Cottage Rd Valhalla, NY 10595	13-1099420	501(C)(3)	157,332		Award
New York University	13-5562308	501(C)(3)	59,455		Subcontract Grant

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

PO Box 415026 Boston, MA 022415026

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ontract Grant

No other and the second 26 2467247	E04(C)(D)	115 620			
Northeastern University 360 Huntington Ave Boston, MA 02115	04-1679980	501(C)(3)	421,427		Subcont Award

Evanston, IL 602081112

Subcontract Grant Northwestern University 36-2167817 501(C)(3)| 115,6201 633 Clark St Rm G-547 Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Franklin Olin College of 06-1519057 501(C)(3) 15.000l Subcontract Grant

Award

Engineering Inc					Award
1000 Olin Way Needham, MA 024921200					
Oregon State University	93-6001786	501(C)(3)	5,563		Subcontract Grant

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

312 Kerr Administration Bldg

Corvallis, OR 973312140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government Parlance Corp 04-3334185 FOR PROFIT 40.740 Subcontract Grant Award

400 W Cummings Pk Ste 200 Woburn, MA 01801

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

Chestnut Hill, MA 02467

Pine Manor College 04-2321292 501(C)(3) 9.775 Subcontract Grant 400 Heath St lAward

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government tract Grant

Princeton University 701 Carnegie Center Ste 443 Princeton, NJ 08540	21-0634501	501(C)(3)	76,612		Subcontra Award

Chicago, IL 60673

Purdue University 35-6002041 Subcontract Grant 501(C)(3) 52.118 23510 Network Pl Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government Quivira Coalition 31-1551770 E01/C)/3) 18 096 Subcontract Grant

1413 Second St Ste 1 Santa Fe, NM 87505	31-1331770	301(0)(3)	10,030		Award
RAND Corporation PO Box 2138	95-1958142	501(C)(3)	156,981		Subcontract Grant Award

Santa Monica, CA 904072138

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Regents of the University of 41-6007513 501(C)(3) 9.276 Subcontract Grant Minnesota Award

PO Box 1450
Minneapolis, MN 554855957

Rensselaer Polytechnic 14-1340095 501(C)(3) 388,743

Subcontract Grant Award

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

110 8th St Troy, NY 121803500

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 05-0258954 501(C)(3) 13.472 Rhode Island Hospital Subcontract Grant 1 Hoppin St Award

Subcontract Grant

lAward

6.567

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

501(C)(3)

Providence, RI 029034141

Roque Farm Corps

PO Box 533

Ashland, OR 97520

03-0529330

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-2764819 501(C)(3) 11.586 Rowan University Subcontract Grant

201 Mullica Hill Rd Award Glassboro, NJ 08028

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

Chicago, IL 606123833

Rush University 36-2174823 501(C)(3) 142.586 Subcontract Grant 1700 West Van Buren St lAward

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Savon Hills Foundation 04-3303650 E01/C)/3) 6 497 Subcontract Grant

81 Hope Ave Worcester, MA 01603	04-3293039	301(0)(3)	0,407		Award
Somerville Trans Equity Partnership Inc	20-1875025	501(C)(3)	33,259		Subcontract Grant Award

Partnership inc 51 Mt Vernon Street

Somerville, MA 02145

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ontract Grant

Award

Stanford University PO Box 44253 San Francisco, CA 941444253	94-1156365	501(C)(3)	214,549		Subcontract Grant Award
Syracuse University	15-0532081	501(C)(3)	33.149		Subcontract Grant

Syracuse University TO-000500T 201(C)(2) 33,149 119 Bowne Hall

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

Syracuse, NY 132441140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) Telcom Billing & Management 59-3828470 FOR PROFIT 8.550 Subcontract Grant Solutions LLC Award

Solutions LLC
1600 Boston-Providence Hwy
Walpole, MA 02081

Texas A&M Health Science 31-1702109 501(C)(3) 409,321

Center COM
400 Harvey Mitchell Pkwy S
Ste 300

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

College Station, TX 778454375

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 46 4040550 FOR BROKET 40 404

3 Barrymore Road Hanover, NH 03755	46-1019559	FOR PROFIT	19,181		Award
Translational Genomics Research Institute	75-3065445	501(C)(3)	144,835		Subcontract Grant Award

445 North Fifth Street Ste 600

Phoenix, AZ 85004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 04-3400617 501(C)(3) 8.633.605 Tufts Medical Center Subcontract Grant 750 Washington St Award Boston, MA 02111

Subcontract Grant

lAward

25,483

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

501(C)(3)

Tunxis Community College

271 Scott Swamp Rd

Farmington, CT 06032

06-6268897

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Univ of California Davis 94-6036494 501(C)(3) 162.164 Subcontract Grant PO Box 989062 Award

West Sacramento, CA
957989062

Regents of Univ of California 94-6036493 501(C)(3) 14,666

San Francisco

Award

Award

Subcontract Grant

Award

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

1855 Folsom St San Francisco, CA 94143

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) December of the Heist of 04 6002122 E01(C)(2) 160 100 Cubaaninaat Cuani

Foundation Inc.

310 E Campus Rd Athens, GA 30602

California 2195 Hearst Ave Rm 130 MC 1103 Berkeley, CA 947201103	94-6002123	501(C)(3)	160,190		Award
Univ of Georgia Research	58-1353149	501(C)(3)	12,285		Subcontract Grant

Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 56-6001393 501(C)(3) 117.892 Subcontract Grant Univ of North Carolina at Chapel Hill Award

PO Box 402420 Atlanta, GA 303842420 Regents of University of 95-6006145 501(C)(3) 74.835

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

Santa Barbara, CA 931062003

Subcontract Grant California Award SAASB Blda Rm 1212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government University of California San 95-6006144 501(0)(3) 98 298 Subcontract Grant

Award

Diego 9500 Gilman Dr MC 0009 La Jolla, CA 920930009	33 333211	302(0)(0)	33,233		Award
University of Connecticut	06-0772160	501(C)(3)	28,037		Subcontract Grant

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

438 Whitney Rd Ext Unit 1133

Storrs, CT 062691133

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government University of Georgia 58-6001998 501(C)(3) 538.141 Subcontract Grant 310 E Campus Road Award

Subcontract Grant

lAward

33,203

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

501(C)(3)

Athens, GA 30602 University of Idaho

875 Perimeter Dr MS 3020

Moscow, ID 838443020

82-6000945

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government University of Illinois 37-6000511 36.735 Subcontract Grant

lAward

University of Illinois 37-6000511 501(C)(3) 36,735 Subcontract Grant Award

PO Box 20787 Springfield, IL 62708

University of Massachusetts 04-3167352 501(C)(3) 146,707

Subcontract Grant Award

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

100 Morrissev Blvd

Boston, MA 02125

(e) Amount of non-(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government EQ 00044EQ E04(6)(3) 12010 10 1

PO Box 405803 Atlanta, GA 303845803	59-0624458	501(C)(3)	12,848		Award
Regents of the University of Michigan	38-6006309	501(C)(3)	228,249		Subcontract Gran Award

Box 223131

Pittsburgh, PA 152512131

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government

lAward

University of Missouri PO Box 806010 Kansas City, MO 64106	43-6003859	501(C)(3)	79,609		Subcontract Grant Award
University of Northern Iowa	42-6004333	501(C)(3)	34,818		Subcontract Grant

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

Office of Business Operations

Cedar Falls, IA 50614

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Trustees of the University of 23-1352685 501(C)(3) 55.396 Subcontract Grant

University of Ditteburgh	25 0065501	E01(C)(2)	126.000		Cubaantu
Pennsylvania PO Box 785541 Philadelphia, PA 19178					Award

