

Form **990**
Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

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

C Name of organization: Worcester Polytechnic Institute
 % JEFFREY SOLOMON
 Doing business as

D Employer identification number: 04-2121659

E Telephone number: (508) 831-5000

G Gross receipts \$ 375,525,290

F Name and address of principal officer:
 Laurie Leshin
 100 Institute Road
 Worcester, MA 01609

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

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

J Website: ▶ www.wpi.edu

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1865 **M** State of legal domicile: MA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 WORCESTER POLYTECHNIC INSTITUTE WAS FOUNDED IN 1865 TO CREATE AND CONVEY THE LATEST SCIENCE AND ENGINEERING KNOWLEDGE IN WAYS THAT ARE MOST BENEFICIAL FOR SOCIETY.

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

3 Number of voting members of the governing body (Part VI, line 1a)	3	31
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	4,251
6 Total number of volunteers (estimate if necessary)	6	967
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	937,810
7b Net unrelated business taxable income from Form 990-T, line 34	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	15,469,079	21,267,550
9 Program service revenue (Part VIII, line 2g)	311,143,399	345,757,123
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,337,584	6,972,255
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-5,337,527	115,354
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	328,612,535	374,112,282
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	81,858,207	93,184,868
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	155,866,959	166,726,347
16a Professional fundraising fees (Part IX, column (A), line 11e)	122,763	134,677
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,325,672		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	103,091,368	118,621,960
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	340,939,297	378,667,852
19 Revenue less expenses. Subtract line 18 from line 12	-12,326,762	-4,555,570

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,017,130,657	1,024,893,080
21 Total liabilities (Part X, line 26)	356,004,711	352,172,452
22 Net assets or fund balances. Subtract line 21 from line 20	661,125,946	672,720,628

Part II Signature Block

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

Sign Here

 Signature of officer: _____ Date: 2020-07-14
 PATRICK HITCHCOCK ASSoc. TREASURER & CONTROLLER
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: P01390592
 Firm's name ▶ GRANT THORNTON LLP Firm's EIN ▶ _____
 Firm's address ▶ 75 STATE STREET 13TH FLOOR Phone no. (617) 723-7900
 Boston, MA 02109

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE UNIVERSITY EDUCATES TALENTED MEN AND WOMEN IN ENGINEERING, SCIENCE, MANAGEMENT, AND HUMANITIES IN PREPARATION FOR CAREERS OF PROFESSIONAL PRACTICE, CIVIC CONTRIBUTION, AND LEADERSHIP, FACILITATED BY ACTIVE LIFELONG LEARNING. (CONT. ON SCH O)

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 269,076,227 including grants of \$ 90,712,363) (Revenue \$ 305,953,845)
See Additional Data

4b (Code:) (Expenses \$ 29,089,132 including grants of \$ 2,472,505) (Revenue \$ 33,707,510)
See Additional Data

4c (Code:) (Expenses \$ 8,457,135 including grants of \$ 0) (Revenue \$ 6,095,768)
See Additional Data

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

4e Total program service expenses ▶ 306,622,494

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 23 through 38 regarding compensation, tax-exempt bonds, 501(c)(3) organizations, and other IRS filings.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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



Section A. Governing Body and Management

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include 1a (31), 1b (30), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 2 columns: Question ID, Question Text. Rows include 17 (States), 18 (Public inspection), 19 (Governing documents), 20 (Person with books and records).

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e	1,130,000		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	20,137,550		
	g Noncash contributions included in lines 1a - 1f: \$		1,957,841		
	h Total. Add lines 1a-1f		21,267,550		

Program Service Revenue			Business Code				
	2a TUITION AND FEES		611710	269,881,399	269,881,399	0	0
b SPONSORED RESEARCH		611710	33,707,510	33,707,510	0	0	0
c AUXILIARY OPERATIONS		611710	32,845,568	32,845,568	0	0	0
d OTHER OPERATING SOURCES		611710	5,302,852	5,302,852	0	0	0
e OTHER EDUCATIONAL OPERATIONS		611710	4,019,794	3,645,817	373,977	0	0
f All other program service revenue.							
g Total. Add lines 2a-2f			345,757,123				

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			6,978,649		563,833	6,414,816
	4 Income from investment of tax-exempt bond proceeds			0			
	5 Royalties			236,636			236,636
	6a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)	0	0				
	d Net rental income or (loss)			0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses	1,403,540					
	c Gain or (loss)	1,409,934					
	d Net gain or (loss)	-6,394		-6,394			-6,394
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a	0				
	b Less: direct expenses	b	0				
	c Net income or (loss) from fundraising events			0			
	9a Gross income from gaming activities. See Part IV, line 19	a	22,800				
b Less: direct expenses	b	3,074					
c Net income or (loss) from gaming activities			19,726			19,726	
10a Gross sales of inventory, less returns and allowances	a	0					
b Less: cost of goods sold	b	0					
c Net income or (loss) from sales of inventory			0				
Miscellaneous Revenue	Business Code						
11a LOSS ON INTEREST RATE AGREEMENTS	900099		-141,008			-141,008	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			-141,008				
12 Total revenue. See Instructions.			374,112,282	345,383,146	937,810	6,523,776	

Part IX Statement of Functional Expenses

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

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,398,279	2,398,279		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	89,521,222	89,521,222		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	1,265,367	1,265,367		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	5,264,921	1,098,919	2,817,052	1,348,950
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	126,467,724	97,439,406	25,732,269	3,296,049
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	10,505,537	7,902,438	2,218,394	384,705
9 Other employee benefits	16,506,544	10,867,258	4,732,855	906,431
10 Payroll taxes	7,981,621	6,003,907	1,685,433	292,281
11 Fees for services (non-employees):				
a Management	0			
b Legal	2,004,332	49,071	1,955,261	
c Accounting	282,305		282,305	
d Lobbying	291,896		291,896	
e Professional fundraising services. See Part IV, line 17	134,677			134,677
f Investment management fees	707,716		707,716	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	14,133,141	11,807,089	2,186,421	139,631
12 Advertising and promotion	1,358,776	1,074,846	267,248	16,682
13 Office expenses	3,449,999	1,846,339	1,351,377	252,283
14 Information technology	8,694,797	1,206,393	7,385,786	102,618
15 Royalties	0			
16 Occupancy	13,821,798	12,273,566	1,548,107	125
17 Travel	6,014,882	5,108,784	729,290	176,808
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	3,526,465	2,458,354	912,564	155,547
20 Interest	10,149,497	9,941,552	207,945	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	23,790,860	21,279,131	2,511,729	
23 Insurance	1,039,571	103,670	935,901	
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 LAB EQUIPMENT/OTHER SUPPLIES	12,672,771	12,080,587	576,237	15,947
b RESEARCH AND TRAINING	4,584,642	3,815,204	743,116	26,322
c REPAIRS AND MAINTENANCE	3,650,547	3,486,513	159,500	4,534
d BOOKS AND PERIODICALS	2,845,856	26,090	2,819,766	0
e All other expenses	5,602,109	3,568,509	1,961,518	72,082
25 Total functional expenses. Add lines 1 through 24e	378,667,852	306,622,494	64,719,686	7,325,672
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	65,569,817	2	39,645,946
	3 Pledges and grants receivable, net	11,768,589	3	18,507,761
	4 Accounts receivable, net	3,817,122	4	2,876,618
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	18,431,892	7	17,110,604
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	7,513,863	9	7,493,647
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	653,126,667		
	b Less: accumulated depreciation	282,588,696		
		347,652,130	10c	370,537,971
	11 Investments—publicly traded securities	247,264,373	11	255,706,101
	12 Investments—other securities. See Part IV, line 11	296,441,273	12	295,575,433
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
15 Other assets. See Part IV, line 11	18,671,598	15	17,438,999	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,017,130,657	16	1,024,893,080	
Liabilities	17 Accounts payable and accrued expenses	31,837,029	17	32,632,838
	18 Grants payable	0	18	0
	19 Deferred revenue	13,052,597	19	10,117,001
	20 Tax-exempt bond liabilities	215,082,689	20	211,930,727
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	4,035,278	23	4,587,830
	24 Unsecured notes and loans payable to unrelated third parties	61,978,901	24	61,631,410
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	30,018,217	25	31,272,646
	26 Total liabilities. Add lines 17 through 25	356,004,711	26	352,172,452
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	307,007,805	27	322,876,905
	28 Temporarily restricted net assets	134,606,544	28	128,975,726
	29 Permanently restricted net assets	219,511,597	29	220,867,997
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	661,125,946	33	672,720,628	
34 Total liabilities and net assets/fund balances	1,017,130,657	34	1,024,893,080	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	374,112,282
2	Total expenses (must equal Part IX, column (A), line 25)	2	378,667,852
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,555,570
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	661,125,946
5	Net unrealized gains (losses) on investments	5	18,717,194
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,566,942
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	672,720,628

