

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
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

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

C Name of organization
DREXEL UNIVERSITY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
3201 ARCH STREET NO 420

City or town, state or province, country, and ZIP or foreign postal code
PHILADELPHIA, PA 191042875

D Employer identification number
23-1352630

E Telephone number
(215) 895-2000

G Gross receipts \$ 1,459,517,679

F Name and address of principal officer:
JOHN A FRY
3141 CHESTNUT ST
PHILADELPHIA, PA 19104

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.DREXEL.EDU

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1894

M State of legal domicile: PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
INTEGRATED ACADEMIC OFFERINGS ENHANCED BY TECHNOLOGY, COOPERATIVE EDUCATION AND CLINICAL PRACTICE

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)	52
4 Number of independent voting members of the governing body (Part VI, line 1b)	49
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	13,307
6 Total number of volunteers (estimate if necessary)	2,095
7a Total unrelated business revenue from Part VIII, column (C), line 12	2,986,151
7b Net unrelated business taxable income from Form 990-T, line 39	999,916

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	179,004,281	183,627,688
9 Program service revenue (Part VIII, line 2g)	1,120,624,186	1,071,393,808
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,946,893	55,221,476
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,313,939	19,279,571
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,350,889,299	1,329,522,543
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	413,995,077	423,762,572
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)	619,086,394	572,513,195
16a Professional fundraising fees (Part IX, column (A), line 11e)	243,798	197,566
b Total fundraising expenses (Part IX, column (D), line 25) ▶15,207,095		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	397,563,068	328,029,147
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,430,888,337	1,324,502,480
19 Revenue less expenses. Subtract line 18 from line 12	-79,999,038	5,020,063
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	2,024,922,675	2,261,315,252
21 Total liabilities (Part X, line 26)	831,642,005	1,076,781,151
22 Net assets or fund balances. Subtract line 21 from line 20	1,193,280,670	1,184,534,101

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 2021-05-17

HELEN Y BOWMAN EXECUTIVE VP, TREASURER & COO Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no.	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

DREXEL UNIVERSITY FULFILLS ITS FOUNDER'S VISION OF PREPARING EACH NEW GENERATION OF STUDENTS FOR PRODUCTIVE PROFESSIONAL AND CIVIC LIVES WHILE ALSO FOCUSING ITS COLLECTIVE EXPERTISE ON SOLVING SOCIETY'S GREATEST PROBLEMS. DREXEL IS AN ACADEMICALLY COMPREHENSIVE AND GLOBALLY ENGAGED URBAN RESEARCH UNIVERSITY, DEDICATED TO ADVANCING KNOWLEDGE AND SOCIETY AND TO PROVIDING EVERY STUDENT WITH A VALUABLE, RIGOROUS, EXPERIENTIAL, TECHNOLOGY-INFUSED EDUCATION, ENRICHED BY THE NATION'S PREMIER CO-OPERATIVE EDUCATION PROGRAM.

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 \$ 929,029,287 including grants of \$ 407,675,510) (Revenue \$ 1,029,848,091)

See Additional Data

4b (Code:) (Expenses \$ 150,622,950 including grants of \$ 16,087,062) (Revenue \$ 34,008,660)

See Additional Data

4c (Code:) (Expenses \$ 78,464,037 including grants of \$ 0) (Revenue \$ 20,541,336)

See Additional Data

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

4e Total program service expenses ▶ 1,158,116,274

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows include questions 22 through 38 regarding organizational reporting, compensation, and tax-exempt status.

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 [checked]

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 gaming winnings.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<table border="1"> <tr> <td style="width: 10%;">2a</td> <td style="width: 70%;"></td> <td style="width: 20%; text-align: right;">13,307</td> </tr> </table>	2a		13,307			
2a		13,307					
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	Yes			
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			3b	Yes			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes			
b If "Yes," enter the name of the foreign country: ▶ EK , CM See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No		
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b				
7 Organizations that may receive deductible contributions under section 170(c).							
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes			
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No		
d If "Yes," indicate the number of Forms 8282 filed during the year	<table border="1"> <tr> <td style="width: 10%;">7d</td> <td style="width: 70%;"></td> </tr> </table>	7d					
7d							
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h				
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?							
8			8				
9 Sponsoring organizations maintaining donor advised funds.							
a Did the sponsoring organization make any taxable distributions under section 4966?			9a				
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b				
10 Section 501(c)(7) organizations. Enter:							
a Initiation fees and capital contributions included on Part VIII, line 12	<table border="1"> <tr> <td style="width: 10%;">10a</td> <td style="width: 70%;"></td> </tr> </table>	10a					
10a							
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<table border="1"> <tr> <td style="width: 10%;">10b</td> <td style="width: 70%;"></td> </tr> </table>	10b					
10b							
11 Section 501(c)(12) organizations. Enter:							
a Gross income from members or shareholders	<table border="1"> <tr> <td style="width: 10%;">11a</td> <td style="width: 70%;"></td> </tr> </table>	11a					
11a							
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<table border="1"> <tr> <td style="width: 10%;">11b</td> <td style="width: 70%;"></td> </tr> </table>	11b					
11b							
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?							
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<table border="1"> <tr> <td style="width: 10%;">12b</td> <td style="width: 70%;"></td> </tr> </table>	12b					
12b							
13 Section 501(c)(29) qualified nonprofit health insurance issuers.							
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<table border="1"> <tr> <td style="width: 10%;">13b</td> <td style="width: 70%;"></td> </tr> </table>	13b					
13b							
c Enter the amount of reserves on hand	<table border="1"> <tr> <td style="width: 10%;">13c</td> <td style="width: 70%;"></td> </tr> </table>	13c					
13c							
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		No		
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>			14b				
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			15	Yes			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16		No		

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, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management control, and governance decisions.

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

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, written policies, conflict of interest, whistleblower, document retention, and compensation.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
See Additional Data Table										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

Summary rows for Section A: 1b Sub-Total, 1c Total from continuation sheets, 1d Total (add lines 1b and 1c).

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1,222

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Lists contractors like ARAMARK SERVICES INC and MJ SETTELEN CONSTRUCTION LLC.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 209

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 16,572			
	b Membership dues	1b			
	c Fundraising events	1c 160,238			
	d Related organizations	1d 30,786,250			
	e Government grants (contributions)	1e 106,785,788			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 45,878,840			
	g Noncash contributions included in lines 1a - 1f:\$	1g 1,499,292			
	h Total. Add lines 1a-1f		183,627,688		

Program Service Revenue			Business Code			
	2a TUITION AND FEES		611310	1,002,010,827	1,002,010,827	
b NON-DIRECT PUB SUPPORT		541700	36,541,364	36,541,364		
c PATIENT CARE		621110	20,295,000	20,295,000		
d AUXILIARY ENTERPRISES		611710	12,393,031	12,393,031		
e OTHER PROGRAM SERVICES		611710	153,586	153,586		
f All other program service revenue.						
g Total. Add lines 2a-2f.			1,071,393,808			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			23,103,035			23,103,035		
	4 Income from investment of tax-exempt bond proceeds								
	5 Royalties			250,644			250,644		
	6a Gross rents	6a	(i) Real	(ii) Personal					
			3,942,710						
			b Less: rental expenses	6b	827,512				
			c Rental income or (loss)	6c	3,115,198				
	d Net rental income or (loss)				3,115,198			3,115,198	
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other					
			161,150,000						
			b Less: cost or other basis and sales expenses	7b	128,375,276	656,283			
			c Gain or (loss)	7c	32,774,724	-656,283			
	d Net gain or (loss)				32,118,441			32,118,441	
	8a Gross income from fundraising events (not including \$ 160,238 of contributions reported on line 1c). See Part IV, line 18	8a							
			b Less: direct expenses	8b	59,364	136,065			
			c Net income or (loss) from fundraising events				-76,701		-76,701
	9a Gross income from gaming activities. See Part IV, line 19	9a							
			b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities								
	10a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold			10b						
c Net income or (loss) from sales of inventory									
Miscellaneous Revenue	Business Code								
11a MISCELLANEOUS REVENUE	900099		15,032,614	13,004,279	2,028,335				
b APPLICATION SERVICE PR	541519		1,610,769		1,610,769				
c ADVERTISING REVENUE	541840		3,330		3,330				
d All other revenue			-656,283		-656,283				
e Total. Add lines 11a-11d			15,990,430						
12 Total revenue. See instructions			1,329,522,543	1,084,398,087	2,986,151		58,510,617		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	14,299,420	14,299,420		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	407,529,610	407,529,610		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	1,933,542	1,933,542		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	8,371,971	2,407,672	4,897,233	1,067,066
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	445,846,519	384,226,973	53,078,453	8,541,093
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	33,721,142	29,000,007	4,056,625	664,510
9 Other employee benefits	54,822,205	45,766,285	7,964,178	1,091,742
10 Payroll taxes	29,751,358	25,357,322	3,775,095	618,941
11 Fees for services (non-employees):				
a Management	1,083,685	1,083,685		
b Legal	6,041,555	4,345,005	1,696,550	
c Accounting	1,704,701		1,704,701	
d Lobbying	755,651	644,745	105,105	5,801
e Professional fundraising services. See Part IV, line 17	197,566			197,566
f Investment management fees	3,712,549		3,712,549	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	56,601,953	49,461,804	6,497,769	642,380
12 Advertising and promotion	11,894,855	11,756,386	127,051	11,418
13 Office expenses	34,039,393	30,324,617	3,274,816	439,960
14 Information technology	27,076,138	23,188,418	3,167,770	719,950
15 Royalties	1,140,923	1,140,923		
16 Occupancy	66,272,465	28,892,672	37,379,793	
17 Travel	8,173,062	7,540,212	329,544	303,306
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,764,032	2,973,688	468,411	321,933
20 Interest	16,147,189	14,547,597	1,599,592	
21 Payments to affiliates	3,891,469	297,641	3,588,957	4,871
22 Depreciation, depletion, and amortization	56,258,353	50,471,223	5,787,130	
23 Insurance	16,473,516	12,576,233	3,607,514	289,769
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 BAD DEBT EXPENSE	4,779,215	4,779,215		
b PROFESSIONAL MEMBERSHIP	2,050,268	1,372,870	630,734	46,664
c PARTICIPANT EXPENSE	1,747,357	1,696,590	50,767	
d SPONSORSHIPS	794,020	255,393	522,177	16,450
e All other expenses	3,626,798	246,526	3,156,597	223,675
25 Total functional expenses. Add lines 1 through 24e	1,324,502,480	1,158,116,274	151,179,111	15,207,095
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	90,409	1	85,891
	2 Savings and temporary cash investments	39,542,759	2	76,718,181
	3 Pledges and grants receivable, net	126,448,645	3	138,092,605
	4 Accounts receivable, net	64,758,983	4	95,193,174
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	9,144,742	9	6,202,595
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,535,278,023		
	b Less: accumulated depreciation	10b 617,293,563	907,727,733	10c 917,984,460
	11 Investments—publicly traded securities	441,722,277	11	448,748,560
	12 Investments—other securities. See Part IV, line 11	385,703,000	12	340,220,000
	13 Investments—program-related. See Part IV, line 11	23,401,735	13	18,473,380
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	26,382,392	15	219,596,406
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,024,922,675	16	2,261,315,252	
Liabilities	17 Accounts payable and accrued expenses	217,633,510	17	180,987,736
	18 Grants payable		18	
	19 Deferred revenue	123,333,697	19	144,734,522
	20 Tax-exempt bond liabilities	425,986,669	20	514,862,441
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	64,688,129	25	236,196,452
	26 Total liabilities. Add lines 17 through 25	831,642,005	26	1,076,781,151
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	577,554,979	27	551,943,374
	28 Net assets with donor restrictions	615,725,691	28	632,590,727
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	1,193,280,670	32	1,184,534,101	
33 Total liabilities and net assets/fund balances	2,024,922,675	33	2,261,315,252	