Pittsburgh, PA 152517220

Subcontract Grant University of Pittsburgh 25-096559<u>1</u> 201(C)(3) 126,0801 PO Box 371220 Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government 57-6001153 501(C)(3) 13.360 Subcontract Grant

University of South Carolina 1600 Hampton St Rm 612 Award Columbia, SC 29208

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

Dallas, TX 753031418

University of Texas 74-1761309 501(C)(3) 40.313 Subcontract Grant PO Box 301418 lAward

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government

Award

University of Texas at Austin PO Box 7159 Austin, TX 787137159	74-6000203	501(C)(3)	44,287		Subcontract Grant Award
University of Utah	87-6000525	501(C)(3)	14,070		Subcontract Grant

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

201 S Presidents Cir Rm 406

Salt Lake City, UT 841129020

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government University of Vermont 03-0179440 501(C)(3) 143,923 Subcontract Grant

Award

217 Waterman Bldg 85 S					Award
Prospect St Burlington, VT 054050160					
University of Virginia	54-6001796	501(C)(3)	31,515		Subcontract Grant

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

PO Box 400195

Charlottesville, VA 229044195

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government University of Washington 91-6001537 501(C)(3) 231.626 Subcontract Grant Box 354966 Award

Subcontract Grant

lAward

103,509

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

501(C)(3)

Seattle, WA 981954966 University of Wisconsin

Office For Research Spons Prog

Milwaukee, WI 532780538

39-6006492

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government LIC D 44 0000074 E04(0)(3) c 0 c 4 l ا ما act Grant

Award

OS Dept of Agriculture PO Box 979099 St Louis, MO 631799000	41-06962/1	501(C)(3)	6,964		Award
Vaxess Technologies Inc	46-0612554	FOR PROFIT	59,724		Subcontract Grant

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

790 Memorial Dr

Cambridge, MA 021394648

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Viliana Farma 20-2792106 EOD DDOETT 0 0001 Subcontract Grant

23856 Rd 265 N Havre, MT 59501	29-3783100	TOR PROTTI	9,990		Award
Virginia Polytechnic Inst & State Univ	54-6001805	501(C)(3)	11,484		Subcontra

Blacksburg, VA 24061

tract Grant 300 Turner St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ontract Grant

Washington State University PO Box 641025 Pullman, WA 991641025	91-6001108	501(C)(3)	99,358		Subcon Award
					l

St Louis, MO 63112

Washington University 43-0653611 501(C)(3) 846,457 Subcontract Grant 700 Rosedale Ave Award

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Wellesley College 04-2103637 501(C)(3) 14.408 Subcontract Grant Award

Wellesley Chiege
Green Hall 139 106 Central St
Wellesley, MA 024818203

Women & Infants Hospital of
Rhode Island

O4-2103637

Subcontract Grant
Award

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

350 Duncan Dr Providence, RI 02906

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government ntract Grant

Woods Hole Research Center 149 Woods Hole Rd Falmouth, MA 02540	04-3005094	501(C)(3)	30,509		Subcont Award
Youthbuild USA Inc	22-3076454	501(C)(3)	30 000		Subcont

Somerville, MA 02144

|Subcontract Grant TOUGHDUNG USA THE 201(C)(2) 30,000 58 Dav St Award

efil	e GRA	APHIC pr	int - DO NOT PROCESS	As Filed D	ata	- DLN: 934	49319	5016	030
Sch	edu	le J	Co	ompens	ati	on Information on	1B No.	1545-	0047
(For	n 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees						
			► Complete if the org	2018					
			-	► Atta	ach	to Form 990.			
•		the Treasury ue Service	► Go to <u>www.irs.go</u>	<u>v/Form990</u> 1	tor i	instructions and the latest information.	pen i Insp	ectio	
Nar	ne of th	ne organiza				Employer identificat			
Trus	tees of	Tufts College	9			04-2103634			
Pa	rt I	Questi	ons Regarding Compensa	tion		<u>.</u>			
								Yes	No
1a						the following to or for a person listed on Form relevant information regarding these items.			
	$\overline{\mathbf{V}}$	First-class	s or charter travel	_	_	Housing allowance or residence for personal use			
	V		companions	=	_	Payments for business use of personal residence			
			nification and gross-up payment	:s L	_	Health or social club dues or initiation fees			
	Ш	Discretion	nary spending account	Ľ	Y	Personal services (e.g., maid, chauffeur, chef)			
b			xes in line 1a are checked, did t all of the expenses described ab			llow a written policy regarding payment or reimbursement olete Part III to explain	1 b	Yes	
2						r allowing expenses incurred by all	2	Yes	
	airect	ors, truste	es, officers, including the CEO/	executive Dire	ctor,	regarding the items checked in line 1a?			
3						to establish the compensation of the			
						ot check any boxes for methods EO/Executive Director, but explain in Part III.			
	✓	,			_				
		•	ation committee ent compensation consultant		-	Written employment contract Compensation survey or study			
	<u> </u>	•	of other organizations	_	-	Approval by the board or compensation committee			
			-	_					
4		g the year, d organiza		990, Part VII,	Sec	tion A, line 1a, with respect to the filing organization or a			
_		_		+u-l	,		4-		N.
a b			ance payment or change-of-con r receive payment from, a supp				4a 4b	Yes	No
c		•				sation arrangement?	4c	103	No
_				,		icable amounts for each item in Part III.			
_		. , .), 501(c)(4), and 501(c)(29)			•			
5			ed on Form 990, Part VII, Section ontingent on the revenues of:		aia ti	ne organization pay or accrue any			
а	The o	rganization	n?				5a	Yes	
b		-					5b		No
	If "Ye	s," on line	5a or 5b, describe in Part III.						
6			ed on Form 990, Part VII, Section Ontingent on the net earnings o		did th	ne organization pay or accrue any			
а	The o	rganization	1?				6a		No
b		_					6b		No
		•	6a or 6b, describe in Part III.						
7						ne organization provide any nonfixed t III	7	Yes	
8	subje	ct to the in	nitial contract exception describe	ed in Regulatio	ons s	ed pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describe 		Var	
9	If "Ye	s" on line t	8, did the organization also follo	w the rebutta	ble p	presumption procedure described in Regulations section	9	Yes Yes	
For F	aperv	vork Redu	ction Act Notice, see the Ins	tructions for	r Foi	rm 990. Cat. No. 50053T Schedule J			2018

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990. Part VII.

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.								
(A) Name and Title			kdown of W-2 and/c compensation	or 1099-MISC	(C) Retirement and other	(D) Nontaxable benefits	columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								
								_
	\exists							
	\exists							
	\dashv			<u> </u>				<u> </u>
	\rfloor							
	1							
	1							

Schedule J (Form 990) 2018	hedule J (Form 990) 2018 Page 3					
Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						
Return Reference	Explanation					

AS THIS ACTIVITY WAS A BUSINESS EXPENSE.

COMPENSATED EMPLOYEES TRAVELED USING SUCH AIRLINE ACCOMMODATIONS, THE VALUE OF WHICH WAS NOT INCLUDED IN THEIR TAXABLE COMPENSATION

Return Reference	Explanation
	THE PRESIDENT TRAVELS FOR UNIVERSITY BUSINESS WITH HIS SPOUSE ON A LIMITED BASIS. SPOUSAL TRAVEL EXPENSES ARE FOR A BONA FIDE BUSINESS PURPOSE AND ARE NOT INCLUDED IN TAXABLE COMPENSATION.

com

Return Reference	Explanation
Schedule J, Part I, Line 1a Tax	THE UNIVERSITY MAY INDEMNIFY AND PROVIDE TAX GROSS- UP AMOUNTS TO REIMBURSE OFFICERS AND SENIOR MANAGEMENT EMPLOYEES WHERE
indemnification and gross-up payments	ADDITIONAL PERSONAL INCOME TAXES ARE INCURRED FROM AN INCLUSION OF A TAXABLE FRINGE BENEFIT. DURING THE CALENDAR YEAR 2018, TWO
	OFFICERS AND ONE FORMER KEY EMPLOYEE RECEIVED TAX INDEMNIFICATION AND GROSS-UP PAYMENTS, ALL OF WHICH WERE INCLUDED IN TAXABLE
	COMPENSATION TO THE EMPLOYEES.