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 04-2121659

Name: Worcester Polytechnic Institute

Form 990 (2018)

Form 990, Part III, Line 4a:

THE UNIVERSITY PROVIDES EDUCATION IN THE FIELDS OF SCIENCE, TECHNOLOGY, ENGINEERING AND MATHEMATICS TO APPROXIMATELY 4,800 UNDERGRADUATE AND 2,100 GRADUATE STUDENTS. IN ADDITION, HOUSING AND BOARD AUXILIARY SERVICES ARE PROVIDED FOR APPROXIMATELY 2,000 STUDENTS. DURING FISCAL YEAR 2019, THE UNIVERSITY AWARDED 1019 BACHELOR, 791 MASTER AND 60 PHD DEGREES. STUDENTS EMERGE FROM THE UNIVERSITY'S UNIQUE EXPERIENCE READY TO TAKE ON SOME OF THE MOST DIFFICULT CHALLENGES IN SCIENCE AND TECHNOLOGY. MORE IMPORTANTLY, THEY UNDERSTAND HOW THEIR WORK CAN TRULY IMPACT SOCIETY AND IMPROVE LIVES.

Form 990, Part III, Line 4b:

AT THE UNIVERSITY, 190 FACULTY AND POST DOC RESEARCHERS, AND 314 STUDENTS ARE ENGAGED IN CUTTING-EDGE RESEARCH ACROSS A BROAD RANGE OF DISCIPLINES. THE UNIVERSITY RECEIVES RESEARCH FUNDING FROM A VARIETY OF SOURCES, PRIMARILY FROM GOVERNMENTAL ORGANIZATIONS SUCH AS THE NATIONAL SCIENCE FOUNDATION, DEPARTMENT OF DEFENSE, NATIONAL INSTITUTE OF HEALTH AND OTHER FEDERAL AGENCIES. RESEARCH AT THE UNIVERSITY HAS A DECIDEDLY APPLIED FOCUS, WITH WORK FOCUSED ON PROBLEMS THAT ARE BOTH INTERESTING AND IMPORTANT. THE RESULT IS NEW KNOWLEDGE, NEW INNOVATIONS, AND TECHNOLOGICAL ADVANCES THAT ATTACK SOME OF THE MAJOR CHALLENGES OF OUR TIME.

Form 990, Part III, Line 4c:

THE UNIVERSITY'S CORPORATE AND PROFESSIONAL EDUCATION DIVISION PROVIDES TAILOR-MADE PROGRAMS TO APPROXIMATELY 568 STUDENTS, MAINLY AT CORPORATE STUDENT SITES, USING INDUSTRY EXPERTS AND DEDICATED PROGRAM SUPPORT STAFF. THIS PRACTICAL APPROACH ADDS VALUE BY PROVIDING CLIENTS WITH KNOWLEDGE AND SKILLS THAT CAN BE DIRECTLY APPLIED TO THEIR REAL-WORLD JOB CHALLENGES. ADDITIONALLY DURING FISCAL YEAR 2019, APPROXIMATELY 555 INDIVIDUALS PARTICIPATED IN ONE OR MORE PROFESSIONAL WORKSHOPS OR SHORT COURSES.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Laurie Leshin President	40.0 1.0	X		X				987,687	0	311,816
John Mollen Chairman	2.0 0.0	X		X				0	0	0
Andrew Aberdale Vice Chairman & Trustee	2.0 0.0	X		X				0	0	0
Joyce Kline Vice Chairman & Trustee	2.0 0.0	X		X				0	0	0
Joseph Adams Trustee	2.0 0.0	X						0	0	0
Michael Aspinwall Trustee	2.0 0.0	X						0	0	0
James Baum Trustee	2.0 0.0	X						0	0	0
Lorraine Bolsinger Trustee	2.0 0.0	X						0	0	0
Linwood Bradford Trustee	2.0 0.0	X						0	0	0
Michael Dolan Trustee	2.0 0.0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Henry Fitzgerald Trustee	2.0 0.0	X						0	0	0
William Fitzgerald Trustee	2.0 0.0	X						0	0	0
Marni Hall Trustee	2.0 0.0	X						0	0	0
Robert Hart Trustee	2.0 0.0	X						0	0	0
Jeremy Hitchcock Trustee	2.0 0.0	X						0	0	0
Debora Jackson Trustee	2.0 0.0	X						0	0	0
Stuart Kazin Trustee	2.0 0.0	X						0	0	0
Carl Kilmer Trustee	2.0 0.0	X						0	0	0
David Lapre Trustee	2.0 0.0	X						0	0	0
Francesca Maltese Trustee	2.0 0.0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Robert Martin Trustee	2.0 0.0	X						0	0	0
Erica Mason Trustee	2.0 0.0	X						0	0	0
Neil McDonough Trustee	2.0 0.0	X						0	0	0
Linda McGoldrick Trustee	2.0 0.0	X						0	0	0
Daniel Morgan Trustee	2.0 0.0	X						0	0	0
George Oliver Trustee	2.0 0.0	X						0	0	0
Mark O'Neil Trustee	2.0 0.0	X						0	0	0
Karen Tegan Padir Trustee	2.0 0.0	X						0	0	0
Mark Russell Trustee	2.0 0.0	X						0	0	0
Joan Bolduc Szkutak Trustee	2.0 0.0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dorothea Wong Trustee	2.0 0.0	X						0	0	0
Jeffrey Solomon TREASURER, EXECUTIVE VP & CFO	40.0 1.0			X				518,642	0	118,838
David Bunis SECRETARY & GENERAL COUNSEL	40.0 0.0			X				405,313	0	96,715
Patrick Hitchcock Assoc Treasurer & Controller	40.0 1.0			X				151,624	0	7,357
Kyle Siegel Asst. Secretary & Exec. Dir.	40.0 0.0			X				100,142	0	30,387
Bruce Bursten Provost, SVP, Acad Affairs	40.0 0.0				X			399,771	0	39,879
Stephen Flavin VP Academic & Corporate Dev	40.0 0.0				X			452,307	0	156,808
Kristin Tichenor SVP Enrollment Management	40.0 0.0				X			407,741	0	118,773
Amy Morton VP and Chief of Staff	40.0 0.0				X			225,466	0	71,660
Winston Soboyejo Interim Provost	40.0 0.0				X			281,193	0	65,137