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	1,329,522,543
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,324,502,480
3	Revenue less expenses. Subtract line 2 from line 1	3	5,020,063
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,193,280,670
5	Net unrealized gains (losses) on investments	5	-13,766,632
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	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,184,534,101

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: 23-1352630

Name: DREXEL UNIVERSITY

Form 990 (2019)

Form 990, Part III, Line 4a:

INSTRUCTION DREXEL IS A COMPREHENSIVE NATIONAL RESEARCH UNIVERSITY DEDICATED TO PROVIDING QUALITY UNDERGRADUATE, GRADUATE AND PROFESSIONAL EDUCATION FEATURING EXCELLENT ACADEMICS, STATE-OF-THE-ART TECHNOLOGY AND A FOCUS ON REAL-WORLD LEARNING AND SERVICE. THE UNIVERSITY'S RESEARCH ENTERPRISE WAS RECENTLY ELEVATED TO R1 STATUS IN THE CARNEGIE CLASSIFICATION OF INSTITUTIONS OF HIGHER EDUCATION--A RANK THAT DENOTES THE HIGHEST LEVEL OF RESEARCH ACTIVITY, HELD BY JUST 37 PRIVATE UNIVERSITIES AROUND THE COUNTRY. THE UNIVERSITY DISCLOSED 84 TOTAL NEW INVENTIONS AND RECEIVED 36 NEW UNITED STATES PATENTS IN FISCAL YEAR 2020. THE UNIVERSITY'S MISSION SERVES TRADITIONAL, ADULT AND ONLINE STUDENTS. DREXEL OFFERS NATIONALLY ACCREDITED PROGRAMS THAT MEET THE CHANGING NEEDS OF SOCIETY, INCLUDING MORE THAN 80 BACHELOR'S DEGREE PROGRAMS AND MORE THAN 120 GRADUATE AND PROFESSIONAL DEGREE PROGRAMS ORGANIZED IN 15 COLLEGES AND SCHOOLS: COLLEGE OF ARTS AND SCIENCES; SCHOOL OF BIOMEDICAL ENGINEERING, SCIENCE AND HEALTH SYSTEMS; BENNETT S. LEBOW COLLEGE OF BUSINESS; COLLEGE OF COMPUTING & INFORMATICS; SCHOOL OF EDUCATION; COLLEGE OF ENGINEERING; CHARLES D. CLOSE SCHOOL OF ENTREPRENEURSHIP; GRADUATE COLLEGE; PENNONI HONORS COLLEGE; THOMAS R. KLINE SCHOOL OF LAW; ANTOINETTE WESTPHAL COLLEGE OF MEDIA ARTS & DESIGN; COLLEGE OF MEDICINE; COLLEGE OF NURSING AND HEALTH PROFESSIONS; RICHARD C. GOODWIN COLLEGE OF PROFESSIONAL STUDIES AND DANA AND DAVID DORNSIFE SCHOOL OF PUBLIC HEALTH. DREXEL'S STRATEGIC EFFORTS FOCUS ON INVESTING FURTHER IN ACADEMIC EXCELLENCE, SERVING MORE STUDENTS WHILE IMPROVING THE STUDENT EXPERIENCE AND ENHANCING THE UNIVERSITY'S GLOBAL IMPACT. OVER THE LAST 25 YEARS, DREXEL HAS GROWN TO BECOME AN ECONOMIC ENGINE FOR PHILADELPHIA, SERVING AS ONE OF THE CITY'S LARGEST EMPLOYERS, GENERATING MILLIONS OF DOLLARS IN WAGE TAXES, ATTRACTING EXTERNAL FUNDING FOR RESEARCH AND KEY REAL ESTATE DEVELOPMENT PROJECTS, INVESTING IN PUBLIC SCHOOLS, AND SUPPORTING IMPORTANT COMMUNITY ORGANIZATIONS. DREXEL'S ACADEMIC ENTERPRISE HELPS STRENGTHEN THE NEIGHBORHOODS AROUND ITS CAMPUSES. DREXEL IS THE LEAD ACADEMIC PARTNER IN THE APPLICATION AND IMPLEMENTATION PROCESS FOR THE FEDERAL PROMISE ZONE IN WEST PHILADELPHIA, ONE OF THE FIRST FIVE LOCATIONS CHOSEN FOR A WHITE HOUSE INITIATIVE TO DIRECT RESOURCES TO THE NATION'S MOST PERSISTENTLY POVERTY-STRIKEN COMMUNITIES. DREXEL HAS FOSTERED AN ENVIRONMENT OF INCLUSION AND HAS SET INCLUSION AS A STRATEGIC PRIORITY. DREXEL'S INCLUSIVE ENVIRONMENT RECOGNIZES AND RESPECTS PEOPLE OF ALL BACKGROUNDS AND EXPERIENCES AND WELCOMES ALL VIEWS AND OPINIONS. IN NOVEMBER 2020, A CENTER FOR BLACK CULTURE OPENED ITS DOORS. THE CENTER WAS ESTABLISHED TO INCREASE KNOWLEDGE, RECOGNITION AND RESPECT OF THE PEOPLE, HISTORIES AND CULTURES OF THE AFRICAN DIASPORA AND ITS MANY CONTRIBUTIONS TO THE WORLD, AND TO SERVE AS A HUB OF INFORMATION AND ACTIVITY. MOST RECENTLY, DREXEL'S DORNSIFE SCHOOL OF PUBLIC HEALTH ANNOUNCED IT WILL LAUNCH A CENTER ON RACISM AND HEALTH TO ELEVATE RESEARCH ON RACIAL INEQUALITY AND HEALTH DISPARITIES IN TRADITIONALLY UNDERREPRESENTED POPULATIONS. AS THE UNITED STATES TRANSITIONS TO AN INFORMATION ECONOMY AND HAS DEALT WITH UNPRECEDENTED CHALLENGES BROUGHT ON BY THE COVID-19 PANDEMIC, MANY JOBS REQUIRE THE CRITICAL THINKING AND INNOVATIVE PROBLEM-SOLVING SKILLS INSTILLED AT DREXEL. FOR 100 YEARS, DREXEL HAS EQUIPPED STUDENTS FOR THE REAL WORLD THROUGH OUR RENOWNED COOPERATIVE EDUCATION PROGRAM. DREXEL ESTABLISHED THE DREXEL SOLUTIONS INSTITUTE THAT HAS BECOME THE NEW GATEWAY FOR INDUSTRY PARTNERSHIPS--CONNECTING DREXEL'S 1,600 CO-OP EMPLOYERS, AS WELL AS OTHER BUSINESSES AND NONPROFITS, AND LINKING THEM TO DREXEL STUDENT TALENT, FACULTY EXPERTISE AND WORLD-CLASS RESOURCES. DREXEL HAS MADE A STRATEGIC COMMITMENT TO HELP IMPROVE THE NATION'S GLOBAL COMPETITIVENESS BY INCREASING STUDENTS' INTERNATIONAL ENGAGEMENT TO BUILD CULTURAL COMPETENCIES. IN RECENT YEARS, THE UNIVERSITY HAS GROWN THE NUMBER OF STUDY ABROAD OPPORTUNITIES BY MORE THAN A QUARTER AND THE NUMBER OF GLOBAL POSITIONS IN DREXEL'S SIGNATURE COOPERATIVE EDUCATION PROGRAM BY A THIRD, WHILE TRIPLING BOTH THE PROGRAMMING OF THE OFFICE OF INTERNATIONAL PROGRAMS AND THE TOTAL NUMBER OF INITIATIVES AT DREXEL THAT SUPPORT CROSS-CULTURAL EDUCATION AND ENGAGEMENT. UNDERGRADUATE ENROLLMENT FOR ACADEMIC YEAR 2019-2020 = 15,346 GRADUATE AND PROFESSIONAL ENROLLMENT FOR ACADEMIC YEAR 2019-2020 = 8,859 NUMBER OF DEGREES CONFERRED IN ACADEMIC YEAR 2019-2020: ASSOCIATE DEGREES = 0 BACHELOR'S DEGREES = 3,204 MASTER'S DEGREES = 2,260 DOCTORAL DEGREES = 658 CERTIFICATES AND OTHER = 388

Form 990, Part III, Line 4b:

RESEARCHDREXEL RESEARCHERS WORK ACROSS DISCIPLINES TO INCREASE THE WORLD'S STORE OF KNOWLEDGE AND TRANSLATE THAT NEW KNOWLEDGE INTO SOLUTIONS WITH TREMENDOUS POSITIVE IMPACT ON SOCIETY. TYPICALLY, THE UNIVERSITY RECEIVES ABOUT \$110 MILLION PER YEAR IN RESEARCH EXPENDITURES, BUT ITS OUTPUT RIVALS THAT OF UNIVERSITIES THAT RECEIVE ANYWHERE FROM THREE TO FIVE TIMES THAT AMOUNT. DREXEL IS COMMITTED TO USING ITS RESEARCH AND TECHNOLOGICAL EXPERTISE TO BECOME AN EVEN MORE POWERFUL ECONOMIC ENGINE FOR GREATER PHILADELPHIA, HELPING TO CREATE NEW HIGH-TECH BUSINESSES AND JOBS. DREXEL LAUNCHED TWO NEW ACCELERATOR PROGRAMS IN 2015, IN COLLABORATION WITH THE STATE-FUNDED BEN FRANKLIN TECHNOLOGY PARTNERS OF SOUTHEASTERN PENNSYLVANIA AND THE CITY OF PHILADELPHIA, TO HELP GROW NEW BUSINESSES IN TECHNOLOGY AND MEDICAL DEVICES AND THERAPEUTICS. THESE ACCELERATORS ARE AMONG THE FIRST BUILDING BLOCKS OF SCHUYLKILL YARDS, A DREXEL AND BRANDYWINE REALTY TRUST INITIATIVE TO DRIVE UNIVERSITY CITY'S ASCENDANCY AS A GLOBAL INNOVATION DISTRICT. DREXEL'S RESEARCHERS CONTINUE TO BUILD PARTNERSHIPS THAT ARE CRITICAL TO CREATING 21ST-CENTURY SOLUTIONS TO AMERICA'S CHALLENGES. IN APRIL 2016, THE U.S. DEPARTMENT OF DEFENSE TAPPED DREXEL AS A KEY LEADER IN THE CREATION OF A \$75 MILLION NATIONAL RESEARCH INSTITUTE THAT WILL SUPPORT AMERICAN TEXTILE MANUFACTURERS IN BRINGING SOPHISTICATED NEW MATERIALS AND TEXTILES TO THE MARKETPLACE. THE INSTITUTE, CALLED ADVANCED FUNCTIONAL FABRICS OF AMERICA, HAS BECOME A NATIONAL MANUFACTURING RESOURCE CENTER FOR INDUSTRY AND GOVERNMENT TO DRAW ON ACADEMIC EXPERTISE IN NEW FIBERS AND TEXTILES. THE RESULT WILL BE FABRICS ENGINEERED TO SEE, HEAR, SENSE AND COMMUNICATE; SERVING AN ARRAY OF INDUSTRIES INCLUDING AEROSPACE, APPAREL, ARCHITECTURE AND HEALTH. IN 2019, THE UNIVERSITY OPENED THE CENTER FOR FUNCTIONAL FABRICS AND THE PENNSYLVANIA FABRIC DISCOVERY CENTER. THE LATTER WAS CREATED TO SUPPORT DREXEL'S ROLE AS THE REGIONAL LEADER OF ADVANCED FUNCTIONAL FABRICS OF AMERICA'S NETWORK OF FABRIC DISCOVERY CENTERS. THE PENNSYLVANIA FABRIC DISCOVERY CENTER (PA FDC) IS RESPONDING TO THE COVID-19 PANDEMIC BY DEVELOPING AND PRODUCING NEW TYPES OF MASKS AND RESPIRATORS.DURING FY20, DREXEL UNIVERSITY CONDUCTED RESEARCH ON THE FOLLOWING RESEARCH GRANTS:FEDERALLY SPONSORED RESEARCH - 942 GRANTSSTATE OF PENNSYLVANIA SPONSORED RESEARCH - 114 GRANTSCITY OF PHILADELPHIA CONTRACTS - 19 GRANTSPRIVATE FOUNDATION SPONSORED RESEARCH - 328 GRANTSINDUSTRY SPONSORED RESEARCH - 213 GRANTS

Form 990, Part III, Line 4c:

PATIENT CARE/PUBLIC SERVICE IS THE COLLEGE'S PATIENT CARE MISSION TO SERVE THE COMMUNITY THROUGH THE DELIVERY OF HIGH-QUALITY, COST-EFFECTIVE HEALTH CARE SERVICES, INCLUDING PROGRAMS OF HEALTH PROMOTION AND DISEASE PREVENTION. ALL CLINICAL SERVICES ARE PROVIDED WITH CAREFUL REGARD FOR THE INDIVIDUAL PATIENT AND THEIR FAMILY. DREXEL UNIVERSITY'S CLINICAL PRACTICES PROVIDE EXCEPTIONAL CARE IN HIV/AIDS, INFECTIOUS DISEASE, ADDICTION MEDICINE AND PSYCHIATRY.

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			
JOHN A FRY PRESIDENT	40.00 7.00	X		X				1,204,239	0	410,119
RANDALL C DEIKE FORMER SVP ENROLLMENT MGMT	0.00 0.00						X	1,067,576	0	34,452
DAVID STEIN DEP 1219 ASSOC DEAN & COO, SURG	40.00 0.00					X		776,760	0	48,974
DAVID L UNRUH SVP INST ADVANCEMENT	40.00 0.00				X			680,803	0	88,974
HELEN Y BOWMAN EXECUTIVE VP/TREASURER/COO	40.00 5.00			X				643,219	0	93,374
DANIEL V SCHIDLOW DEP 819 DEAN AND SVP, MED AFFAIRS	40.00 0.00				X			688,120	0	32,254
LIA LOGIO PROFESSOR AND CHAIR, DEPT.	40.00 0.00					X		632,831	0	47,427
M BRIAN BLAKE DEP 1019 PROVOST & EVP ACAD AFF	40.00 2.00				X			608,706	0	40,345
SUSAN C ALDRIDGE FORMER SVP ONLINE LEARNING	0.00 0.00						X	591,362	0	35,196
MICHAEL J EXLER ESQ SVP AND GENERAL COUNSEL	40.00 2.00				X			542,709	0	48,974

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			
KEITH A ORRIS FORMER SVP CORP RELATIONS	0.00 0.00						X	559,330	0	27,716
MATTHEW LAWRENCE DEP 120 PROF, DEPT. OF SURG	40.00 0.00					X		488,713	0	36,779
OWEN MONTGOMERY DEP 120 CHAIR, OB/GYN CONTROL	40.00 0.00					X		474,259	0	31,622
GEDIMINAS GLIEBUS DEP 120 CHAIR, NEUROLOGY	40.00 0.00					X		466,184	0	33,991
PAUL JENSEN AS OF 1119 INTERIM PROVOST	40.00 2.00					X		425,415	0	48,974
ELISABETH VAN BOCKSTAELE SVP GRAD. AND ONLINE ED. (AS OF 9/19)	40.00 0.00					X		412,375	0	48,907
MARK GREENBERG FORMER PROVOST AND SVP, AC	40.00 0.00						X	350,962	0	44,989
LORI N DOYLE SVP UNIV COMMUNICATIONS	40.00 0.00					X		343,555	0	48,941
MEGAN WEYLER AS OF 120 SVP AND CHRO	40.00 0.00					X		349,967	0	32,504
DONNA MURASKO PHD FORMER DEAN, COLLEGE OF AR	40.00 0.00						X	322,126	0	44,989

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			
EVELYN THIMBA SVP ENROLLMENT MANAGEMENT	40.00 0.00				X			316,875	0	42,359
ALEISTER SAUNDERS AS OF 1019 EXEC VICE PROV, RES & INNOV	40.00 0.00				X			309,174	0	41,635
BRIAN T KEECH SVP GOV & COMMUNITY RELATI	40.00 0.00				X			299,807	0	48,974
JOSEPH B HUGHES FORMER DEAN, COLLEGE OF EN	40.00 0.00						X	295,973	0	44,655
SUBIR SAHU SVP STUDENT SUCCESS	40.00 0.00				X			287,568	0	32,348
JANICE K MARINI FORMER SECRETARY	40.00 0.00						X	247,313	0	41,343
CHARLES CAIRNS AS OF 919 DEAN AND SVP, MED AFFAIRS	40.00 0.00				X			261,647	0	20,941
DARIN PFEIFER AS OF 919 SECRETARY	40.00 0.00			X				141,890	0	27,053
CHRIS MCKENDRY ANDRADE TRUSTEE	2.00 0.00	X						0	0	0
MICHAEL BARRY AS OF 520 TRUSTEE	2.00 0.00	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			
JEFFREY A BEACHELL TRUSTEE	2.00 0.00	X						0	0	0
JAMES BEAN TRUSTEE	2.00 0.00	X						0	0	0
SALLY J BELLET TRUSTEE	2.00 0.00	X						0	0	0
GREGORY S BENTLEY TRUSTEE	2.00 0.00	X						0	0	0
THOMAS E BERK TRUSTEE	2.00 0.00	X						0	0	0
KAREN DOUGHERTY BUCHHOLZ TRUSTEE	2.00 0.00	X						0	0	0
ELINOR HOSTERMAN BUCK TRUSTEE	2.00 0.00	X						0	0	0
RANDALL S BURKERT TRUSTEE	2.00 0.00	X						0	0	0
THOMAS A CARAMANICO TRUSTEE	2.00 0.00	X						0	0	0
R JOHN CHAPEL JR TRUSTEE	2.00 0.00	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			
HONORABLE IDA K CHEN TRUSTEE	2.00 0.00	X						0	0	0
KATHLEEN P CHIMICLES TRUSTEE	2.00 0.00	X						0	0	0
ABBIE DEAN TRUSTEE	2.00 0.00	X						0	0	0
NICHOLAS DEBENEDICTIS TRUSTEE	2.00 0.00	X						0	0	0
RICHARD J DEPIANO DEC 1019 TRUSTEE	2.00 0.00	X						0	0	0
AMISH DESAI TRUSTEE	2.00 0.00	X						0	0	0
GERIANNE TRINGALI DIPIANO TRUSTEE	2.00 0.00	X						0	0	0
DOMENIC M DIPIERO III TRUSTEE	2.00 0.00	X						0	0	0
THOMAS O FITZPATRICK ESQ TRUSTEE	2.00 0.00	X						0	0	0
BRIAN R FORD TRUSTEE	2.00 0.00	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			
MICHAEL FORMAN TRUSTEE	2.00 0.00	X						0	0	0
KENNETH FULMER TRUSTEE	2.00 0.00	X						0	0	0
SEAN J GALLAGHER TRUSTEE	2.00 0.00	X						0	0	0
DAVID R GELTZER TRUSTEE	2.00 0.00	X						0	0	0
RICHARD A GREENAWALT CHAIR	2.00 0.00	X		X				0	0	0
DAVID GRIFFITH TRUSTEE	2.00 0.00	X						0	0	0
MAURICIO GUTIERREZ TRUSTEE	2.00 0.00	X						0	0	0
RICHARD A HAYNE VICE CHAIR	2.00 0.00	X		X				0	0	0
NINA HENDERSON VICE CHAIR	2.00 0.00	X		X				0	0	0
RICHARD C ILL TRUSTEE	2.00 0.00	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			
PATRICIA H IMBESI TRUSTEE	2.00 0.00	X						0	0	0
JOSEPH H JACOVINI ESQ TRUSTEE	2.00 0.00	X						0	0	0
THOMAS R KLINE TRUSTEE	2.00 0.00	X						0	0	0
LAWRENCE M KORMAN DEP 520 TRUSTEE	2.00 0.00	X						0	0	0
J MICHAEL LAWRIE TRUSTEE	2.00 0.00	X						0	0	0
RAPHAEL C LEE TRUSTEE	2.00 0.00	X						0	0	0
THOMAS LEONARD AS OF 520 TRUSTEE	2.00 0.00	X						0	0	0
MARK MCADOO AS OF 520 TRUSTEE	2.00 0.00	X						0	0	0
PATRICK MCGONIGAL TRUSTEE	2.00 0.00	X						0	0	0
MATTHEW S NAYLOR TRUSTEE	2.00 0.00	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			
DENIS P O'BRIEN TRUSTEE	2.00 0.00	X						0	0	0
KEVIN J O'HARA TRUSTEE	2.00 0.00	X						0	0	0
RICHELLE P PARHAM TRUSTEE	2.00 0.00	X						0	0	0
CHARLES P PIZZI TRUSTEE	2.00 0.00	X						0	0	0
THOMAS M RAMPULLA TRUSTEE	2.00 0.00	X						0	0	0
KATHLEEN REARDON AS OF 520 TRUSTEE	2.00 0.00	X						0	0	0
PHILIP L RINALDI DEP 1119 TRUSTEE	2.00 0.00	X						0	0	0
VIRGINIA S ROSE AS OF 919 TRUSTEE	2.00 0.00	X						0	0	0
STANLEY W SILVERMAN VICE CHAIR	2.00 0.00	X		X				0	0	0
JOSEPH P UJOBAI TRUSTEE	2.00 0.00	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			
CHARLES K VALUTAS TRUSTEE	2.00 0.00	X						0	0	0
MICHAEL J WILLIAMS TRUSTEE	2.00 0.00	X						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