Return Reference	Explanation
hedule J, Part I, Line 1a Housing	AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF TUFTS UNIVERSITY, THE UNIVERSITY PRESIDENT IS REQUIRED TO RESIDE ON CAMPUS. THE
owance or residence for personal use	VALUE OF ON-CAMPUS HOUSING IS NOT INCLUDED IN TAXABLE COMPENSATION, BUT IS REFLECTED IN SCHEDULE J, PART II, COLUMN (D).

allo

Return Reference	Explanation
services	THE UNIVERSITY PROVIDES HOUSECLEANING SERVICES TO THE PRESIDENT OF WHICH THE PRESIDENT REIMBURSES THE UNIVERSITY FOR THE MARKET VALUE OF PERSONAL HOUSECLEANING SERVICES. AS A RESULT, NO AMOUNT OF THIS BENEFIT WAS TREATED AS TAXABLE COMPENSATION. IN ADDITION, THE UNIVERSITY PROVIDES A DRIVER AND VEHICLE FOR THE PRESIDENT FOR CERTAIN UNIVERSITY EVENTS. NO AMOUNT OF THIS BENEFIT WAS TREATED AS TAXABLE COMPENSATION.

Return Reference	Explanation
Schedule J, Part I, Line 4b	SALLY DUNGAN, CHIEF INVESTMENT OFFICER, PARTICIPATED IN AN EMPLOYEE INCENTIVE COMPENSATION PLAN THAT IS BASED OFF OF JOB AND PORTFOLIO
Supplemental nonqualified retirement	PERFORMANCE AND ALLOWS FOR UP TO 100% OF BASE SALARY EARNINGS. SHE RECEIVED A PAYOUT AMOUNT OF \$ 236,745 IN 2018. THIS AMOUNT IS
plan	REPORTED IN PART II, COLUMN B(ii). TRYFAN D. EVANS, DIRECTOR OF INVESTMENTS, PARTICIPATED IN AN EMPLOYEE INCENTIVE COMPENSATION PLAN THAT IS
<u>'</u>	BASED OFF OF JOB AND PORTFOLIO PERFORMANCE AND ALLOWS FOR UP TO 80% OF BASE SALARY EARNINGS. HE RECEIVED A PAYOUT AMOUNT OF \$162,658 IN
,	2018. THIS AMOUNT IS REPORTED IN PART II, COLUMN B(ii). FOR ALL INDIVIDUALS PARTICIPATING IN THE INCENTIVE COMPENSATION PLAN THE TERMS OF THE
<u>'</u>	INCENTIVE PAYOUTS INCLUDE A VESTING SCHEDULE COVERING THREE YEARS WHICH ALLOW FOR 50% IN YEAR ONE AND 25% FOR YEARS TWO AND THREE.
,	THE ACTUAL INCENTIVE PAYOUTS ARE MADE IN THE QUARTER FOLLOWING THE CLOSE OF THE FISCAL YEAR TO WHICH THE INCENTIVE PAYMENT APPLIES.
∡ '	TOTAL CURRENT-YEAR EARNED INCOME DEFERRAL AMOUNTS ARE INCLUDED ON SCHEDULE J, PART II, COLUMN C. AND AMOUNTS PAID TO THESE INDIVIDUALS
/'	ARE FURTHER EXPLAINED ON SCHEDULE J, PART I, LINE 6(a) AND LINE 7.

Return Reference	Explanation
Schedule J, Part I, Line 5a	TWO FULL-TIME FACULTY MEMBERS OF TUFTS UNIVERSITY SCHOOL OF DENTAL MEDICINE PARTICIPATE IN a GROUP DENTAL PRACTICE, CALLED TUFTS DENTAL
Compensation contingent on revenues	ASSOCIATES (TDA), WHERE they PRACTICE DENTISTRY. AS MEMBERS OF TDA, they have A NON-FIXED PAYMENT INCENTIVE CONTRACT THAT IS PAID ANNUALLY
of the organization	OVER 24 PAY PERIODS, which is BASED ON NET COLLECTIONS FOR the PRACTICE.

Return Reference	Explanation
payments	ONE OFFICER AND ONE KEY EMPLOYEE RECEIVED NON-FIXED PAYMENTS FOR EXTRAORDINARY JOB PERFORMANCE. THESE AMOUNTS ARE REPORTED IN SCHEDULE J, PART II, COLUMN B(II). TWO INVESTMENT OFFICERS PARTICIPATE IN A DISCRETIONARY INCENTIVE PLAN AND RECEIVED NON-FIXED PAYMENTS FOR INDIVIDUAL JOB PERFORMANCE AND FOR ACHIEVING CERTAIN GOALS AND OBJECTIVES. THESE AMOUNTS ARE A COMPONENT OF THE TOTAL REPORTABLE AMOUNTS AS EXPLAINED ON SCHEDULE J, LINE 4(B) AND ARE REPORTED IN SCHEDULE J, PART II, COLUMN B(II).

Return Reference	Explanation
Schedule J, Part I, Line 8 Payments on contract that is subject to the initial contract exception	The Provost is serving under his initial contract. ALL DEANS OF EACH SCHOOL ARE SERVING UNDER THEIR INITIAL CONTRACTS.

I (Form 990) 2018

Software ID: 18007697 **Software Version:** 2018v3.1

EIN: 04-2103634

Name: Trustees of Tufts College

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

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in							
				(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
(i)	879,680		153,505	53,330	127,585	1,214,100	0
(ii)	0	0	0	0	0	0	0
(i)	212,071	0	24.535	37,083	37,761	311,450	0
(ii)	0						
(i)	119,675	0	78.399	27.030	11.020	236.124	0
(ii)	0	0	0	0	0	0	0
(i)	544,263	0	7.590	53,330	10.394	615.577	0
(ii)	0	0	0	0	0	0	0
(i)	428,185	0	3,021	53,330	10,292	494,828	0
(ii)	0						
(i)	407,210	0	5,631	53,330	25,906	492,077	0
(ii)	0	0	0	0	0	0	0
(i)	295,677	0	13,480	41,263	29,790	380,210	0
(ii)	0	0	0		0	0	0
(i)	178,473	0	19,292	24,048	13,464	235,277	0
(ii)	0	0	0	0	0	0	0
(i)	163,936	0	660	20,167	57,290	242,053	0
(ii)	0	0	0	0	0	0	0
(i)	462,071	0	2,175	53,330	23,248	540,824	0
(ii)	0	0	0	0	0	0	0
(i)	155,700	7,663	18,866	20,897	20,652	223,778	0
(ii)	0	0	0	0	0	0	0
(i)	307,223	0	483	40,830	28,616	377,152	0
(ii)	0	0	0	0	0	0	0
(i)	407,926	0	10,196	34,830	22,978	475,930	0
(ii)	0	0	0	0	0	0	0
(i)	193,312	0	3,444	23,457	9,642	229,855	0
(ii)	0	0	0	0	0	0	0
(i)	300,434	0	2,182	34,830	57,508	394,954	C
(ii)	0	0	0	0	0	0	C
(i)	463,210	o	21,171	34,830	28,604	547,815	C
(ii)	0		0			0	0
(i)	362,666	0	1,677	34,830	28,702	427,875	0
(ii)	0		0		0	0	0
(i)	370,532	0	21,260	34,830	22,456	449,078	0
(ii)	0	0	0		0	0	0
(i)	422,469	0	5,814	34,830	15,124	478,237	0
(ii)	0		0		0	0	0
(i)	197,507	0	1,241	24,432	21,316	244,496	0
(ii)	0	0	0	0	0	0	0
		(i) Base Compensation (ii) 879,680 (iii) 212,071 (iii) 212,071 (iii) 30 (iii) 428,185 (iii) 30 (iii) 307,223 (iii) 307,232 (iii)	(i) Base Compensation (ii) Bonus incentive compensation (ii) Bonus incentive compensation (iii) Bonus incentive compensation (iii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Mathematical Procession Mathematical Pr	(3) Breakfown of W-2 and/or 1099-MEX compensation (1) asse Compensation (1) asse Compensation (1) asse Compensation (1) asse Compensation (1) asse Compensation (1) asse Compensation (1) asses Compensatio	