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jean King Dean of Arts & Sciences	40.0 0.0					X		336,315	0	52,839
William McAvoy VP University Advancement	40.0 0.0					X		395,057	0	102,898
Karen Oates Prof Biology & Biotechnology	40.0 0.0					X		334,512	0	39,879
Michael Ginzberg Dean Foisie Business School	40.0 0.0					X		407,647	0	52,832
Diran Apelian Prof Mechanical Engineering	40.0 0.0					X		370,680	0	58,880
Stephanie Pasha Former AVP & Chief of Staff	40.0 0.0						X	137,769	0	23,887
Philip Clay VP Student Affairs	40.0 0.0						X	228,584	0	62,050
Michelle Jones-Johnson VP FOR TALENT DEVELOPMENT/CDO	40.0 0.0						X	254,231	0	78,311

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization
Worcester Polytechnic Institute

Employer identification number
04-2121659

Employer identification number
04-2121659

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	31,452,693	61,384,483	19,151,190	15,469,079	21,267,550	148,724,995
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge.. . . .						0
4 Total. Add lines 1 through 3	31,452,693	61,384,483	19,151,190	15,469,079	21,267,550	148,724,995
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						36,059,624
6 Public support. Subtract line 5 from line 4.						112,665,371

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4.	31,452,693	61,384,483	19,151,190	15,469,079	21,267,550	148,724,995
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,905,749	5,275,634	7,305,111	7,358,631	7,215,285	32,060,410
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	63,465	22,800	86,265
11 Total support. Add lines 7 through 10						180,871,670

12 Gross receipts from related activities, etc. (see instructions) **12** 1,527,275,725

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	62.290 %
15 Public support percentage for 2017 Schedule A, Part II, line 14	15	63.126 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—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 organization

b 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 supported organization

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . .						
6 Total. Add lines 1 through 5 . . .						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. . .						
c Add lines 7a and 7b. . .						
8 Public support. (Subtract line 7c from line 6.) . . .						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. . .						
c Add lines 10a and 10b. . .						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . . .						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
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>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

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

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018:			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
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. See instructions.			
6 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.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:

Software Version:

EIN: 04-2121659

Name: Worcester Polytechnic Institute

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

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018
Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

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

Name of the organization Worcester Polytechnic Institute	Employer identification number 04-2121659
---	--

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

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

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

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

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

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

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

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	291,896													
c	Total lobbying expenditures (add lines 1a and 1b)	291,896													
d	Other exempt purpose expenditures	377,668,238													
e	Total exempt purpose expenditures (add lines 1c and 1d)	377,960,134													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	209,405	225,347	224,007	291,896	950,655
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	0				0

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

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

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

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

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
SCHEDULE C, PART II-A, LINE 1B	LOBBYING EXPENDITURES ARE FOR THE PURPOSE OF IDENTIFYING FUNDING OPPORTUNITIES AT THE FEDERAL AND STATE LEVEL TO SUPPORT EDUCATIONAL AND RESEARCH PROGRAMS AND TO DEVELOP STRATEGIC RESEARCH PARTNERSHIPS WITH GOVERNMENT ORGANIZATIONS.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2018
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization
Worcester Polytechnic Institute

Employer identification number
04-2121659

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

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

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

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

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

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

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	500,270,617	484,527,764	453,173,354	419,308,857	416,207,100
b Contributions	9,366,879	6,005,130	6,870,914	54,754,960	16,935,708
c Net investment earnings, gains, and losses	21,649,079	33,375,177	48,215,959	-111,677	5,211,050
d Grants or scholarships	8,986,726	9,616,870	9,804,243	7,317,938	6,495,947
e Other expenditures for facilities and programs	13,778,495	14,020,584	13,928,220	13,460,848	12,549,054
f Administrative expenses				0	0
g End of year balance	508,521,354	500,270,617	484,527,764	453,173,354	419,308,857

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 39.300 %
 - b** Permanent endowment ▶ 39.300 %
 - c** Temporarily restricted endowment ▶ 21.400 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | | |
|--|---------------|----|
| | Yes | No |
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		9,880,920		9,880,920
b Buildings		493,900,460	206,937,014	286,963,446
c Leasehold improvements		18,818,965	7,542,856	11,276,109
d Equipment		106,092,384	68,108,826	37,983,558
e Other		24,433,938		24,433,938
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				370,537,971

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) EQUITY FUNDS	145,580,097	F
(B) FIXED INCOME FUNDS	55,681,499	F
(C) PRIVATE EQUITY FUNDS	49,142,542	F
(D) REAL ESTATE	44,964,939	F
(E) FIXED INCOME SECURITIES	206,356	F
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	295,575,433	

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
REFUNDABLE GOVERNMENT LOAN FUNDS	9,492,506
SPLIT INTEREST AGREEMENTS	7,860,798
INTEREST RATE AGREEMENTS	7,798,731
FUNDS HELD FOR OTHERS	4,289,255
ASSET RETIREMENT OBLIGATIONS	1,831,356
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	31,272,646

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

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

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

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

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

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

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

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 04-2121659

Name: Worcester Polytechnic Institute

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART III, LINE 1	DUE TO THE IMMATERIALITY OF THE UNIVERSITY'S COLLECTIONS OF ART OR HISTORICAL TREASURES, THESE ASSETS ARE NOT DISCLOSED IN THE FINANCIAL STATEMENTS.

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART III, LINE 4	THE UNIVERSITY HOLDS A CHARLES DICKENS COLLECTION, A BERNARD BRENNER SCULPTURE COLLECTION, A RARE BOOK AND MANUSCRIPT COLLECTION, AS WELL AS OTHER WORKS OF ART. THESE PIECES ARE USED BY THE FACULTY TO FURTHER THEIR RESEARCH AND CURRICULUM.