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

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	180,378,244	147,223,454	191,291,661	179,004,281	183,627,688	881,525,328
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	180,378,244	147,223,454	191,291,661	179,004,281	183,627,688	881,525,328
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). . . .						23,949,440
6 Public support. Subtract line 5 from line 4.						857,575,888

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . . .	180,378,244	147,223,454	191,291,661	179,004,281	183,627,688	881,525,328
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,137,475	83,863,653	19,628,337	20,938,548	27,296,389	158,864,402
9 Net income from unrelated business activities, whether or not the business is regularly carried on	2,447,445	3,376,232	3,460,327	1,854,366	999,916	12,138,286
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . . .						
11 Total support. Add lines 7 through 10						1,052,528,016
12 Gross receipts from related activities, etc. (see instructions)					12	4,669,837,341

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 2019 (line 6, column (f) divided by line 11, column (f))	14	81.480 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	77.530 %

16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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>	Yes	No
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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
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 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 23-1352630

Name: DREXEL UNIVERSITY

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

2019
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 DREXEL UNIVERSITY	Employer identification number 23-1352630
---	--

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-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?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		274,837
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		480,814
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			755,651
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
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).

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

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
PART II-B, LINE 1:	LINE A - VOLUNTEERS: DREXEL UNIVERSITY HAS USED VOLUNTEERS TO HELP GET OUR MESSAGE TO ELECTED OFFICIALS. SPECIFICALLY, WE HAVE PARTICIPATED IN SUCH ACTIVITIES SUCH AS STUDENT LOBBYING DAY, SPONSORED BY THE ASSOCIATION FOR INDEPENDENT COLLEGES AND UNIVERSITIES, IN WHICH WE TAKE STUDENTS TO HARRISBURG TO MEET THEIR ELECTED OFFICIALS. THIS IS DONE IN COORDINATION WITH THE STUDENT GOVERNMENT ASSOCIATION AND THE OFFICE OF UNIVERSITY STUDENT LIFE. LINE D - MAILINGS TO MEMBERS, LEGISLATORS OR THE PUBLIC: IN CASES WHERE LEGISLATION MAY OR WILL AFFECT THE UNIVERSITY, ITS SUBSIDIARIES OR HIGHER EDUCATION AND HEALTH CARE IN GENERAL, WE MAKE CONTACT WITH LEGISLATORS THROUGH MAILINGS. THESE ARE PERSONALIZED MAILINGS AS OPPOSED TO DIRECT MAIL CAMPAIGNS. LINE G - DIRECT CONTACT WITH LEGISLATORS, THEIR STAFFS, GOVERNMENT OFFICIALS, OR A LEGISLATIVE BODY: WE HAVE DIRECT CONTACT WITH OUR LEGISLATORS, THEIR STAFFS, AND VARIOUS GOVERNMENT OFFICIALS THROUGHOUT THE YEAR VIA PHONE CALLS, WRITTEN CORRESPONDENCE, AND MEETINGS. WE ARE ALSO CALLED TO THE STATE CAPITOL AND CONGRESS TO EDUCATE THE MEMBERS ON ISSUES OF IMPORTANCE RELATED TO HIGHER EDUCATION. THE FREQUENCY OF CONTACT DEPENDS ON THE ISSUES AT HAND.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
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 instructions and the latest information.

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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 ▶ \$ 10,859,921

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:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

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

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	752,404,000	717,995,000	639,825,000	589,106,075	585,577,000
b Contributions	8,682,000	16,601,000	17,490,000	1,981,000	39,641,291
c Net investment earnings, gains, and losses	14,818,000	41,768,000	79,605,000	69,113,000	-13,919,159
d Grants or scholarships	9,657,000	7,343,000	6,921,000	6,471,075	6,040,655
e Other expenditures for facilities and programs	23,351,000	16,617,000	12,004,000	13,904,000	16,152,402
f Administrative expenses					
g End of year balance	742,896,000	752,404,000	717,995,000	639,825,000	589,106,075

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

- a** Board designated or quasi-endowment ▶ 36.210 %
- b** Permanent endowment ▶ 43.350 %
- c** Temporarily restricted endowment ▶ 20.440 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

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

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		97,968,380		97,968,380
b Buildings		1,085,170,168	377,975,979	707,194,189
c Leasehold improvements		122,240,367	68,124,274	54,116,093
d Equipment		159,805,718	116,361,820	43,443,898
e Other		70,093,390	54,831,490	15,261,900
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				917,984,460

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) INVESTMENT AT NAV (PRIVATE EQUITY, REAL ESTATE, HEDGE FUNDS, AND OTHER)	227,710,000	F
(B) REAL ESTATE & REAL ASSETS FUNDS	112,510,000	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	340,220,000	

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) OTHER	201,735,258
(2) GROUND LEASE AMORTIZATION	3,811,104
(3) CSV LIFE INSURANCE	235,669
(4) LOANS RECEIVABLE	6,783,250
(5) LOAN TO USBCDE INVEST FUND 91	2,205,125
(6) LOAN TO PIDC-RDC INVEST FUND IX	4,826,000
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	219,596,406

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	
(2) DEPOSITS	36,680,282
(3) GOVERNMENT ADVANCES FOR STUDENT LOANS	19,990,963
(4) CAPITAL AND FINANCE LEASE	179,525,207
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	236,196,452

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	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 23-1352630

Name: DREXEL UNIVERSITY

Supplemental Information

Return Reference	Explanation
PART III, LINE 4:	THE DREXEL COLLECTION, FOUNDED BY A.J. DREXEL IN 1892, CONSISTS OF APPROXIMATELY 6,000 WORKS OF ART. THE FOCUS OF THE COLLECTION IS PRIMARILY 19TH CENTURY EUROPEAN ART INCLUDING PAINTINGS, SCULPTURE, PRINTS AND DRAWINGS, PORCELAIN, SILVER AND FURNITURE. THE DREXEL COLLECTION IS DISPLAYED IN THREE GALLERIES - THE ANTHONY J. DREXEL PICTURE GALLERY, THE RINCLIFFE GALLERY AND THE GALLERY IN THE PAUL PECK ALUMNI CENTER. THE ANTHONY J. DREXEL PICTURE GALLERY DISPLAYS OUR PERMANENT COLLECTION OF PRIMARILY 19TH CENTURY EUROPEAN PAINTINGS AND IS USED DAILY FOR TOURS OF THE UNIVERSITY. THE RINCLIFFE AND PAUL PECK ALUMNI GALLERIES ARE ROTATING EXHIBITION SPACES THAT INCORPORATE BOTH INTERNAL COLLECTIONS AND LOAN ITEMS AND BOTH ARE USED AS A TEACHING TOOL ABOUT EXHIBITION PLANNING AND PROGRAMMING FOR STUDENTS IN THE MUSEUM LEADERSHIP AND ARTS MANAGEMENT PROGRAMS. THE GALLERIES ARE FREE AND OPEN TO THE STUDENTS, FACULTY, STAFF AND THE PUBLIC. OBJECTS FROM THE DREXEL COLLECTION ARE ALSO DISPLAYED THROUGHOUT THE MAIN BUILDING AND UNIVERSITY CITY, CENTER CITY AND QUEEN LANE CAMPUSES. THE DISPLAYS INTERPRET THE ARTWORK TO MAKE THEM MORE RELEVANT TO THE STUDENTS, FACULTY AND STAFF. THE COLLECTION OBJECTS ARE ALSO USED FOR WORKSHOPS AND CLASSES TO DESIGN AND IMPLEMENT PUBLIC EXHIBITIONS, RESEARCH PROJECTS AND PRACTICUMS FOR STUDENTS STUDYING MUSEUM LEADERSHIP AND ART MANAGEMENT.