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(i)-(D)column (B) (i) Base Compensation (iii) compensation reported as deferred on Bonus & incentive Other reportable prior Form 990 compensation compensation Daniel Jay (i) 218,183 15,000 6,706 27,668 23,191 290,748 Dean School for Graduate Biomedical Sciences Sally Dungan (i) 416,900 236,745 26,111 160,803 26,648 867,207 97,455 293,071 27,829

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

162,658

233,807

Professor & Chair

TRYFAN D EVANS

Associate Professor

DIRECTOR OF

INVESTMENTS Constantinos Laskarides (ii) (i)

(ii)

(i)

(ii)

251,220

144,487

Chief Investment Officer	(ii)	0	0	0	0	0	0	0
Dariush Mozaffarian	(i)	417,633	l "l	681	34,830	28,532	481,676	
Dean Friedman School	(ii)	0	0	0	0	0	0	0
Maria Papageorge	(i)	230,574	293.071	27.829	32.388	24.319	608.181	0

18,905

16,603

121,828

17,606

5,165

32,068

559,776

444,571

75,708

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

> **Supplemental Information on Tax-Exempt Bonds** ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,

> > explanations, and any additional information in Part VI.

OMB No. 1545-0047

Open to Public

DLN: 93493195016030

➤ Attach to Form 990.

Department of the Treasury

Schedule K

(Form 990)

	nal Revenue Service		▶Go to <u>www</u>	<u>/.irs.gov/Form990</u> for	the latest	informa	tion.							nspect		
	e of the organization tees of Tufts College							- 1		er ident	ificatio	n numbe	er			
											04-210	3634				
Pa	rt I Bond Issues	(1) 7 570	() CHCID "	1 (1) 5	() 7		ı	(O.D. 11)	•	Ι,		<u>. П</u>	(1.)		(:)	<u> </u>
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price		(T) Descripti	on of purpose	١,	(g) Det	reased		On alf of		Pool ncing
											1			uer		
	MHEFA Series N	04-2456011	57586CV36	03-27-2008	140.4	.00 000	DECLI	IND ICCHE D	ATED 08/05/20		Yes	No X	Yes	No X	Yes	No X
A	MHERA Selles N	04-2436011	3/300CV30	03-27-2008	140,0	500,000		/12/2006	ATED 08/03/20	04		^		^		^
В	MHEFA Series M	04-2456011	57586ejt9	06-11-2009	66,5	548,467	REFU	JND ISSUE D	ATED 04/01/19	998		Х		Х		Х
c	MHEFA SERIES G	04-2456011	57586EKD2	07-01-2009	27,9	900,000	REFU	JND ISSUES	DATED 6/14/19	995		Х		Х		X
					,	·	& 6/0	07/2001								
D	MDFA Series P	04-3431814	57583r7l3	02-08-2011	50,5	32,192	REFU	JND ISSUE D	ATED 04/03/20	001		Х		Х		Х
Pa	rt II Proceeds													<u> </u>		
					Α			В		С				D		
1_	Amount of bonds retired .					29,300	0,000		3,130,000			3,600,	000			
2	Amount of bonds legally defe						0		0							
3	Total proceeds of issue				140,600,000 66,548,467		66,548,467		27,900,000			0 50,532,1				
4	Gross proceeds in reserve fu						0 0									
5	Capitalized interest from pro						0		0							
6	Proceeds in refunding escrov						0		0							
7_	Issuance costs from proceed					600	0,000		538,881						ļ	532,192
8	Credit enhancement from pr						0		0							
9	Working capital expenditures						0		0							
10	Capital expenditures from pr						0		0							
11	Other spent proceeds					140,000	0,000		66,009,586			27,900,	000		50,0	000,000
12	Other unspent proceeds .						0		0							
13	Year of substantial completion	on														
					Yes	No	•	Yes	No	Yes		No		Yes		No
14	Were the bonds issued as pa				Х			Х		Х				Х		
Were the bonds issued as part of an advance refunding issue?						Х			Х			X				Х
16	16 Has the final allocation of proceeds been made?				Х			Х		Х				Χ		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?							X		X				Χ		
Pa	rt Ⅲ Private Business													_		
						A			В		Ç				D	
	Was the organization as	norin a nartusushin	n mambar of on 110	which owned are seen	Yes	No	•	Yes	No	Yes	s	No		Yes		No
1	Was the organization a partr		a member of an LLC	, which owned property		X										

Are there any lease arrangements that may result in private business use of bond-financed

Χ

Private Business Use (Continued)

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

Rebate not due yet?

Was the hedge superintegrated?

Was the hedge terminated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Are there any management or service contracts that may result in private business use of

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

counsel to review any research agreements relating to the financed property?

Does the bond issue meet the private security or payment test? . . .

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

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Schedule K (Form 990) 2018

Part III

За

6

8a

C

9

b

c

Part IV Arbitrage

Yes

No

0 %

Yes

Χ

D

Nο

Χ

Χ

Χ

2500 %

Χ

Χ

Yes

Χ

Χ

Χ

Schedule K (Form 990) 2018

BNY MELLON

Α

No

0 %

0 %

0 %

В

Nο

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Χ

Χ

Yes

No

0 %

C

Nο

Х

Χ

Χ

Χ

Yes

Χ

Χ

Yes

Χ

Χ

Χ

Χ

Χ

Α

Nο

Χ

Χ

Χ

1000 %

Х

Yes

Χ

Χ

Х

Χ

MELLON

DEUTSCHE BANK & BNY

Page 2

No

0 %

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

MULTIPLE SCHEDULES ARE ATTACHED

В

Nο

Explanation

No

Yes

Yes

Nο

No

Yes

Χ

Yes

Yes

Χ

Deutsche Bank and Bank of

America

Χ

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

Page 3

No

D

D

No

Yes

Χ

Yes

Χ

Nο

Schedule K (Form 990) 2018

period?

Part V

Part VI

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Term of GIC

requirements of section 148? . . .