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	<p>THE INTENDED USE OF THE ENDOWMENT FUNDS IS TO SUPPORT THE PROGRAMS OF THE UNIVERSITY, INCLUDING SCHOLARSHIPS, FACULTY TEACHING AND RESEARCH, LIBRARY RESOURCES, AND MAINTENANCE. THE UNIVERSITY HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ITS ENDOWMENT AND SIMILAR FUNDS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING FOR ITS PROGRAMS. TO SATISFY ITS LONG-TERM RATE-OF-RETURN OBJECTIVES, THE UNIVERSITY RELIES ON A TOTAL RETURN APPROACH IN WHICH INVESTMENT RETURNS ARE ACHIEVED THROUGH BOTH CAPITAL APPRECIATION (REALIZED AND UNREALIZED GAINS) AND CURRENT YIELD. TO ACHIEVE ITS LONG-TERM OBJECTIVES WITHIN PRUDENT RISK PARAMETERS, THE UNIVERSITY TARGETS A DIVERSIFIED ASSET ALLOCATION. THE UNIVERSITY OBSERVES A SPENDING RULE WITH RESPECT TO TOTAL RETURN (INTEREST, DIVIDENDS, AND APPRECIATION) ON INVESTMENTS OF THE ENDOWMENTS AND SIMILAR FUNDS. UNDER THE SPENDING RULE, THE UNIVERSITY APPROPRIATED 4.7% OF ITS ENDOWMENT AND SIMILAR FUNDS' AVERAGE UNIT FAIR VALUE FOR THE PREVIOUS TWELVE QUARTERS, ONE YEAR REMOVED, FOR THE YEAR ENDED JUNE 30, 2019.</p>

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	THE UNIVERSITY IS GENERALLY EXEMPT FROM FEDERAL AND STATE INCOME TAXES. MANAGEMENT ANNUALLY REVIEWS FOR UNCERTAIN TAX POSITIONS ALONG WITH ANY RELATED INTEREST AND PENALTIES AND BELIEVES THAT THE UNIVERSITY HAS NO UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL ADVERSE EFFECT, INDIVIDUALLY OR IN THE AGGREGATE, UPON THE UNIVERSITY'S CONSOLIDATED STATEMENTS OF FINANCIAL POSITIONS, OR THE RELATED CONSOLIDATED STATEMENTS OF ACTIVITIES, OR CASH FLOWS.

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No. 1545-0047

2018

Open to Public Inspection

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

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990EZ for the latest instructions.**

Department of the Treasury

Name of the organization
Worcester Polytechnic Institute

Employer identification number

04-2121659

Part I

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

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

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	<p>THE UNIVERSITY DRAWS A SUBSTANTIAL PERCENTAGE OF ITS STUDENTS NATIONALLY AND MAKES ITS ANTI-DISCRIMINATION POLICY KNOWN TO ALL SEGMENTS OF THE GENERAL COMMUNITY IT SERVES BY INCLUDING A STATEMENT ON ITS WEBSITE, AND IN ALL BROCHURES AND CATALOGS DEALING WITH STUDENT ADMISSIONS, PROGRAMS, AND SCHOLARSHIPS. IT IS THE POLICY OF THE UNIVERSITY TO PROVIDE EACH QUALIFIED INDIVIDUAL - REGARDLESS OF RACE, SEX, AGE, COLOR, NATIONAL ORIGIN, RELIGION, GENETIC IDENTITY, DISABILITY, GENDER IDENTITY OR EXPRESSION, MARITAL OR PARENTAL STATUS, SEXUAL ORIENTATION, TRANSGENDER STATUS, VETERAN STATUS, OR ANY OTHER PROTECTED STATUS - THE OPPORTUNITY TO PARTICIPATE IN THE UNIVERSITY'S EDUCATIONAL AND EMPLOYMENT PROGRAMS AND ACTIVITIES IN A DISCRIMINATION AND HARASSMENT-FREE ENVIRONMENT, IN ACCORDANCE WITH STATE AND FEDERAL LAWS, INCLUDING TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, AND THE AGE DISCRIMINATION ACT OF 1975. FURTHERMORE, THE UNIVERSITY PROHIBITS AND WILL NOT TOLERATE UNLAWFUL DISCRIMINATION OR HARASSMENT. UNLAWFUL DISCRIMINATION OR HARASSMENT CONSISTS OF TREATING A PERSON DIFFERENTLY IN ANY UNIVERSITY PROGRAM OR ACTIVITY BASED ON THEIR RACE, SEX, AGE, COLOR, NATIONAL ORIGIN, RELIGION, GENETIC IDENTITY, DISABILITY, GENDER IDENTITY OR EXPRESSION, MARITAL OR PARENTAL STATUS, SEXUAL ORIENTATION, TRANSGENDER STATUS, VETERAN STATUS, OR ANY OTHER PROTECTED STATUS. THIS INCLUDES, FOR EXAMPLE, THE DISPLAY OR CIRCULATION OF WRITTEN OR ELECTRONIC MATERIALS OR PICTURES DEGRADING TO EITHER GENDER OR TO RACIAL, ETHNIC, OR RELIGIOUS GROUPS; AND VERBAL ABUSE OR INSULTS DIRECTED AT OR MADE IN THE PRESENCE OF MEMBERS OF A RACIAL, ETHNIC, OR MINORITY GROUP. THE UNIVERSITY PROHIBITS AND WILL NOT TOLERATE ANY FORM OF RETALIATION AGAINST PERSONS WHO HAVE COMPLAINED ABOUT, OR PARTICIPATED IN AN INVESTIGATION OF A COMPLAINT ABOUT, UNLAWFUL DISCRIMINATION OR HARASSMENT.</p>
SCHEDULE E, PART I, LINE 6	<p>THE UNIVERSITY RECEIVES FINANCIAL ASSISTANCE FROM THE U.S. GOVERNMENT IN THE FORM OF 34A TITLE IV AID.</p>

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization
Worcester Polytechnic Institute

Employer identification number
04-2121659

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

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
3a Sub-total		18			64,792,462
b Total from continuation sheets to Part I					119,502
c Totals (add lines 3a and 3b)		18			64,911,964

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	Research	67,527	WIRE	0		

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **1**
- 3 Enter total number of other organizations or entities **1**