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	DREXEL UNIVERSITY HAD AN ENDOWMENT SPENDING RULE THAT LIMITED THE SPENDING OF ENDOWMENT RESOURCES TO 6.0% OF THE AVERAGE MARKET VALUE OF THE POOLED ENDOWMENT PORTFOLIO FOR THE PRIOR SEVEN FISCAL YEARS. TO THE EXTENT THAT CURRENT YIELD IS INADEQUATE TO MEET THE SPENDING RULE, A PORTION OF CUMULATIVE REALIZED NET GAINS IS AVAILABLE FOR CURRENT USE. ENDOWMENT RESOURCES ARE USED TO FUND OPERATIONS, SCHOLARSHIPS, ACADEMIC PROGRAMS AND PROFESSORSHIPS.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	<p>THE UNIVERSITY HAS BEEN GRANTED TAX-EXEMPT STATUS AS A NON-PROFIT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, FILES FEDERAL TAX FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX) ANNUALLY. THE UNIVERSITY FILES U.S. FEDERAL, STATE AND LOCAL INFORMATIONAL RETURNS. THE STATUTE OF LIMITATIONS ON THE UNIVERSITY'S U.S. FEDERAL INFORMATION RETURNS REMAINS OPEN FOR THREE YEARS FOLLOWING THE YEAR THEY ARE FILED. THE UNIVERSITY AND ITS AFFILIATES ENGAGE IN ACTIVITIES THAT ARE SUBJECT TO UNRELATED BUSINESS INCOME TAXES FOR WHICH APPROPRIATE INCOME TAX RETURNS ARE FILED. THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ISSUED ACCOUNTING STANDARDS CODIFICATION ("ASC") NO.740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. THE UNIVERSITY DOES NOT BELIEVE THERE ARE ANY UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.</p>

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No. 1545-0047

2019

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 information.**

Department of the Treasury
Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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	DREXEL UNIVERSITY INCLUDES ITS RACIALLY NONDISCRIMINATORY POLICY ON ITS WEBSITE: HTTPS://DREXEL.EDU/OED/POLICIES/OVERVIEW/OED-1/ .
SCHEDULE E, PART I, LINE 6	DREXEL UNIVERSITY RECEIVES FUNDS FROM VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES UNDER THEIR RESPECTIVE STUDENT FINANCIAL AID ASSISTANCE PROGRAMS. FEDERAL PROGRAMS INCLUDE THE PELL GRANT PROGRAM, SUPPLEMENTAL EDUCATION OPPORTUNITY GRANT (SEOG) PROGRAM, COLLEGE WORK STUDY (CWS) PROGRAM, AND DIRECT STUDENT LOAN PROGRAM (SUBSIDIZED, UNSUBSIDIZED, AND PLUS LOANS FOR BOTH PARENT AND GRADUATE STUDENTS). THE STATE PROGRAM IS THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE PROGRAM FOR STUDENTS. THE UNIVERSITY RECEIVES FUNDS FROM VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES FOR SPONSORED RESEARCH AND OTHER PROJECT GRANTS, INCLUDING NSF AND HHS. APPROPRIATIONS ARE RECEIVED FROM THE COMMONWEALTH OF PENNSYLVANIA FOR THE MD PROGRAM, GENERAL MAINTENANCE OF THE COLLEGE, STUDENT AID, MINORITY EDUCATION AND RECRUITMENT, PEDIATRIC SERVICES AND OTHER OPERATING EXPENSES THAT FURTHER OUR MISSION AND OBJECTIVES OF EDUCATION AND RESEARCH.

**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

2019

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	0	0			23,279
b Total from continuation sheets to Part I	0	0			2,838,088
c Totals (add lines 3a and 3b)	0	0			2,861,367

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	CENTRAL AMERICA AND THE CARIBBEAN	1	6,000	CHECK			
SCHOLARSHIPS	EAST ASIA AND THE PACIFIC	11	86,000	CHECK			
SCHOLARSHIPS	EUROPE	9	48,900	CHECK			
SCHOLARSHIPS	MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	1	5,000	CHECK			

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
PART I, LINE 2:	<p>DREXEL'S OFFICE OF RESEARCH HAS RESPONSIBILITY FOR OVERSEEING GRANTS (TYPICALLY SUBAWARDS) TO FOREIGN ORGANIZATIONS. THE OFFICE OF RESEARCH BEGINS WITH A "PRE-AWARD PROCESS," WHICH INVOLVES GATHERING BACKGROUND INFORMATION ABOUT THE POTENTIAL GRANTEE, CONDUCTING A RISK ASSESSMENT WITH RESPECT TO THE POTENTIAL GRANTEE, DEVELOPING APPROPRIATE TERMS FOR THE GRANTS, AND ENTERING INTO A WRITTEN AGREEMENT WITH THE GRANTEE. ONCE A GRANT HAS BEEN APPROVED IN PRINCIPLE, THE OFFICE OF RESEARCH FOCUSES ON THE "OPERATIONS AND COMPLIANCE PROCESS," WHICH INVOLVES USING VISUAL COMPLIANCE TO SCREEN PAYEES AGAINST THE "SPECIALLY DESIGNATED NATIONALS" LIST OF THE TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSET CONTROL AND SIMILAR WATCH LISTS. ONCE THE GRANTEE HAS PASSED THIS SCREENING AND THERE IS A WRITTEN GRANT AGREEMENT, THE OFFICE OF RESEARCH MOVES TO THE "POST-AWARD PROCESS AND EXPENSES MONITORING." THIS INVOLVES REVIEWING PROPOSED GRANT PAYMENTS TO ENSURE THAT THE GRANTEE HAS PROVIDED APPROPRIATE DOCUMENTATION FOR THE GRANT EXPENSES AND THAT SUCH EXPENSES FALL WITHIN THE CATEGORY OF "ALLOWABLE EXPENSES" UNDER THE PARTICULAR PRIME GRANT OR CONTRACT. DREXEL ALSO REQUIRES THE PRINCIPAL INVESTIGATOR OF THE PRIME GRANT OR CONTRACT (WHO IS TYPICALLY A DREXEL PROFESSOR OR RESEARCHER) TO APPROVE THE PROPOSED PAYMENTS AND DOCUMENTATION OF THE SERVICES RENDERED PRIOR TO MAKING PAYMENT. IF THERE ARE QUESTIONS ABOUT THE USE OF FUNDS BY A GRANTEE, DREXEL CONDUCTS AN INVESTIGATION AND WITHHOLDS ANY FURTHER PAYMENT PENDING RESOLUTION OF THE INVESTIGATION.</p>

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Additional Data

Software ID:

Software Version:

EIN: 23-1352630

Name: DREXEL UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	BUSINESS		2,395
NORTH AMERICA	0	0	BUSINESS		1,419

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 & NORTH AFRICA	0	0	BUSINESS		8,441
EUROPE	0	0	BUSINESS		7,854

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	BUSINESS		700
SOUTH ASIA	0	0	FUNDRAISING		2,046

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	0	0	FUNDRAISING		84
NORTH AMERICA	0	0	FUNDRAISING		340

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	PROGRAM SERVICES	ATHLETICS	849
EUROPE	0	0	PROGRAM SERVICES	ATHLETICS	45,747

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	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	463,395
MIDDLE EAST & NORTH AFRICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	3,356

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	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	1,483
CENTRAL AMERICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	160

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	11,611
SOUTH ASIA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	12,069

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	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	20,774
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	43,802

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	CONFERENCES/TRAVEL	16,156
NORTH AMERICA	0	0	PROGRAM SERVICES	RECRUITING	7,512

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	0	0	PROGRAM SERVICES	RECRUITING	28,212
EUROPE	0	0	PROGRAM SERVICES	RECRUITING	40,268

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 & NORTH AFRICA	0	0	PROGRAM SERVICES	RECRUITING	158
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RECRUITING	200

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	0	0	PROGRAM SERVICES	RECRUITING	7,157
RUSSIA	0	0	PROGRAM SERVICES	RESEARCH	16

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	0	0	PROGRAM SERVICES	RESEARCH	369,997
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	RESEARCH	15,602

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	PROGRAM SERVICES	RESEARCH	464,828
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	RESEARCH	480,425

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	0	0	PROGRAM SERVICES	RESEARCH	958
CENTRAL AMERICA	0	0	PROGRAM SERVICES	RESEARCH	70,105

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	0	0	PROGRAM SERVICES	RESEARCH	227,360
SOUTH ASIA	0	0	PROGRAM SERVICES	RESEARCH	2,105

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDY ABROAD	6,338
SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDY ABROAD	4,863

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	0	0	PROGRAM SERVICES	STUDY ABROAD	32
SOUTH ASIA	0	0	PROGRAM SERVICES	STUDY ABROAD	308

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	0	0	PROGRAM SERVICES	STUDY ABROAD	100,261
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STUDY ABROAD	25,587

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 & NORTH AFRICA	0	0	PROGRAM SERVICES	STUDY ABROAD	64,036
EUROPE	0	0	PROGRAM SERVICES	STUDY ABROAD	279,099

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 & NORTH AFRICA	0	0	PROGRAM SERVICES	STUDY ABROAD	23,259

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	36,950	WIRE			
		NORTH AMERICA	RESEARCH	43,673	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	RESEARCH	52,045	WIRE			
		MIDDLE EAST AND NORTH AFRICA	RESEARCH	52,781	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	56,986	WIRE			
		SOUTH AMERICA	RESEARCH	76,344	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	87,837	WIRE			
		CENTRAL AMERICA AND THE CARIBBEAN	RESEARCH	94,437	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	RESEARCH	94,477	WIRE			
		SOUTH AMERICA	RESEARCH	96,437	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	100,181	WIRE			
		SOUTH AMERICA	RESEARCH	115,510	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	157,520	WIRE			
		NORTH AMERICA	RESEARCH	184,521	WIRE			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	RESEARCH	238,992	WIRE			
		SOUTH AMERICA	RESEARCH	298,951	WIRE			

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

2019

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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 checked="" type="checkbox"/> Solicitation of government grants</p> <p>g <input checked="" 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 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RUFFALO NOEL LEVITZ 1025 KIRKWOOD PARKWAY SW CEDAR RAPIDS, IA 52404	PHONE SOLICITATION PROGRAM	No		52,413	197,566	-145,153
Total ▶				52,413	197,566	-145,153

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

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

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

Revenue	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
	DREXEL GOLF CLASSIC (event type)	LEBOW DEAN'S CUP GOLF TOURNAMENT (event type)	4 (total number)	(add col. (a) through col. (c))
1 Gross receipts	74,095	67,685	77,822	219,602
2 Less: Contributions	55,400	38,461	66,377	160,238
3 Gross income (line 1 minus line 2)	18,695	29,224	11,445	59,364
Direct Expenses	4 Cash prizes			
	5 Noncash prizes		12,897	15,707
	6 Rent/facility costs	13,950	43,000	9,951
	7 Food and beverages	28,486		
	8 Entertainment			10,529
	9 Other direct expenses	-835	2,380	
10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				136,065
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-76,701

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			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:

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

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

Name ▶

Address ▶

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

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

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

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

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

Return Reference	Explanation
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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

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.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization DREXEL UNIVERSITY

Employer identification number 23-1352630

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 or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 95
3 Enter total number of other organizations listed in the line 1 table 10

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	22980	404,434,946		BOOK	
(2) AWARDS	94	106,384		BOOK	
(3) FELLOWSHIPS	128	2,988,280		BOOK	
(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
PART I, LINE 2:	THE PRINCIPAL INVESTIGATOR HAVING RESPONSIBILITY FOR THE GRANT MONITORS SUBCONTRACTOR PERFORMANCE BASED ON THE PROGRAM'S TASKS AND GOALS. THE PRINCIPAL INVESTIGATOR REVIEWS THE PERFORMANCE BEFORE AUTHORIZING THE SUBCONTRACTOR'S INVOICE FOR PAYMENT.