Return Reference

ISSUES ARE LISTED ON SCHEDULE K

Schedule K, Part I SEVEN DEBT

Part IV

Return Reference	Explanation
chedule K, Part IV, Line 3	
IDFA SERIES (MASTER LEASE	RATE IS VARIABLE FOR YEARS(S) 1 & 2 AND CONVERTS TO A FIXED RATE FOR THE REMAINDER OF THE TERM.
GREEMENT)	

ΜI

Return Reference	Explanation
Schedule K, Part I, Column (c) CUSIP #	MDFA SERIES (MASTER LEASE AGREEMENT) DOES NOT HAVE A CUSIP

Return Reference	Explanation
Schedule K, Part II, Line 11 ALL COLUMNS THAT ARE FROM REFUNDINGS	THE OTHER SPENT PROCEEDS ARE THE REFUNDING PROCEEDS OF THE ISSUE THAT ARE NO LONGER IN ESCROW

Return Reference	Explanation
	SERIES 2011P IS A REFUNDING OF AN ISSUE DATED PRIOR TO 12/31/2002 AND THEREFORE IS EXEMPT FROM REPORTING ON PART III OF SCHEDULE K

Sch (D)

Return Reference	Explanation								
II SERIES WITH 0 0%	WHILE THERE MAY BE LEASES, MANAGEMENT CONTRACTS, OR RESEARCH AGREEMENTS OCCURRING IN BOND FINANCED PROPERTY, DUE TO EQUITY CONTRIBUTIONS OR OTHER PRIVATE BUSINESS USE EXCEPTIONS, THE ARRANGEMENTS DO NOT GENERATE PRIVATE BUSINESS FOR THE CURRENT REPORTING PERIOD								

ΑL

Return Reference	Explanation
Schedule K, Part III COLUMNS	BOTH SERIES M & SERIES G ARE REFUNDING'S OF AN ISSUES DATED PRIOR TO 12/31/2002 AND THEREFORE IS
(B) & (C)	EXEMPT FROM REPORTING ON PART III OF SCHEDULE K

Return Reference	Explanation
	AS PART OF A REMEDIAL ACTION PROCEEDS FROM THE SALE OF A BOSTON BUILDING WERE USED TO RETIRE SERIES N DEBT.

Return Reference	Explanation
	AS PART OF A REMEDIAL ACTION, PROCEEDS FROM THE SALE OF BOSTON BUILDING WERE USED TO DEFEASE SERIES Q DEBT.

Return Reference	Explanation
Schedule K, Part II, Line 3 COLUMN (C)	SERIES R ISSUED AT PAR AND DUE IN AUGUST, 2048

Return Reference	Explanation
Schedule K, Part II, Line 1 COLUMN B & COLUMN C	ANNUAL PRINCIPAL PAY-DOWN AND RETIREMENT OF BONDS

DLN: 93493195016030 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No. 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Open to Public Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** Trustees of Tufts College 04-2103634 Part I **Bond Issues** (i) Pool (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (q) Defeased (h) On (e) Issue price behalf of financing issuer Yes No Yes No Yes No MDFA SERIES Q 04-3431814 57583U4K1 02-26-2015 78,544,431 REFUND ISSUE DATED 11/13/2008 Χ Χ Χ & CONSTRUCT FACILITY MDFA SERIES (MASTER LEASE 03-17-2015 28,000,000 CONSTRUCT FACILITY Χ Χ Х 04-3431814 AGRMNT) MDFA SERIES R 34.000.000 IMPROVEMENTS TO EXISTING Χ Χ 04-3431814 57584YNF2 12-13-2018 Χ BUILDINGS Part II **Proceeds** В C D Α 6,147,366 2 2,365,000 3 78,544,431 28,000,000 34,000,000 5 6 63,860,322 7 728,677 66,569 397,771 8 9 10 5,700,580 27,933,431 29,961,950 11 8,254,852

12 3,640,279 13 2016 2016 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ Χ Χ 14 Were the bonds issued as part of an advance refunding issue? Χ Χ Χ 15

Private Business Use

16

17

Part Ⅲ

Has the final allocation of proceeds been made?

Does the organization maintain adequate books and records to support the final allocation of

		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		×		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?	Х		X			X		
For	aperwork Reduction Act Notice, see the Instructions for Form 990.	Cat	. No. 50193E	.			Sched	lule K (Form	990) 2018

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b

C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

D

D

Schedule K (Form 990) 2018

No

Yes

Yes

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No

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Χ

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Yes

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Χ

Yes

Χ

No

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Yes

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Yes

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C

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any research agreements relating to the financed property?

Does the bond issue meet the private security or payment test? . . .

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

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nongualified bonds of

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Were gross proceeds invested in a guaranteed investment contract

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2018

(GIC)?

period?

Part VI

No

Yes

Χ

Nο

Yes

Schedule K (Form 990) 2018

Page 3

No

No

Yes	No
	X

Yes

Χ

No

Yes

Was the regulatory safe harbor for establishing the fair market value of

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

	C print - DO N	OI I KOCES	5 A5	Filed Data -						N: 93	4931	950160
Schedule L Form 990 or 990	-EZ) ► Compl	ete if the org	anizatio	ons with li	s" on Form 9	90, Part IV, li	nes 25	ia, 2	5b, 26		1B No.	1545-004
		27, 28a,		28c, or Form 99 tach to Form 99			ЮЬ.				20	18
		⊳ Go t		rs.gov/Form990			۱.				20	110
epartment of the Trea ternal Revenue Servi	•									C		to Public pection
Name of the orga Trustees of Tufts Co							Em	ploy	er ide	ntifica	tion r	umber
Trustees of Turts Co	onege						04-	2103	634			
				01(c)(3), section								
	lete if the organiz Name of disqua			n Form 990, Part			$\overline{}$		t V, lir escript		1.4) C = 1111 = 1
1 (a) Name or disqua	ililea person	Ι,	b) Relationship be	etween disqua organization	iined person an		•	nsacti) Correcte es N
							-				+ •	<u> </u>
							_					
3 Enter the ar												
Part II Loa Con repo (a) Name of	orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lii (d) Lo	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization?	, Part V, line 3 (e)Original principal amount	8a, or Form 99 (f)Balance due	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part II Loa Con repo (a) Name of	nplete if the orga orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lin	on Form 990-EZ ne 5, 6, or 22 an to or from the	(e)Original principal	(f)Balance	(g) i defau	In	(i Approv boar	n) ved by	(i) Written
Part II Loa Con repo (a) Name of	nplete if the orga orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lii (d) Lo	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization?	(e)Original principal	(f)Balance	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part II Loa Con repo (a) Name of	nplete if the orga orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lii (d) Lo	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization?	(e)Original principal	(f)Balance	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part II Loa Con repo (a) Name of	nplete if the orga orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lii (d) Lo	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization?	(e)Original principal	(f)Balance	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part II Loa Con repo (a) Name of	nplete if the orga orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lii (d) Lo	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization?	(e)Original principal	(f)Balance	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part II Loa Con repo (a) Name of nterested person	nplete if the orga orted an amount (b) Relationshi	nization answe on Form 990, o (c) Purpose	ered "Yes Part X, lii (d) Lo	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization?	(e)Original principal	(f)Balance	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part III Loa Con report (a) Name of nterested person fotal .	nplete if the orga orted an amount (b) Relationshi with organization	nization answe on Form 990, c (c) Purpose of loan	red "Yes Part X, lii (d) Lo. ol To	on Form 990-EZ ne 5, 6, or 22 an to or from the ganization? From erested Perso	(e)Original principal amount	(f)Balance due	(g) i defau	In llt?	(h Approv boar comm	ved by d or littee?	(i) Written greement?
Part III Loa Con report (a) Name of interested person cotal .	nplete if the orga orted an amount (b) Relationshi with organizatio	nization answer on Form 990, or (c) Purpose of loan	red "Yes Part X, lii (d) Lo. ol To To	on Form 990-EZ ne 5, 6, or 22 na to or from the ganization? From From erested Perso "Yes" on Form 9	(e)Original principal amount **State of the image of the	(f)Balance due	(g) defau	In llt?	(HApprov boar comm Yes	ved by d or ittee?	Yes	i)Written greement?
Part III Loa Con report (a) Name of other rested person cotal .	nplete if the organized an amount (b) Relationshi with organization nts or Assistant and the organized present (content or a second organized present)	nization answe on Form 990, c (c) Purpose of loan	ting Intersection and the	erested Perso "Yes" on Form 990-EZ pan to or from the ganization? From c) Amount of the ganization	(e)Original principal amount **State of the image of the	(f)Balance due	(g) defau	In llt?	(HApprov boar comm Yes	ved by d or ittee?	Yes	i) Written greement?
Part III Loa Con report (a) Name of Interested person otal .	nplete if the organized an amount (b) Relationshi with organization nts or Assistant and the organized present (content or a second organized present)	nization answer on Form 990, or (c) Purpose of loan continued by the continued of the continued of loan of lo	ting Intersection and the	erested Perso "Yes" on Form 990-EZ pan to or from the ganization? From c) Amount of the ganization	(e)Original principal amount **State of the image of the	(f)Balance due	(g) defau	In llt?	(HApprov boar comm Yes	ved by d or ittee?	Yes	i)Written greement?
Part III Loa Con representation (a) Name of interested person for the rested person for	nplete if the organized an amount (b) Relationshi with organization nts or Assistant and the organized present (content or a second organized present)	nization answer on Form 990, or (c) Purpose of loan continued by the continued of the continued of loan of lo	ting Intersection and the	erested Perso "Yes" on Form 990-EZ pan to or from the ganization? From c) Amount of the ganization	(e)Original principal amount **State of the image of the	(f)Balance due	(g) defau	In llt?	(HApprov boar comm Yes	ved by d or ittee?	Yes	i)Written greement?
Part III Loa Con report (a) Name of Interested person control	nplete if the organized an amount (b) Relationshi with organization nts or Assistant and the organized present (content or a second organized present)	nization answer on Form 990, or (c) Purpose of loan continued by the continued of the continued of loan of lo	ting Intersection and the	erested Perso "Yes" on Form 990-EZ pan to or from the ganization? From c) Amount of the ganization	(e)Original principal amount **State of the image of the	(f)Balance due	(g) defau	In llt?	(HApprov boar comm Yes	ved by d or ittee?	Yes	i)Written greement?