Part IV Foreign Forms

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

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	PROCEDURE FOR MONITORING USE OF GRANTS TO INDIVIDUALS THE UNIVERSITY REQUIRES ALL STUDENTS SEEKING NEED-BASED FINANCIAL AID AND SCHOLARSHIPS TO COMPLETE A CSS PROFILE AND THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) FORM. THE UNIVERSITY'S FINANCIAL AID STAFF ARE TRAINED IN THE REQUIREMENTS OF AWARDING TITLE IV FUNDS TO STUDENTS AND ARE REQUIRED TO ADHERE TO THESE REQUIREMENTS. THE UNIVERSITY ALSO UNDERGOES AN INDEPENDENT Uniform Guidance Single Audit TO ENSURE COMPLIANCE WITH THESE REQUIREMENTS. schedule F, Part I, Line 3, Column (F) Foreign expenditures are separately identified in the Institute's books and records.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3	EUROPE (INCLUDING ICELAND AND GREENLAND) STUDENT PROJECTS IN ALBANIA, DENMARK, ENGLAND, FRANCE, GERMANY, GREECE, ICELAND, SWITZERLAND, AND ITALY FOCUS ON ENVIRONMENTAL, SOCIOECONOMIC, ARTISTIC, CULTURAL AND TECHNICAL CONCERNS SPECIFIC TO THE REGION. EAST ASIA AND THE PACIFIC STUDENT PROJECTS IN AUSTRALIA, CHINA, JAPAN, NEW ZEALAND AND THAILAND INVOLVE ADDRESSING PROBLEMS IMPORTANT TO THE LOCAL COMMUNITIES, INCLUDING SUSTAINABLE DEVELOPMENT, HEALTH AND HUMAN SERVICES AND ENVIRONMENTAL ISSUES. SUB-SAHARAN AFRICA STUDENT PROJECTS IN SOUTH AFRICA AND NAMIBIA FOCUS ON SUSTAINABLE DEVELOPMENT AND PUBLIC HEALTH. CENTRAL AMERICA AND THE CARIBBEAN STUDENT PROJECTS IN COSTA RICA AND PANAMA FOCUS ON ENVIRONMENTAL, SOCIOECONOMIC, CULTURAL AND TECHNICAL CONCERNS SPECIFIC TO THE REGION. MIDDLE EAST AND NORTH AFRICA STUDENT PROJECTS IN MOROCCO INVOLVE THE STUDY OF ISLAMIC HISTORY AND CULTURAL AND SOCIETAL ISSUES. STUDENT PROJECTS IN ISRAEL FOCUS ON TECHNOLOGICAL AND ENVIRONMENTAL ISSUES. STUDENT PROJECTS IN ARMENIA FOCUS ON TOURISM, CULTURAL ISSUES, AND PUBLIC POLICY. SOUTH AMERICA STUDENT PROJECTS IN PARAGUAY FOCUS ON POVERTY ELIMINATION EFFORTS. STUDENT PROJECTS IN ECUADOR FOCUS ON TRANSPORTATION, CULTURAL, SOCIOECONOMIC AND ENVIRONMENTAL ISSUES. RUSSIA AND NEIGHBORING STATES STUDENT PROJECTS IN RUSSIA HELP ADDRESS LOCAL PROBLEMS BY WORKING ON A VARIETY OF TECHNOLOGICAL, HUMAN RESOURCES, CULTURAL AND ENVIRONMENTAL PROJECTS. SOUTH ASIA STUDENT PROJECTS IN MANDI, INDIA INCLUDE COLLABORATIVE PROJECTS WITH THE INDIAN INSTITUTE OF TECHNOLOGY, A LEADER IN SCIENCE AND TECHNOLOGY EDUCATION, KNOWLEDGE, CREATION, AND INNOVATION FOR A SUSTAINABLE SOCIETY. OTHER PROJECTS INCLUDE ENGAGING COMMUNITY AGENCIES, LOCAL GOVERNMENTAL AGENCIES, AND NON-GOVERNMENTAL ORGANIZATIONS ON ISSUES PRIMARILY OF SUSTAINABILITY.

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART III	SCHOLARSHIPS TO PARTICIPATE IN STUDENT PROJECTS OUTSIDE OF THE UNITED STATES ARE CREDITED TO THE STUDENTS' ACCOUNTS.

Additional Data

Software ID:

Software Version:

EIN: 04-2121659

Name: Worcester Polytechnic Institute

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean		2	Program Services	See Part V	264,799
East Asia and the Pacific		8	Program Services	See Part V	719,413

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		3	Program Services	See Part V	974,496
Middle East and North Africa		1	Program Services	See Part V	211,254

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
Russia and the Newly Independent States		1	Program Services	See Part V	58,211
South America		2	Program Services	See Part V	158,633

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Program Services	See Part V	39,979
Sub-Saharan Africa		1	Program Services	See Part V	251,731

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		56,809,820
Europe (Including Iceland and Greenland)			Investments		4,142,304

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Program Services	see part V	15,957
Europe (Including Iceland and Greenland)			Grantmaking		458,770

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Grantmaking		285,020
Sub-Saharan Africa			Grantmaking		128,020

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Grantmaking		116,990
South America			Grantmaking		83,025

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Grantmaking		74,040
South Asia			Grantmaking		42,645

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
Russia and the Newly Independent States			Grantmaking		9,330
North America			Grantmaking		67,527

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)
Scholarship	Europe (Including Iceland and Greenland)	134	458,770	Credited			
Scholarship	East Asia and the Pacific	85	285,020	Credited			

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)
Scholarship	Sub-Saharan Africa	46	128,020	Credited			
Scholarship	Central America and the Caribbean	37	116,990	Credited			

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)
Scholarship	South America	18	83,025	Credited			
Scholarship	Middle East and North Africa	24	74,040	Credited			

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)
Scholarship	South Asia	17	42,645	Credited			
Scholarship	Russia and the Newly Independent States	3	9,330	Credited			

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization
Worcester Polytechnic Institute

Employer identification number
04-2121659

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| <p>a <input checked="" type="checkbox"/> Mail solicitations</p> <p>b <input checked="" type="checkbox"/> Internet and email solicitations</p> <p>c <input checked="" type="checkbox"/> Phone solicitations</p> <p>d <input checked="" type="checkbox"/> In-person solicitations</p> | <p>e <input checked="" type="checkbox"/> Solicitation of non-government grants</p> <p>f <input type="checkbox"/> Solicitation of government grants</p> <p>g <input type="checkbox"/> Special fundraising events</p> |
|---|--|
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
BentzWhaleyFlessner Assoc 7251 Ohms Lane Minneapolis, MN 55439	Campaign		No		134,677	
Total ▶					134,677	

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

MA

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

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		(event type)	(event type)	(total number)	Total events (add col. (a) through col. (c))
1	Gross receipts				
2	Less: Contributions				
3	Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1	Gross revenue		
Direct Expenses	2 Cash prizes			1,800	1,800
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses			1,274	1,274
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100.000 % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				3,074
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				19,726

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

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

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

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	100.000 %
b An outside facility	13b	%

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

Name ▶ Wendy Walsh Assistant Athletic Dir

Address ▶ 100 Institute Road
Worcester, MA 01609

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

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

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ Wendy Walsh

Gaming manager compensation ▶ \$ _____ 0

Description of services provided ▶ RESPONSIBLE FOR OVERSEEING RAFFLE

Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

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

Return Reference	Explanation
SCHEDULE G, PART III, LINE 16	WPI HELD RAFFLES ASSOCIATED WITH ATHLETIC EVENTS DURING THE YEAR. THE ASSISTANT ATHLETIC DIRECTOR IN CHARGE OF OVERSEEING THE RAFFLES AND COLLECTING MONEY. SHE IS NOT COMPENSATED SEPARATELY FOR THAT JOB RESPONSIBILITY; SHE UNDERTAKES THIS ROLE AS PART OF HER ORDINARY JOB.