Additional Data

Software ID:
Software Version:
EIN: 23-1352630
Name: DREXEL UNIVERSITY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF BOSTON UNIVERSITY 670 ALBANY STREET RM 251 BOSTON, MA 02118	04-2103547	501(C)(3)	5,085				RESEARCH
SEQUOIA FOUNDATION 2166 AVENIDA DE LA PLAYA SUITE D LA JOLLA, CA 92037	33-0100208	501(C)(3)	5,513				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
VERA INSTITUTE OF JUSTICE FISCAL DEPT 34 35TH STREET SUITE 4-2A BROOKLYN, NY 11232	13-1941627	501(C)(3)	6,669				RESEARCH
GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION PO BOX 3999 ATLANTA, GA 30302	58-1845423	501(C)(3)	8,720				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
PLACENTAL ANALYTICS LLC 187 OVERLOOK CIRCLE NEW ROCHELLE, NY 10804	35-2311739	FOR-PROFIT	9,158				RESEARCH
UNIVERSITY OF NEBRASKA AT OMAHA UNIVERSITY LIBRARY INTERLIBRARY LOAN OMAHA, NE 68182	47-0049123	501(C)(3)	9,421				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
ST JOSEPH'S UNIVERSITY 5600 CITY AVENUE PHILADELPHIA, PA 19131	23-1352674	501(C)(3)	12,464				RESEARCH
COLORADO SCHOOL OF MINES ARTHUR LAKES LIBRARY COLORADO SCHOOL OF MINES GOLDEN, CO 80401	84-6000551	115	12,519				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
COLORADO STATE UNIVERSITY 6015 CAMPUS DELIVERY - OSP CASHIERS OFFICE FORT COLLINS, CO 80523	84-6000545	115	12,576				RESEARCH
UNIVERSITY OF HAWAII OFFICE OF RESEARCH SERVICES 2440 CAMPUS ROAD BOX 368 HONOLULU, HI 96822	99-6000354	115	12,815				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
ROTHMAN INSTITUTE 125 S 9TH STREET SUITE 1000 PHILADELPHIA, PA 19107	23-2856880	FOR-PROFIT	13,506				RESEARCH
UNIV OF TEXAS HEALTH SCI CTR HOUSTON FINANCIAL ADMINSTRATIVE SUPPORT PO BOX 301418 DALLAS, TX 75303	74-1761309	501(C)(3)	13,539				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
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT LOS ANGELES MAIN CASHIER 1125 MURPHY HALL LOS ANGELES, CA 90024	95-6006143	501(C)(3)	13,669				RESEARCH
UNIVERSITY OF WISCONSIN SYSTEM LUBAR SCHOOL OF BUSINESS PO BOX 742 742 MILWAUKEE, WI 53201	39-1805963	115	13,994				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 ROCHESTER RUTH MERILL CENTER WILSON COMMONS ROCHESTER, NY 14627	16-0743209	501(C)(3)	14,088				RESEARCH
UNIVERSITY OF ARIZONA P O BOX 21049 1331 E FIFTH ST TUCSON, AZ 85721	74-2652689	115	14,171				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
INSTITUTE FOR CANCER RESEARCH FOX CHASE CANCER CENTER 333 COTTMAN AVENUE P3001C PHILADELPHIA, PA 19111	23-6296135	501(C)(3)	14,942				RESEARCH
EMORY UNIVERSITY 1518 CLIFTON ROAD ROOM 266 MAILSTOP MS 1518-002-5AA ATLANTA, GA 30322	58-0566256	501(C)(3)	15,422				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
VIRGINIA POLYTECH INST PO BOX 12487 ROANOKE, VA 24026	54-6001805	501(C)(3)	17,056				RESEARCH
REACH BEYOND SOLUTIONS LLC 9020 STEBBING WAY LAUREL, MD 20723	82-1700506	FOR-PROFIT	17,525				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
CENTRAL TEXAS VETERANS RESEARCH FOUNDATION 1901 SOUTH 1ST ST TEMPLE, TX 76504	74-2623309	501(C)(3)	20,039				RESEARCH
ENVIRONMENTAL SCIENCE POLICY AND RESEARCH INSTITUTE PO BOX 250 SAINT ALBANS BAY, VT 05481	81-1347753	501(C)(3)	20,888				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
PLAYWORKS EDUCATION ENERGIZED 638 3RD STREET OAKLAND, CA 94607	94-3251867	501(C)(3)	21,000				RESEARCH
PHILADELPHIA AIDS CONSORTIUM 112 N BROAD STREET 5TH FLOOR PHILADELPHIA, PA 19102	23-2579594	501(C)(3)	22,000				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 MIAMI COLLABORATIVE INSTITUTIONAL TRAINING INITIATIVE PROGRAM P O BOX MIAMI, FL 33102	59-0624458	501(C)(3)	22,250				RESEARCH
APEX MILLS CORPORATION 168 DOUGHTY BLVD PO BOX 960670 INWOOD, NY 11096	13-1809350	FOR-PROFIT	22,723				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
UNIV OF MEMPHIS 3720 ALUMNI AVE MEMPHIS, TN 38152	62-0648618	115	22,977				RESEARCH
CENTRAL SUSQUEHANNA INTERMEDIATE UNIT 90 LAWTON LANE MILTON, PA 17847	23-2181209	501(C)(3)	23,060				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 UTAH 201 S PRESIDENTS CIRCLE RM 411 SALT LAKE CITY, UT 84112	87-6000525	501(C)(3)	23,440				RESEARCH
SALK INSTITUTE FOR BIOLOGICAL STUDIES 10010 N TORREY PINES RD LA JOLLA, CA 92037	95-2160097	501(C)(3)	24,463				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
URBAN LEAGUE OF PHILADELPHIA 121 SOUTH BROAD STREET 6TH FLOOR PHILADELPHIA, PA 19107	23-1429810	501(C)(3)	25,000				RESEARCH
COMMUNITY COLLEGE OF PHILADELPHIA 1700 SPRING GARDEN STREET BG-38 PHILADELPHIA, PA 19130	23-2612698	115	26,707				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
PENNSYLVANIA STATE UNIVERSITY 150 SOUTH COLLEGE STREET CARLISLE, PA 17013	24-6000376	115	28,830				RESEARCH
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT IRVINE 120 THEORY SUITE 200 IRVINE, CA 92697	95-2226406	501(C)(3)	29,021				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
COOPER UNION FOR ADVANCEMENT OF SCIENCE & ART SUITE 205 41 COOPER SQ NEW YORK, NY 10003	13-5562985	501(C)(3)	30,000				RESEARCH
RESEARCH TRIANGLE INSTITUTE PO BOX 900002 RALEIGH, NC 27675	56-0686338	501(C)(3)	33,765				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
KENNEDY KRIEGER INSTITUTE INC HUGO W MOSER RESEARCH 707 N BROADWAY BALTIMORE, MD 21205	52-1524965	501(C)(3)	35,391				RESEARCH
REGENTS OF THE UNIVERSITY OF MINNESOTA NW 5957 PO BOX 1450 MINNEAPOLIS, MN 55485	41-6007513	501(C)(3)	36,587				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
PHILADELPHIA EDUCATION FUND FINANCE DEPARTMENT 1709 BENJAMIN FRANKLIN PARKWAY SUITE 700 PHILADELPHIA, PA 19103	22-2567982	501(C)(3)	38,553				RESEARCH
GREENER PARTNERS PO BOX 221 FAIRVIEW VILLAGE, PA 19409	26-2212927	501(C)(3)	40,479				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 TEXAS AT AUSTIN 727 EAST DEAN KEETON ST AUSTIN, TX 78705	74-6000203	115	43,811				RESEARCH
SHARE FOOD PROGRAM INC 2901 W HUNTING PARK AVE PHILADELPHIA, PA 19129	23-2360819	501(C)(3)	45,000				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
MEDSTAR HEALTH RESEARCH INSTITUTE MRHI PSS TEAM BOX 418223 BOSTON, MA 02241	52-6056274	501(C)(3)	45,007				RESEARCH
ARKANSAS CHILDREN'S RESEARCH INSTITUTE FINANCIAL SERVICES SLOT 663 1 CHILDRENS WAY LITTLE ROCK, AR 72202	71-0694931	501(C)(3)	47,345				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 PITTSBURGH 116 ATWOOD ST STE 201 PITTSBURGH, PA 15260	25-0965591	501(C)(3)	47,876				RESEARCH
AUGUSTA UNIVERSITY RESEARCH INSTITUTE INC 1120 15TH STREET AUGUSTA, GA 30912	58-1418202	501(C)(3)	48,607				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
KANSAS STATE UNIVERSITY DIVISION OF FINANCIAL SERVICES 2323 ANDERSON AVE SUITE 600 MANHATTAN, KS 66502	48-0771751	501(C)(3)	49,171				RESEARCH
PHILADELPHIA ACADEMIES INC 1401 WALNUT STREET PHILADELPHIA, PA 19102	22-2442433	501(C)(3)	50,000				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
INQUIRY SCHOOLS INC PO BOX 30377 PHILADELPHIA, PA 19103	46-2735104	501(C)(3)	50,000				RESEARCH
ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI PO BOX 3500 ONE GUSTAVE LEVY PL NEW YORK, NY 10029	13-6171197	501(C)(3)	50,977				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
LINCOLN UNIVERSITY OFFICE OF CAREER SERVICES 1570 BALTIMORE PIKE LINCOLN UNIVERSITY, PA 19352	23-1352655	501(C)(3)	53,607				RESEARCH
UNIVERSITY OF DELAWARE 210 SOUTH COLLEGE AVE NEWARK, DE 19716	51-6000297	501(C)(3)	57,064				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
FRONTAGE LABORATORIES INC 700 PENNSYLVANIA DR EXTON, PA 19341	20-1027574	FOR-PROFIT	59,805				RESEARCH
GEORGE WASHINGTON UNIVERSITY C/O JORDAN MASON 800 21ST ST NW SUITE 505 WASHINGTON, DC 20052	53-0196584	501(C)(3)	60,846				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
CHILDREN'S LITERACY INITIATIVE 990 SPRING GARDEN ST SUITE 400 PHILADELPHIA, PA 19123	23-2515768	501(C)(3)	67,500				RESEARCH
CHEYNEY UNIVERSITY PO BOX 138 CHEYNEY, PA 19319	23-2478688	115	71,314				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
CHILDRENS HOSPITAL LOS ANGELES 4650 SUNSET BOULEVARD LOS ANGELES, CA 90027	95-1690977	501(C)(3)	72,710				RESEARCH
CHILDREN'S HOSPITAL OF PHILADELPHIA 2716 SOUTH STREET 15TH FLOOR PHILADELPHIA, PA 19146	23-1352166	501(C)(3)	78,399				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 NORTH CAROLINA AT CHAPEL HILL OFFICE OF SPONSORED RESEARCH BANK OF AMERICA LOCKBOX SVC P O BOX 4024 ATLANTA, GA 30384	56-6001393	501(C)(3)	83,022				RESEARCH
UNIVERSITY OF WASHINGTON 1959 NE PACIFIC ST BOX 357470 SEATTLE, WA 98195	91-6001537	115	85,644				RESEARCH