Complete if the organization	answered tes on Fort	i 990, Part IV, illie 200	a, 200, 01 20C.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh o organiz rever	ation's
				Yes	No
(1) ADAGE CAPITAL MANAGEMENT	PARTNER IS SPOUSE OF CURRENT TRUSTEE	, ,	INVESTMENT MANAGEMENT SERVICES		No
(2) ZOIA MONACO	SPOUSE OF PRESIDENT	12,270	EMPLOYMENT		No
(3) MARISA DOHERTY	SISTER-IN-LAW OF CURRENT TRUSTEE CHAIR	41,340	EMPLOYMENT		No

Explanation

Schedule I (Form 990 or 990-F7) 2018

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

Return Reference

Part V

Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493195016030 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection **Employer identification number** Name of the organization Trustees of Tufts College 04-2103634 Part I **Types of Property** (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Χ 17 88,723 Market value Art—Historical treasures **3** Art—Fractional interests Χ 2,560 Market value 4 Books and publications 5 Clothing and household 6,480 Market value Χ goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 183 5,944,959 Market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Χ 11,210,453 Market value Real estate—Other . . . 18 Collectibles Χ 4 11,300 Market value 9 Χ 70,099 Market value **19** Food inventory . . . Χ 68,565 Market value 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ See Additional Data 26 Other ▶ (______) Other ▶ (______) 27 Other ▶ (______) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 10 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Additional Data

Other ▶ (SPORTS/CONCERT TICKETS)

radicional Data					
			Software ID:	18007697	
			Software Version:	2018v3.1	
			EIN:	04-2103634	
			Name:	Trustees of Tufts College	
Part I, Lines 25-28					
		(a) Check if applicable	(b) Number of contributions o items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
Other ► (EQUIPMENT)		×	14	135,599	Market value
Other ▶ (GIFT CARDS)	_	X	,	894	Market value
Other ► (DINNER EVENTS AND MEETINGS	_)	Х	1:	55,158	Market value
Other ► (DONATED TRAVEL EXPENSES)	Х		10,704	Market value
Other ► (CONTRIBUTION PORTION FROM THE SMFA ART SALE	_)	Х	2:	325,082	Market value
Other ► (RENTAL EXPENSE REDUCTION	_)	Х		l 431,525	Market value
Otto /				2 425	Mandankanalan

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2,135 Market value

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SCHEDULE (Form 990 or 99 EZ)	2018 Open to Public Inspection		
Warmel BetheroFgan Trustees of Tufts Colle 990 Schedule C		er identification number 634	
Return Reference	Explanation		
I, Line 6 NUMBER OF VOLUNTEERS	TUFTS UNIVERSITY HAS NUMEROUS VOLUNTEERS INCLUDING ITS TRUSTEES AND ALUNER TIME, EXPERIENCE, AND EFFORTS TO THE UNIVERSITY. AS A RESULT OF HAVING SUDIENCE OF VOLUNTEERS ACROSS OUR 3 CAMPUSES, THE ACCOUNTING PROCESS IS QUEREFORE, WITHOUT A CENTRALIZED COUNTING SYSTEM TO TRACK ALL OF OUR VOLUNTRENTLY NOT AN ACCURATE WAY TO PROPERLY TRACK OR REASONABLY ESTIMATE TO THOSE INDIVIDUALS PARTICIPATING IN VOLUNTEER-RELATED ACTIVITIES.	JCH A LARGE AU UITE FRAGMENTED. TH ITEERS, THERE IS CU	

Return Reference	Explanation Explanation
Form 990, Part III, Line 1	Tufts University is a student-centered research INSTITUTION dedicated to the creation and application of knowledge. With over 11,000 full-time students from 101 countries, we are committed to providing A transformative experiences for students and faculty in an inclusive and collaborative environment where creative scholars generate bold ideas, innovate in the face of complex challenges and distinguish themselves as active citizens of the world. TUFTS UNIVERSITY'S FOCUS ON INNOVATION AND PROGRESSIVE THINKING TOOK ROOT AT ITS FOUNDING AS A LIBERAL ARTS COLLEGE IN 1852. TODAY, TUFTS UNDERGRADUATE, GRADUATE AND PROFESSIONAL S CHOOLS ARE RECOGNIZED FOR THEIR DEDICATION TO EDUCATING NEW LEADERS FOR OUR CHANGING WORLD AND TUFTS IS RECOGNIZED AMONGST THE MOST SELECTIVE ACADEMIC AND RESEARCH UNIVERSITIES IN THE UNITED STATES. SUPERB TEACHING AND WORLD-CLASS RESEARCH EQUIP TUFTS GRADUATES TO ADDRE SS MULTI-FACETED CHALLENGES AROUND THE GLOBE. CREATIVE CROSS-SCHOOL COLLABORATIONS AND MULTIDISCIPLINARY CENTERS ENGAGE STUDENTS IN SEEKING SOLUTIONS TO COMPLEX ECONOMIC, HEALTH, POLITICAL AND ENVIRONMENTAL ISSUES EVEN BEFORE THEY GRADUATE. A GROWING NUMBER OF INNOVATIVE RESEARCH INITIATIVES AND JOINT DEGREE PROGRAMS ARE AVAILABLE FOR BOTH UNDERGRADUATE AND GRADUATE STUDENTS IN LIBERAL ARTS, SCIENCES AND ENGINEERING AND THE UNIVERSITY'S GRADUATE AND PROFESSIONAL SCHOOLS.