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

Schedule I (Form 990)

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

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization Worcester Polytechnic Institute

Employer identification number

04-2121659

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

Table with 8 columns: (a) Name and address of organization, (b) EIN, (c) IRC section, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 19
3 Enter total number of other organizations listed in the line 1 table. 9

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	4428	89,521,222			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	PROCEDURE FOR MONITORING USE OF GRANTS TO ORGANIZATIONS THE UNIVERSITY ACTIVELY MONITORS ALL FEDERALLY SPONSORED RESEARCH GRANTS THROUGH BOTH ITS OFFICE OF SPONSORED PROGRAMS (OSP) AND ITS SPONSORED PROGRAMS ACCOUNTING OFFICE (SPA). OSP IS RESPONSIBLE FOR MONITORING PRE-AWARD ACTIVITIES AND CERTAIN POST-AWARD ACTIVITIES, SUCH AS HUMAN SUBJECT PARTICIPATION GUIDELINES, ANIMAL RESEARCH GUIDELINES AND EXPORT RESTRICTIONS, AMONG OTHERS. SPA MONITORS ALL POST-AWARD FINANCIAL ACTIVITY, INCLUDING ALLOWABILITY OF COSTS AND PREPARATION AND SUBMISSION OF FEDERAL AGENCY REPORTS ON GRANTS. PROCEDURE FOR MONITORING USE OF GRANTS TO INDIVIDUALS THE UNIVERSITY REQUIRES ALL STUDENTS SEEKING NEED-BASED FINANCIAL AID AND SCHOLARSHIPS TO COMPLETE THE CSS PROFILE AND THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) FORM. THE UNIVERSITY'S FINANCIAL AID STAFF ARE TRAINED IN THE REQUIREMENTS OF AWARDING TITLE IV FUNDS TO STUDENTS AND ARE REQUIRED TO ADHERE TO THESE REQUIREMENTS. THE UNIVERSITY ALSO UNDERGOES AN INDEPENDENT Uniform Guidance Single Audit TO ENSURE COMPLIANCE WITH THESE REQUIREMENTS.

Additional Data

Software ID:
Software Version:
EIN: 04-2121659
Name: Worcester Polytechnic Institute

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A123 Systems LLC 39000 Seven Mile Road Livonia, MI 48152	61-1247430		75,483	0			Research
Acoustic MedSystems Inc 208 Burwash Ave Savoy, IL 61874	37-1365835		195,682	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Albany Medical Center 47 New Scotland Avenue Albany, NY 12208	14-1641730	501(c)(3)	56,201	0			Research
ASSISTments Foundation 100 Grove St ste 117 Worcester, MA 01605	84-4228740	501(c)(3)	72,050	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Battery Resources 54 Rockdale Street Worcester, MA 01606	82-2222893		49,953	0			Research
California Baptist University 8432 Magnolia Ave Riverside, CA 92504	95-1890710	501(c)(3)	17,728	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
College of the Holy Cross 1 College Street Worcester, MA 01610	04-2103558	501(c)(3)	47,893	0			Research
Curators of the University of Missouri 118 University Hall Columbia, MO 65211	43-6003859	Gov't	16,354	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Dartmouth College 11 Rope Ferry Road 6210 Hanover, NH 03755	02-0222111	501(c)(3)	7,424	0			Research
Energy Research Company 400 Leland Avenue Plainfield, NJ 07062	22-3329891		10,303	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Framingham State University 100 State Street Framingham, MA 01701	04-6002284	Gov't	19,443	0			education
General Electric Company 5 Necco Street Boston, MA 02210	14-0689340		95,172	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
John Jay College of Criminal Justice 524 W 59th Street New York, NY 10019	13-1988190	501(c)(3)	25,799	0			Research
Lesley University 29 Everett Street Cambridge, MA 02138	04-2103589	501(c)(3)	46,114	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Massachusetts Materials Technologies 167 Prospect Street Waltham, MA 02453	46-5654253		22,940	0			Research
NJ Center for Teaching & Learning 115 Franklin Turnpike 203 Mahwah, NJ 07430	77-0667571	501(c)(3)	14,400	0			education

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pennsylvania University 408 Old Main University Park, PA 16802	24-6000376	Gov't	128,615	0			Research
Regents of the Univ of Calif Irvine 111 FRANKLIN ST 6TH FL OAKLAND, CA 94607	95-2226406	501(c)(3)	278,863	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Simbex 10 Water St Ste 410 Lebanon, NH 03766	58-2551796		13,834	0			Research
Teaching with Data LLC 20 Hapgood Way Shrewsbury, MA 01545	46-3518829		92,941	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Rector and Visitors Univ of Virginia 210 Sprigg Ln Charlottesville, VA 22903	54-6001796	501(c)(3)	8,943	0			Research
University of Connecticut Health Center 263 Farmington Ave Farmington, CT 06030	06-6000798	501(c)(3)	124,575	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Indiana 107 S Indiana Ave Bloomington, IN 47405	35-6001673	Gov't	274,937	0			Research
Univ of Louisville Research Foundation 300 E Market St 300 Louisville, KY 40202	61-1029626	501(c)(3)	64,679	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Mass Medical School 55 Lake Ave North Worcester, MA 01655	04-3167352	Gov't	121,933	0			Research
University of Massachusetts Amherst 100 Venture Way Hadley, MA 01035	04-3167352	Gov't	477,276	0			Research

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Westat Inc 20 University Road Cambridge, MA 02138	84-0529566		18,275	0			Research
Western Washington University 516 High Street Bellingham, WA 98228	91-6001089	Gov't	16,496	0			Research

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2018
Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Worcester Polytechnic Institute