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

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UNIVERSITY OF HOUSTON TREASURERS OFFICE PO BOX 988 HOUSTON, TX 77001	74-6001399	501(C)(3)	89,996				RESEARCH
TNTP INC 500 SEVENTH AVENUE 8TH FLOOR NEW YORK, NY 10018	13-3850158	501(C)(3)	92,885				RESEARCH

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

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ENERGY FUTURES INITIATIVES INC 900 17TH ST NW SUITE 1100 WASHINGTON, DC 20006	82-1230082	501(C)(3)	93,972				RESEARCH
UNIVERSITY OF COLORADO CENTER FOR ADVANCING PROFESSIONAL EXCELLENCE 13070 E 19TH AVE EDUCATI AURORA, CO 80045	84-6000555	501(C)(3)	98,688				RESEARCH

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

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THOMAS JEFFERSON UNIV 1020 LOCUST ST RM 212 PHILADELPHIA, PA 19107	23-1352651	501(C)(3)	99,822				RESEARCH
UNIVERSITY OF MARYLAND COLLEGE PARK ROOM 4101 CHESAPEAKE BUILDING COLLEGE PARK, MD 20742	52-6002033	501(C)(3)	105,375				RESEARCH

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

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STEPPINGSTONE SCHOLARS INC 1301 CECIL B MOORE AVE RITTER ANNEX 456 PHILADELPHIA, PA 19122	42-1612131	501(C)(3)	107,000				RESEARCH
UNIV OF TEXAS HEALTH SCI CTR TYLER 11937 U S HIGHWAY 271 TYLER, TX 75708	75-6001354	115	111,973				RESEARCH

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

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UNIVERSITY OF NORTH DAKOTA SCHOOL OF MEDICINE DEPT OF BIOMEDICAL SCI 501 N COLUMBIA RD ST GRAND FORKS, ND 58202	45-6002491	115	112,112				RESEARCH
HARVARD UNIVERSITY GENERAL ACCTS RECEIVABLE PO BOX 4999 BOSTON, MA 02212	04-2103580	501(C)(3)	129,495				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
WISTAR INSTITUTE OF ANATOMY AND BIOLOGY 3601 SPRUCE ST PHILADELPHIA, PA 19104	23-6434390	501(C)(3)	134,518				RESEARCH
ST JUDE CHILDRENS RESEARCH HOSPITAL PO BOX 1000 DEPARTMENT 949 MEMPHIS, TN 38148	62-0646012	501(C)(3)	136,946				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
TEXAS A&M UNIVERSITY 400 HARVEY MITCHELL PKWY STE 300 COLLEGE STATION, TX 77845	74-6000531	115	139,256				RESEARCH
RUTGERS UNIVERSITY 33 KNIGHTSBRIDGE ROAD 2ND FLOOR EAST PISCATAWAY, NJ 08854	22-6001086	501(C)(3)	142,900				RESEARCH

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

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UNIVERSITY OF NEBRASKA MEDICAL CENTER ACCOUNTS RECEIVABLE 985045 NEBRASKA MEDICAL CENTER OMAHA, NE 68198	47-0049123	501(C)(3)	149,636				RESEARCH
UNIVERSITY OF CHICAGO 105 WEST ADAMS STREET SUITE 1700 CHICAGO, IL 60603	36-2177139	501(C)(3)	153,784				RESEARCH

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

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KAISER FOUNDATION RESEARCH INSTITUTE 2000 BROADWAY OAKLAND, CA 94612	94-1105628	501(C)(3)	159,738				RESEARCH
YALE UNIVERSITY BREANNE PORTER MOCK TRIAL 206 ELM ST PO BOX 203745 NEW HAVEN, CT 06520	06-0646973	501(C)(3)	166,797				RESEARCH

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

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WASHINGTON UNIVERSITY CAMPUS BOX 8230 660 S EUCLID AVE SAINT LOUIS, MO 63110	43-0653611	501(C)(3)	181,911				RESEARCH
ARTISTYEAR ELIZABETH B WARSHAWER ARTISTYEAR 2114 DELANCEY STREET PHILADELPHIA, PA 19103	81-1281053	501(C)(3)	182,954				RESEARCH

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

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LOCAL INITIATIVES SUPPORT CORPORATION SUITE 500S 718 ARCH ST PHILADELPHIA, PA 19106	13-3030229	501(C)(3)	192,874				RESEARCH
REGENTS OF UNIV OF CALIFORNIA BERKELEY DEPT OF INTEGRATIVE BIOLOGY 3040 VLSB MC 3140 BERKELEY, CA 94720	94-6002123	501(C)(3)	224,716				RESEARCH

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

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TEMPLE UNIVERSITY PHYSICIANS CONTRACT PAYMENTS PO BOX 827997 PHILADELPHIA, PA 19182	23-1365971	501(C)(3)	229,967				RESEARCH
FIRST UP 1608 WALNUT STREET SUITE 300 PHILADELPHIA, PA 19103	23-6438144	501(C)(3)	236,968				RESEARCH

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

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DELAWARE STATE UNIV 1200 N DUPONT HWY DOVER, DE 19901	51-0305893	501(C)(3)	246,866				RESEARCH
GOORU INC 350 TWIN DOLPHIN DRIVE SUITE 115 REDWOOD CITY, CA 94065	27-3744004	501(C)(3)	249,575				RESEARCH

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

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REGENTS OF THE UNIV OF MICHIGAN ACCOUNTS RECEIVABLE 1000 VICTORS WAY SUITE 1A ANN ARBOR, MI 48108	38-6006309	501(C)(3)	251,335				RESEARCH
PPG INDUSTRIES INC 4004 FAIRVIEW INDUSTRIAL DR S E SALEM, OR 97302	25-1612585	FOR-PROFIT	268,693				RESEARCH

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

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NEW YORK UNIVERSITY OFFICE OF THE BURSAR 726 BROADWAY NINTH FLOOR NEW YORK, NY 10003	13-5562308	501(C)(3)	290,936				RESEARCH
ROWAN UNIVERSITY 201 MULLICA HILL RD GLASSBORO, NJ 08028	22-2764819	115	301,975				RESEARCH

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

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FAB YOUTH PHILLY 1928 E ARIZONA ST PHILADELPHIA, PA 19125	46-3447591	FOR-PROFIT	324,617				RESEARCH
ICF INCORPORATED LLC PO BOX 775367 CHICAGO, IL 60677	52-0893615	FOR-PROFIT	345,685				RESEARCH

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

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PEOPLE'S EMERGENCY CENTER 325 N 39TH ST PHILADELPHIA, PA 19104	23-2017882	501(C)(3)	351,758				RESEARCH
JOHNS HOPKINS UNIVERSITY PO BOX 65045 BALTIMORE, MD 21264	52-0595110	501(C)(3)	371,116				RESEARCH

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

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CASE WESTERN RESERVE UNIVERSITY DEPT OF MATERIALS SCIENCE ENGINEERI G 312 WHITE BLDG CLEVELAND, OH 44106	34-1018992	501(C)(3)	374,439				RESEARCH
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK 61 WEST 62ND STREET NEW YORK, NY 10023	13-5598093	501(C)(3)	386,625				RESEARCH

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

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DANA-FARBER CANCER INSTITUTE RESEARCH ACCOUNTING MAIL STOP BP451 450 BROOKLINE AVE BOSTON, MA 02215	04-2263040	501(C)(3)	434,186				RESEARCH
UNIV OF CONNECTICUT 1800 ASYLUM AVE WEST HARTFORD, CT 06117	06-0772160	115	507,080				RESEARCH

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

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CITY OF PHILADELPHIA 1401 JFK BOULEVARD 5TH FL PHILADELPHIA, PA 19102	23-6003047	115	848,128				RESEARCH
REGENTS OF UNIVERSITY OF CALIFORNIA DAVIS ONE SHIELDS AVE DAVIS, CA 95616	94-6036494	501(C)(3)	875,829				RESEARCH

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

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TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 140 FRANKLIN BLDG 3451 WALNUT ST PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	924,054				RESEARCH
SCHOOL DISTRICT OF PHILA 550 N BROAD ST PHILADELPHIA, PA 19130	23-6004102	501(C)(3)	1,447,833				RESEARCH