Return Explanation
Reference

Form 990, Part VI, Line 2
Family/business relationships amongst interested persons

Explanation Return Reference THE UNIVERSITY'S IN-HOUSE TAX DEPARTMENT PREPARED THE ANNUAL INFORMATION TAX FILING. AS PA

Part VI. Line RT OF THAT EFFORT IT INCLUDED A LIMITED-SCOPE TAX ENGAGEMENT WITH PRICEWATERHOUSECOOPERS. 11b Review LLP AS A CONSULTANT TO REVIEW SPECIFIC AREAS OF THE TAX RETURN. A COMPREHENSIVE DRAFT FORM 990 WAS THEN REVIEWED BY MANAGEMENT AND THE AUDIT COMMITTEE BEFORE THE RETURN WAS FINALIZ by governing ED. A FINAL COPY OF THE FORM 990. AS FILED. WAS PROVIDED TO THE FULL GOVERNING BODY FOR TH body EIR REVIEW PRIOR TO IT BEING FILED TO THE IRS.

of form 990

Form 990.

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	THE TRUSTEES OFFICE AT TUFTS UNIVERSITY MAINTAINS A STATEMENT OF COMPLIANCE AND A DISCLOSU RE FORM WHICH IS USED TO DISCLOSE ANY CONFLICTS OF INTEREST FOR OFFICERS, KEY EMPLOYEES, A ND GOVERNING BOARD MEMBERS ON AN ANNUAL BASIS. THESE INDIVIDUALS ARE ASKED TO READ THE CON FLICT OF INTEREST POLICY AND COMPLETE AN INTERNET-BASED QUESTIONNAIRE. EACH INDIVIDUAL IS REQUIRED TO DISCLOSE ANY POTENTIAL OR REAL CONFLICTS IN A STATEMENT THAT IS SIGNED, DATED, AND SUBMITTED ELECTRONICALLY TO THE TRUSTEES OFFICE. IN ADDITION, AS PART OF THE ANNUAL M ONITORING PROCESS, CONFLICT DISCLOSURES ARE REPORTED TO THE AUDIT, RISK, AND COMPLIANCE CO MMITTEE. THE AUDIT, RISK, AND COMPLIANCE COMMITTEE IS NOTIFIED AND REVIEWS SUCH DISCLOSURES AND ADVISES ANY ACTIONS. THEREAFTER, IF A DISCLOSURE IS DEEMED TO BE A CONFLICT, THE INDIVIDUAL WOULD THEN CONFIRM THAT THEY WILL NOT PARTICIPATE IN ANY DECISIONS RELATING TO THE SPECIFIC DISCLOSED CONFLICT.

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	EXECUTIVE COMPENSATION IS DETERMINED BY THE TRUSTEE COMPENSATION COMMITTEE WHICH USES A MULTITUDE OF RESOURCES AND INFORMATION. THE COMPENSATION COMMITTEE CONSISTS OF THE CHAIRMAN OF THE BOARD OF TRUSTEES WHO MAY SERVE AS THE CHAIR, ALONG WITH ADDITIONAL MEMBERS, EACH SERVING WITH NO TERM LIMITS. THESE INDIVIDUALS ARE CHOSEN FOR THEIR PARTICULAR EXPERIENCE WITH COMPENSATION MATTERS. THE COMMITTEE MEETS AT LEAST ANNUALLY AND USES SURVEY DATA FROM HUMAN RESOURCES THAT HAVE BEEN GATHERED FROM WILLIS, TOWERS, WATSON AN EXTERNAL, GLOBAL, PROFESSIONAL SERVICES COMPANY. THE EXECUTIVE COMPENSATION SURVEY INCLUDES SELECT PEER INSTITUTIONAL DATA IN THE LARGER COMPETITIVE MARKETPLACE. ALSO, WHEN CERTAIN DATA IS UNAVAILABLE, HUMAN RESOURCES ASSEMBLES INFORMATION FROM THE CUPA HIGHER EDUCATION SALARY SURVEY. ADD ITIONALLY, SALARY RECOMMENDATIONS AND PERFORMANCE REVIEWS ARE PROVIDED TO THE COMPENSATION COMMITTEE TO ASSIST THEM IN THE DECISION MAKING PROCESS. THE COMPENSATION COMMITTEE DELIB ERATES AND VOTES WHILE CONTEMPORANEOUSLY DOCUMENTING ITS DECISIONS RELATING TO COMPENSATION. REGARDING THE COLLEGE PRESIDENT, AFTER HAVING COLLECTED FEEDBACK FROM TRUSTEES, THE CHAIRMAN OF THE COMPENSATION COMMITTEE CONDUCTS AN ANNUAL PERFORMANCE REVIEW BEFORE THE CLOSE OF THE FISCAL YEAR.

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	FOR OTHER EXECUTIVES, INCLUDING SENIOR OFFICERS, KEY EMPLOYEES AND DEANS, TUFTS UNIVERSITY HUMAN RESOURCES OFFICE USED COMPENSATION SURVEYS TO BENCHMARK EACH INDIVIDUAL'S JOB TO THE RELEVANT MARKET TO ENSURE PROPER COMPENSATION. ADDITIONALLY, THE COMPENSATION COMMITTEE ALSO RECEIVED WRITTEN PERFORMANCE EVALUATIONS DURING THE SAME TIME PERIOD ALONG WITH RECOM MENDATIONS FROM THE PRESIDENT, PROVOST AND EXECUTIVE V.P. FOR THEIR RESPECTIVE DIRECT REPORTS.

990 Schedule O, Supplemental Information Return Explanation

Reference

Form 990,
Part VI, Line
19 Required
19 Required
19 Required
19 Required
19 Required
19 Repuired
19 Repu

documents available to the public document AND can also be found with THE CONFLICT OF INTEREST/B USINESS CONDUCT POLICIES ON THE TUFTS UNIVERSITY WEBSITE, AT WWW.TUFTS.EDU.

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a, Column (A) NAMES & TITLES	MICHAEL BAENEN - SERVES AS CHIEF OF STAFF IN THE OFFICE OF THE PRESIDENT AND ASSISTANT SECRETARY OF THE CORPORATION

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Consolidated Entities Revenue - 3501261; Cumulative Effect of Accounting Change SFAS 1581569693; Change in split Interest Agreement691229; Change in fair value of interest rate agreements14192530; Investment in Tufts Shared Services, Inc 179790;

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As Filed Data -

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

DLN: 93493195016030 OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Trustees of Tufts College

(Form 990)

SCHEDULE R

Employer identification number

04-2103634

Part I	Identification of Disregarded E	intities Complete if the organization answere	d "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TUDC LLC 169 HOLLAND STREET SOMERVILLE, MA 02144 04-3056113	REAL ESTATE DEVELOPMENT	МА	0	0	TRUSTEES OF TUFTS COLLEGE
(2) TUFTS MEDIA LLC 169 HOLLAND STREET SOMERVILLE, MA 02144 04-2103634	CONSUMER PUBLISHING & MEDIA	DE	3,639,789	2,647,533	TRUSTEES OF TUFTS COLLEGE
(3) AZULUNA BRANDS LLC 169 HOLLAND STREET SOMERVILLE, MA 02144 04-2103634	AGRICULTURE	MA	10,093	0	TRUSTEES OF TUFTS COLLEGE
(4) TUFTS HEALTH AND WELLNESS SERVICES LLC 169 HOLLAND STREET SOMERVILLE, MA 02144 80-0754011	HEALTH AND WELLNESS SERVICES	MA	0	0	TRUSTEES OF TUFTS COLLEGE
(5) TAS Operations LLC 149 New Sweden Road Woodstock, CT 06281 04-2103634	Veterinary Services	СТ	137,395	0	Trustees of Tufts College
Part II Identification of Related Tax-Exempt Organizations related tax-exempt organizations during the tax year.	Complete if the organiza	tion answered "Yes	" on Form 990,	Part IV, line 34 be	ecause it had one or more