Employer identification number
04-2121659

Part I Questions Regarding Compensation

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

Part III Supplemental Information

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A	THE UNIVERSITY HAS PROVIDED THESE BENEFITS PER WRITTEN POLICIES AFTER FULL SUBSTANTIATION OF THE ITEMS. THE FOLLOWING AMOUNTS ARE NOT INCLUDED IN COMPENSATION TAXABLE TO THE EMPLOYEE: LAURIE LESHIN: THE PRESIDENT MAY FLY FIRST CLASS OR BUSINESS CLASS FOR TRAVEL IN EXCESS OF 3 HOURS. COMPANION TRAVEL IS ALLOWED FOR BONA FIDE BUSINESS PURPOSES INCLUDING DEVELOPMENT EVENTS OR UNIVERSITY RELATED ACTIVITIES. THE UNIVERSITY PROVIDES HOUSING ON CAMPUS AS A CONDITION OF HER EMPLOYMENT AND FOR THE CONVENIENCE OF THE UNIVERSITY, INCLUDING HOUSEKEEPING TO MAINTAIN THE APPEARANCE OF THE RESIDENCE FOR UNIVERSITY FUNCTIONS.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4	LINE 4A - THE PRESIDENT'S EMPLOYMENT CONTRACT INCLUDES A SEVERANCE PROVISION THAT PROVIDES TWELVE MONTHS OF BASE SALARY, PLUS A PRORATED PERFORMANCE INCENTIVE, SUBJECT TO THE RECOMMENDATION OF THE LEADERSHIP DEVELOPMENT AND EXECUTIVE COMPENSATION COMMITTEE, FOR THE YEAR IN WHICH TERMINATION OCCURS. LINE 4B - THE FOLLOWING EXCESS RETIREMENT CONTRIBUTIONS (REPORTED IN SCHEDULE J, PART II, COLUMN (C) WERE EARNED IN CALENDAR YEAR 2018 AND SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE UNTIL 6/30/21: (A) JEFFREY SOLOMON: \$17,820; (B) STEPHEN FLAVIN: \$12,430; (C) KRISTIN TICHENOR: \$7,700 (D) WILLIAM MCAVOY: \$7,260; (E) LAURIE LESHIN \$55,000; AND (F) DAVID BUNIS: \$13,970.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 7	THE COMPENSATION COMMITTEE OF THE UNIVERSITY'S BOARD OF TRUSTEES HAS A PAY-FOR-PERFORMANCE COMPENSATION PHILOSOPHY IN DETERMINING EXECUTIVE COMPENSATION. A PLAN THAT IS PART OF THE PHILOSOPHY IS THE "VP RETENTION PLAN". EACH YEAR, A VICE PRESIDENT MAY EARN UP TO 12.5% OF SALARY AND EXCESS RETIREMENT CONTRIBUTIONS, SUBJECT TO A THREE YEAR RISK OF FORFEITURE. THESE AMOUNTS ARE ALL NON-FIXED PAYMENTS. VP INCENTIVES EARNED DURING CALENDAR YEAR 2018 ARE INCLUDED IN DEFERRED COMPENSATION AS FOLLOWS: (A) JEFFREY SOLOMON: \$43,800; (B) STEPHEN FLAVIN: 38,800; (C) KRISTIN TICHENOR: \$10,350; (D) WILLIAM MCAVOY: \$40,920; (E) PHILIP CLAY: \$27,000; (F) LAURIE LESHIN: \$96,875; (G) AMY MORTON: \$27,000; (H) MICHELLE JONES-JOHNSON: \$25,500; (I) AND DAVID BUNIS: \$48,240 . ANY ADDITIONAL AMOUNTS FOR EXCESS RETIREMENT CONTRIBUTIONS ARE DISCLOSED ON SCHEDULE J, PART I, LINE 4B. Senior leadership is eligible for performance-based pay. The payment of a performance bonus is dependent upon achievement of defined goals and objectives, approved by the President and Compensation Committee. The President may receive a performance-based incentive subject to the terms and provisions listed in her contract.

2019 Schedule J (Form 990) 2018

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

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

2018

Open to Public Inspection

▶ 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.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
Worcester Polytechnic Institute

Employer identification number

04-2121659

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	Massachusetts Development Finance Agency	04-3431814	57583RTX3	04-09-2008	48,995,000	Refunding of series 2003&2005		X		X		X
B	Massachusetts Development Finance Agency	04-3431814	57583UST6	10-30-2012	43,369,451	const. of dorm/other renovations		X		X		X
C	Massachusetts Development Finance Agency	04-3431814		08-28-2014	4,622,000	RENOVATIONS OF EXISTING FACILITIES		X		X		X
D	Massachusetts Development Finance Agency	04-3431814	57584XPK1	06-21-2016	49,030,491	REFUNDING OF SERIES 2007 BONDS		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	8,510,000		0		742,300		0	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	48,995,000		43,372,717		4,622,000		49,030,491	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	0		1,360,189		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	325,962		530,536		61,330		471,314	
8	Credit enhancement from proceeds	19,038		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	0		41,481,992		4,560,670		0	
11	Other spent proceeds	48,650,000		0		0		48,559,177	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2008		2015		2016		2016	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X			X		X		X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X			X		X	X	

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X			X		X	X	
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X						X	
c Are there any research agreements that may result in private business use of bond-financed property?	X			X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X							
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %		0 %		0 %		0.300 %
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6 Total of lines 4 and 5								0.300 %
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X		X		X
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X	X		X	
b Exception to rebate?	X			X		X		X
c No rebate due?		X	X			X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X			X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X			X		X		X
b Name of provider	Deutsche & Barclays		0		0		0	
c Term of hedge	20 %							
d Was the hedge superintegrated?								
e Was the hedge terminated?		X						

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider	0		0		0		0	
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

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

Return Reference	Explanation
SCHEDULE K, PART I, COLUMN F	BOND ISSUE A (SERIES 2008A) WAS USED TO REFUND SERIES 2003 AND 2005 WHICH WERE ISSUED JULY 20, 2003 AND AUGUST 3, 2005, RESPECTIVELY. BOND ISSUE D (SERIES 2016) WAS USED TO REFUND SERIES 2007 WHICH WAS ISSUED JUNE 28, 2007. Bond Issue A (Series 2017A) was used to refund a portion of Series 2007, which was issued June 28, 2007, that was allocated to refund Series 1997-I, which was issued on March 20, 1997. Bond Issue B (Series 2017B) was used to refund Series 2010 which was issued January 27, 2010.

Return Reference	Explanation
SCHEDULE K, PART II, LINE 3	FOR BOND ISSUE B (SERIES 2012), TOTAL PROCEEDS OF ISSUE INCLUDE INVESTMENT EARNINGS OF \$3,267. For Bond Issue B (Series 2017B), total proceeds of issue include investment earnings of 1,345,180.

Return Reference	Explanation
SCHEDULE K, PART IV, LINE 2C	FOR BOND ISSUE A (SERIES 2008A), A REBATE CALCULATION WAS PERFORMED ON 8/31/18.

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Worcester Polytechnic Institute

Employer identification number 04-2121659

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

Table with 4 main columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958.
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

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

Table with 9 main columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

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

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

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

Return Reference	Explanation
SCHEDULE L, PART III, LINE 1	On occasion, the college may grant merit scholarships to students who are the children of trustees. The college ensures the grant(s) are awarded based on merit to eligible students, who meet the required academic standing requirements. The applicable trustee does not have any influence over the decision making process for awarding the scholarship.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

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 Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Worcester Polytechnic Institute

Employer identification number
04-2121659

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	34	1,411,423	Fair Market Value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests	X	3	351,833	Fair Market Value
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (supplies and Equipment)	X	27	194,585	Fair Market Value
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

	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 purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.**

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

Return Reference	Explanation
Schedule M, Part I	The number of contributions is disclosed in Column B.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Name of the organization
Worcester Polytechnic Institute

Employer identification number

04-2121659

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 20	THE UNIVERSITY IS FILING FORM 990 BASED ON ITS CONSOLIDATED FINANCIAL STATEMENT NUMBERS. UNIVERSITY FEELS THIS IS MORE TRANSPARENT TO THE PUBLIC AND GIVES MORE ACCURATE INFORMATION ON ITS OPERATIONS AS OPPOSED TO CARVING OUT ITS SUBSIDIARY INFORMATION. WHILE INCLUDED ON THIS 990, THE ACTIVITY OF WASHBURN PARK INC., A SEPARATE 501(C)(3) ORGANIZATION WHICH ALSO FILED FORM 990 FOR THE YEAR ENDED JUNE 30, 2019. FOR THE FISCAL YEAR ENDED JUNE 30, 2019, WASHBURN PARK INC HAD NET ASSETS OF \$30,932,723; REVENUE OF \$848,703; AND EXPENSES OF \$2,480,217.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1 (CONTINUED)	THIS EDUCATIONAL PROCESS IS TRUE TO THE FOUNDERS' DIRECTIVE TO CREATE, TO DISCOVER, AND TO CONVEY KNOWLEDGE AT THE FRONTIERS OF ACADEMIC INQUIRY FOR THE BETTERMENT OF SOCIETY. KNOWLEDGE IS CREATED AND DISCOVERED IN THE SCHOLARLY ACTIVITIES OF FACULTY AND STUDENTS RANGING ACROSS EDUCATIONAL METHODOLOGY, PROFESSIONAL PRACTICE, AND BASIC RESEARCH. KNOWLEDGE IS CONVEYED THROUGH SCHOLARLY PUBLICATION AND INSTRUCTION. (HTTP://WWW.WPI.EDU/ABOUT/MISSION.HTML) FORM 990, PART V, LINE 1A: THE 6,836 REPORTED ON THIS LINE includes THE FOLLOWING: 1098-T'S: 6,130 1099 MISC: 700 1099-K's: 6