Part II Identification of Related Tax-Exempt Organi related tax-exempt organizations during the tax y		nization answered "	Yes" on Form 990,	Part IV, line 34 be	cause it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) cor entit	512(b) ntrolled ty?
						Yes	No
(1)THE OMIDYAR-TUFTS MICROFINANCE FUND 169 HOLLAND STREET	RELIEF OF POOR & EDUCATION GRANTS	MA	501(c)(3)	Type I	TRUSTEES OF TUFTS COLLEGE	Yes	
SOMERVILLE, MA 02144 04-3828582							
(2)WALNUT HILL PROPERTIES CORP 14 Capen Street	REAL ESTATE MANAGEMENT	MA	501(c)(3)	Type I	TRUSTEES OF TUFTS COLLEGE	Yes	
MEDFORD, MA 02155 04-3419100							
(3)TUFTS SHARED SERVICES INC 171 HARRISON AVE PO BOX 634	COORDINATE HEALTH & EDUCATIONAL SERVICES	MA	501(c)(3)	Type I	TRUSTEES OF TUFTS COLLEGE	Yes	
BOSTON, MA 02111 23-7000827							
(4)TUFTS VETERINARY EMERGENCY TREATMENT & SPECIALTIES INC 200 WESTBOROUGH ROAD	VETERINARY EMERGENCY TREATMENT & CARE	MA	501(c)(3)	10	TRUSTEES OF TUFTS COLLEGE	Yes	
NORTH GRAFTON, MA 02158 04-3430674							
(5)TUFTS UNIVERSITY POST-RETIREMENT PLAN 169 HOLLAND STREET	VEBA	MA	501(c)(9)		TRUSTEES OF TUFTS COLLEGE	Yes	
SOMERVILLE, MA 02144 04-3236078							
(6)TUFTS GLOBAL INC 169 HOLLAND STREET	FOREIGN OPERATIONS SUPPORT ORGANIZATION	MA	501(c)(3)	Type I	TRUSTEES OF TUFTS COLLEGE	Yes	
SOMERVILLE, MA 02144 47-4543971							
(7)CIVIC EDUCATION FOUNDATION 169 HOLLAND ST ATTN TAX DEPT	RAISE CIVIC AWARENESS	MA	501(c)(3)	10	Trustees of Tufts College	Yes	
SOMERVILLE, MA 02144 04-6111643							_
For Paperwork Reduction Act Notice, see the Instructions for I	Form 990.	Cat. No. 50135	ΣΥ	•	Schedule R (Form	990) 20	18

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

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income(relate unrelated, excluded fror tax under sections 512	d, total incom		(† Dispropi allocat	rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	(k) Percentage ownership
			country)		514)								
								Yes	No		Yes	No	
Part IV Identification of Related Organization because it had one or more related o						ization ans	wered "Yes	on Fo	orm 99	0, Part IV,	line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	Le	c) egal nicile			(e) pe of entity corp, S corp,	(f) Share of total income		(g) e of end- year	of- Perce	h) ntage ership	:	(i) Section 512 (b)(13)

Part IV Identification of Related Orga because it had one or more relat	anizations Taxable as a C ted organizations treated as	orporation or Trust (a corporation or trust	Complete if the o	rganization an ear.	swered "Yes"	on Form 990,	Part IV, line 3	4	
(a) Name, address, and EIN of related organization	(b) Primary activity			(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)	(i) on 512 (13) rolled tity?
(1)JM HOLDINGS INC 169 HOLLAND STREET SOMERVILLE, MA 02144 04-3184043	REAL ESTATE DEVELOPMENT	МА	TRUSTEES OF TUFTS COLLEGE	C Corporation	-6,214	39,428	100 %	Yes	
(2)PERPETUAL TRUSTS - (8)	SUPPORT	МА	TRUSTEES OF TUFTS COLLEGE	Trust					No
(3)CHARITABLE REMAINDER UNITRUSTS - (28)	SUPPORT	МА	TRUSTEES OF TUFTS COLLEGE	Trust					No
(4)CHARITABLE LEAD TRUSTS - (5)	SUPPORT	МА	TRUSTEES OF TUFTS COLLEGE	Trust					No
(5)TUFTS UNIVERSITY CHARITABLE TRUST 169 HOLLAND ST ATTN TAX DEPT SOMERVILLE, MA 02144 51-6581922	SUPPORT	НК	TRUSTEES OF TUFTS COLLEGE	Trust	45,994	196,658	100 %	Yes	
						Sch	edule R (Form	990) 2	018

Page **3**

actions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Pa	Transactions with Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1 d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i	Yes	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	_
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o	Sharing of paid employees with related organization(s)	10	Yes	
p	Reimbursement paid to related organization(s) for expenses	1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1 q	Yes	
r	Other transfer of cash or property to related organization(s)	1r	Yes	
s	Other transfer of cash or property from related organization(s)	1s	Yes	
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			•
	(a) (b) (c) (d) Name of related organization Transaction type (a-s)	nount i	nvolve	d

Schedule R (Form 990) 2018

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	10	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ľ	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		,	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
							-			Schedul	e R (Form	990	0) 2018

Schedule R (Form 990) 2018 Page **5** Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions). Return Reference Explanation Schedule R, Part IV, Column (a) THE PERPETUAL AND CHARITABLE REMAINDER TRUSTS AND CHARITABLE LEAD TRUSTS ARE DOMICILED IN FLORIDA, INDIANA, MASSACHUSETTS, AND NEW TRUSTS JERSEY.

Additional Data

(8)

(9)

(10)

(11)

(12)

(13)

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 04-2103634 Name: Trustees of Tufts College

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

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	WALNUT HILL PROPERTIES CORP	D	11,272,795	FAIR MARKET VALUE
(1)	WALNUT HILL PROPERTIES CORP	К	1,260,626	FAIR MARKET VALUE
(2)	WALNUT HILL PROPERTIES CORP	L	227,964	FAIR MARKET VALUE
(3)	TUFTS GLOBAL INC	М	835,472	FAIR MARKET VALUE
(4)	OMIDYAR-TUFTS MICROFINANCE FUND	Q	696,774	FAIR MARKET VALUE
(5)	TUFTS SHARED SERVICES	М	5,065,000	FAIR MARKET VALUE
(6)	TUFTS VETERINARY TREATMENT & SPECIALTIES INC	D	57,324	FAIR MARKET VALUE
(7)	TUFTS VETERINARY TREATMENT & SPECIALTIES INC	L	610,907	FAIR MARKET VALUE

FAIR MARKET VALUE

FAIR MARKET VALUE

FAIR MARKET VALUE

FAIR MARKET VALUE

FAIR MARKET VALUE

FAIR MARKET VALUE

798,496

772,377

885,460

171,620

282,794

2,184,218

Q

L

Ι

С

М

S

TUFTS VETERINARY TREATMENT & SPECIALTIES INC

TUFTS VETERINARY TREATMENT & SPECIALTIES INC

TUFTS UNIVERSITY EMPLOYEE BENEFIT TRUST

OMIDYAR-TUFTS MICROFINANCE FUND

WALNUT HILL PROPERTIES CORP

WALNUT HILL PROPERTIES CORP