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PREPARED BY TAX ADVISORS FROM A NATIONAL ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S MANAGEMENT. MANAGEMENT REVIEWS THE COMPLETED FORM 990 WITH THE TAX ADVISORS AND THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES. AFTER APPROVAL BY THE AUDIT COMMITTEE, MANAGEMENT PROVIDES THE FORM TO ALL TRUSTEES FOR REVIEW PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>AS PART OF THE UNIVERSITY'S CONFLICT OF INTEREST POLICY, ALL UNIVERSITY TRUSTEES, OFFICERS, AND KEY EMPLOYEES (AS DEFINED UNDER IRS RULES) ARE REQUIRED TO SUBMIT ANNUALLY A CONFLICT OF INTEREST DISCLOSURE STATEMENT, IN WHICH THEY AFFIRM THAT THEY: (A) HAVE RECEIVED A COPY OF THE UNIVERSITY CONFLICT OF INTEREST POLICY; (B) HAVE READ AND UNDERSTOOD THE POLICY; (C) AGREE TO COMPLY WITH THE POLICY AND; (D) UNDERSTAND THAT THE UNIVERSITY, AS A TAX-EXEMPT ORGANIZATION, MUST RESTRICT ITS ACTIVITIES PRIMARILY TO THOSE FOR WHICH ITS TAX-EXEMPT STATUS WAS GRANTED. ADDITIONALLY, AS PART OF THE ANNUAL DISCLOSURE STATEMENT PROCESS, TRUSTEES, OFFICERS AND KEY EMPLOYEES OF THE UNIVERSITY ARE ASKED TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST AND ANY SIGNIFICANT FINANCIAL INTEREST WITH THE UNIVERSITY OR ANY UNIVERSITY-RELATED ENTITY. ALL ANNUAL DISCLOSURE STATEMENTS ARE SUBMITTED TO THE OFFICE OF THE GENERAL COUNSEL, WHICH REVIEWS THEM, CONSOLIDATES THE COMMENTS AND PRESENTS A REPORT TO THE AUDIT COMMITTEE. UPON RECEIPT OF THE REPORT, THE AUDIT COMMITTEE REVIEWS THE FINDINGS AND TAKES ANY NECESSARY AND APPROPRIATE ACTION. THE AUDIT COMMITTEE THEN REPORTS TO THE BOARD OF TRUSTEES ON THE FINDINGS AND ANY ACTIONS TAKEN BY THE COMMITTEE. ANY TRUSTEE WITH A CONFLICT OF INTEREST RECUSES HIMSELF OR HERSELF FROM ANY BOARD OR COMMITTEE DECISIONS RELATED TO THAT CONFLICT.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING COMPENSATION FOR THE UNIVERSITY'S PRESIDENT AND OTHER TOP MANAGEMENT IS MODELED AFTER THE REQUIREMENTS IN FEDERAL REGULATIONS 53.4958-6(A), REBUTTABLE PRESUMPTION THAT A TRANSACTION IS NOT AN EXCESS BENEFIT TRANSACTION, TO ESTABLISH THE PRESUMPTION OF REASONABLE COMPENSATION. COMPENSATION IS REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES COMPRISED OF INDEPENDENT PERSONS. BY ENGAGING AN INDEPENDENT COMPENSATION CONSULTANT, THE COMMITTEE CONSIDERS COMPARABLE MARKET DATA FROM PUBLISHED SURVEYS AND FEDERAL FORM 990S OF COMPARABLE ORGANIZATIONS IN EVALUATING THE COMPENSATION FOR EACH INDIVIDUAL. THE COMMITTEE CONDUCTS A REVIEW OF THIS COMPARABILITY DATA, SETS COMPENSATION WITHIN A RANGE OF COMPARABLE ORGANIZATIONS, AND DOCUMENTS ITS DELIBERATION AND DISCUSSION IN MINUTES THAT ARE RETAINED WITH THE OTHER GOVERNANCE MATERIALS OF THE UNIVERSITY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE UNIVERSITY MAINTAINS COPIES OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ON ITS WEBSITE (WWW.WPI.EDU). Form 990, Part VII, Section A PHILIP CLAY AND MICHELLE JONES-JOHNSON WERE REPORTED AS KEY EMPLOYEES ON THE FORM 990 FOR TAX YEAR ENDED JUNE 30, 2018. THESE INDIVIDUALS continue to be EMPLOYEES OF WPI, HOWEVER THESE POSITIONS NO LONGER MEET THE KEY EMPLOYEE DEFINITION FOR TAX YEAR ENDED JUNE 30, 2019. THEREFORE, THEY ARE REPORTED AS FORMER KEY EMPLOYEES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	NET UNREALIZED GAIN ON BENEFICIAL INTEREST IN TRUSTS \$354,170 CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -\$231,366 NET UNREALIZED GAIN ON SWAPS -\$2,689,746 _____ _____ TOTAL -\$2,566,942

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2018

**Open to Public
Inspection**

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Worcester Polytechnic Institute

Employer identification number

04-2121659

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Gateway Park LLC 100 Institute Road Worcester, MA 01609 04-3494779	Real Est. Dev	MA	618,572	8,590,000	WPI
(2) Lancaster Island LLC 100 Institute Road Worcester, MA 01609 00-1108846	Real Est. Dev	MA	0	0	Washburn Par
(3) Sagamore Grove LLC 101 Institute Road Worcester, MA 01610 00-1283201	Real Est.	MA	0	2,731,965	Washburn Par

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) Washburn Park Inc 100 Institute Road Worcester, MA 01609 27-1189816	Infrastructur	MA	501(c)(3)	Line 10	WPI	Yes	
(2) Assistments Foundation 100 Grove St ste 117 worcester, MA 01605 84-4228740	Education	MA	501(c)(3)	12, Type 1	WPI	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) Charitable Remainder Trusts (29) 100 Institute Road Worcester, MA 01609	CHARITABLE TRUSTS	MA	NA	Trust				Yes	

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WASHBURN PARK INC	D	9,985,305	COST
(2) WASHBURN PARK INC	k	450,636	FMV

Part VII **Supplemental Information**

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

Return Reference	Explanation