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

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AEROPEST LLC PO BOX 430 SPIRIT LAKE, ID 83869	84-5101616	FOR-PROFIT	12,500				AWARD
COMMUNITY INTEGRATED SERVICES 441 N 5TH STREET PHILADELPHIA, PA 19123	23-2648381	501(C)(3)	23,000				AWARD

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

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4A SECURITY & COMPLIANCE 1840 BERM LANE UPPER BLACK EDDY, PA 18972	46-1720522	FOR-PROFIT	8,345				RESEARCH

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

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.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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 checked="" 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 on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		No
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 on Line 1a?	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 checked="" 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?	Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?		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?		No
b Any related organization?		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?		No
b Any related organization?		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.		No
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.		No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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
PART I, LINE 1A	UNIVERSITY POLICY AUTHORIZES BUSINESS OR FIRST-CLASS TRAVEL FOR ALL EMPLOYEES WHEN FLIGHTS EXCEED FIVE HOURS IN DURATION WITH THE APPROPRIATE APPROVAL IN ADVANCE. GENERALLY, THE UNIVERSITY DOES NOT PAY FOR OR REIMBURSE THE TRAVEL-RELATED OR ENTERTAINMENT EXPENSES OF AN EMPLOYEE'S OR OTHER AUTHORIZED PERSON'S SPOUSE/COMPANION. SPOUSAL/COMPANION TRAVEL IS PAID FOR OR REIMBURSED BY THE UNIVERSITY ON RARE OCCASIONS, AND ONLY IF SUCH TRAVEL MEETS EXCEPTIONS OUTLINED IN THE UNIVERSITY'S SPOUSAL/COMPANION POLICY. TO QUALIFY FOR AN EXCEPTION, THERE MUST BE A DOCUMENTED AND BONA FIDE BUSINESS PURPOSE DIRECTLY BENEFITING THE UNIVERSITY, AND THE PRESENCE OF THE SPOUSE/COMPANION MUST BE ESSENTIAL TO THE UNIVERSITY EMPLOYEE OR OTHER AUTHORIZED PERSONNEL. THE PRESIDENT IS PROVIDED A MONTHLY HOUSING ALLOWANCE, WHICH IS INCLUDED IN HIS TAXABLE INCOME. THE PRESIDENT IS ALSO PROVIDED A DRIVER TO ATTEND UNIVERSITY RELATED EVENTS, THE VALUE OF WHICH IS NOT INCLUDED IN TAXABLE INCOME. THE PRESIDENT RECEIVES SOCIAL CLUB MEMBERSHIPS FOR BUSINESS-RELATED ACTIVITIES. THE PRESIDENT IS REQUIRED TO REPORT ANY PERSONAL USE OF SOCIAL CLUB MEMBERSHIPS, AND SUCH USE IS INCLUDED IN TAXABLE INCOME. SOCIAL CLUB DUES FOR BUSINESS-RELATED ACTIVITIES WERE PROVIDED FOR SENIOR VICE PRESIDENTS AND DEANS, AND ARE TREATED AS NON-TAXABLE COMPENSATION. SENIOR VICE PRESIDENTS AND DEANS ARE REQUIRED TO REPORT ANY PERSONAL USE OF SOCIAL CLUB MEMBERSHIPS, AND SUCH USE IS INCLUDED IN TAXABLE INCOME.
PART I, LINE 1B	HOUSING ALLOWANCES AND SOCIAL CLUB MEMBERSHIPS WERE APPROVED BY THE PRESIDENT OR PROVOST.
PART I, LINES 4A-B	THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE PAYMENTS CONTINGENT ON SEPARATION FROM THE ORGANIZATION: - SUSAN ALDRIDGE RECEIVED \$189,500 IN A LUMP SUM SEVERANCE PAYMENT AS WELL AS A \$123,500 PERFORMANCE BONUS. - RANDY DEIKE RECEIVED \$221,000 IN A LUMP SUM SEVERANCE PAYMENT, \$309,986 IN DEFERRED COMPENSATION, AND A \$128,000 PERFORMANCE BONUS. - KEITH ORRIS RECEIVED \$156,000 IN A LUMP SUM SEVERANCE PAYMENT AS WELL AS A \$183,000 PERFORMANCE BONUS. THE UNIVERSITY PROVIDES MR. FRY WITH CERTAIN SUPPLEMENTAL RETIREMENT AND DEATH BENEFITS, EFFECTIVE AS OF JULY 1, 2012. THE ANNUAL ALLOCATION AMOUNT IS CONDITIONED ON MR. FRY'S CONTINUED EMPLOYMENT THROUGH THE END OF THE IMMEDIATELY PRECEDING FISCAL YEAR (OR UPON THE DATE OF DEATH, TOTAL DISABILITY, OR INVOLUNTARY TERMINATION, IF EARLIER). THIS ANNUAL ALLOCATION AMOUNT IS EQUAL TO 11% OF THE PREVIOUS FISCAL YEAR TOTAL BASE AND BONUS COMPENSATION PAID TO MR. FRY THAT EXCEEDS THE COMPENSATION LIMIT UNDER INTERNAL REVENUE CODE SECTION 401(A)(17).
PART II:	THE UNIVERSITY PROVIDES JOHN FRY, HELEN BOWMAN, AND DAVID UNRUH WITH DEFERRED COMPENSATION ARRANGEMENTS. THE UNIVERSITY WILL CREDIT MR. FRY WITH \$300,000 ON JUNE 30, 2019, AND ON EACH FOLLOWING JUNE 30 THROUGH 2021 WHILE HE REMAINS EMPLOYED BY THE UNIVERSITY AS PRESIDENT AND CHIEF EXECUTIVE OFFICER. THE AMOUNT CREDITED ON JUNE 30, 2021 WILL ALSO INCLUDE INVESTMENT EARNINGS, GAINS, AND LOSSES, PROVIDED MR. FRY IS EMPLOYED BY THE UNIVERSITY ON THAT DATE. IN THE EVENT MR. FRY VOLUNTARILY TERMINATES HIS EMPLOYMENT WITHOUT GOOD REASON WITH THE UNIVERSITY PRIOR TO JUNE 30, 2021, OR THE UNIVERSITY TERMINATES MR. FRY'S EMPLOYMENT FOR CAUSE, THE DEFERRED COMPENSATION SHALL BE FORFEITED. THE UNIVERSITY WILL CREDIT MS. BOWMAN WITH \$50,000 ON EACH SEPTEMBER 1, BEGINNING WITH SEPTEMBER 1, 2016 AND ENDING SEPTEMBER 1, 2020. INTEREST ACCRUED WILL ALSO BE PAID IF SHE REMAINS EMPLOYED WITH THE UNIVERSITY. MS. BOWMAN WILL BECOME FULLY VESTED IN THE BALANCE OF HER ACCOUNT UPON THE EARLIEST OF THE FOLLOWING: (I) SEPTEMBER 1, 2020, (II) HER INVOLUNTARY TERMINATION BY THE UNIVERSITY FOR ANY REASON OTHER THAN CAUSE, (III) DEATH, OR (IV) TERMINATION DUE TO TOTAL AND PERMANENT DISABILITY. IF MS. BOWMAN RESIGNS OR IS TERMINATED BY THE UNIVERSITY FOR CAUSE BEFORE THE ACCOUNT IS VESTED, THE ENTIRE ACCOUNT WILL BE FORFEITED. THE UNIVERSITY WILL CREDIT MR. UNRUH WITH \$75,000 ON EACH JULY 1, BEGINNING WITH JULY 1, 2020 AND ENDING JULY 1, 2021. INTEREST ACCRUED WILL ALSO BE PAID IF HE REMAINS EMPLOYED WITH THE UNIVERSITY. MR. UNRUH WILL BECOME FULLY VESTED IN THE BALANCE OF HIS ACCOUNT UPON THE EARLIEST OF THE FOLLOWING: (I) JULY 1, 2021, (II) HIS INVOLUNTARY TERMINATION BY THE UNIVERSITY FOR ANY REASON OTHER THAN CAUSE, (III) DEATH, OR (IV) TERMINATION DUE TO TOTAL AND PERMANENT DISABILITY. IF MR. UNRUH RESIGNS OR IS TERMINATED BY THE UNIVERSITY FOR CAUSE BEFORE THE ACCOUNT IS VESTED, THE ENTIRE ACCOUNT WILL BE FORFEITED. THE UNIVERSITY PAID DAVID UNRUH DEFERRED COMPENSATION OF \$205,112 ON JUNE 28, 2019, PER A DEFERRED COMPENSATION AGREEMENT THAT BEGAN ON JULY 1, 2015. MR. UNRUH HAD BEEN CREDITED \$40,000 ON JULY 1, 2015, AND ON EACH FOLLOWING JULY 1 THROUGH 2019. IN ADDITION, THE DEFERRED COMPENSATION WAS CREDITED WITH EARNINGS BASED ON INVESTMENT OPTIONS SELECTED BY MR. UNRUH. MR. UNRUH BECAME FULLY VESTED IN THE DEFERRED COMPENSATION ON JULY 1, 2019, WHEN AN ADDITIONAL TWO YEAR DEFERRED COMPENSATION ARRANGEMENT BEGAN. THE UNIVERSITY PREVIOUSLY PROVIDED BRIAN BLAKE WITH A DEFERRED COMPENSATION AGREEMENT. AS DR. BLAKE RESIGNED IN OCTOBER 2019, THE ENTIRE ACCOUNT WAS FORFEITED.

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 EVELYN THIMBA SVP ENROLLMENT MANAGEMENT	(i)	266,875	50,000	0	25,200	17,159	359,234	0
	(ii)	0	0	0	0	0	0	0
1 ALEISTER SAUNDERS AS OF 1019 EXEC VICE PROV, RES & INNOV	(i)	309,174	0	0	23,460	18,175	350,809	0
	(ii)	0	0	0	0	0	0	0
2 BRIAN T KEECH SVP GOV & COMMUNITY RELATI	(i)	269,807	30,000	0	30,800	18,174	348,781	0
	(ii)	0	0	0	0	0	0	0
3 JOSEPH B HUGHES FORMER DEAN, COLLEGE OF EN	(i)	295,973	0	0	29,908	14,747	340,628	0
	(ii)	0	0	0	0	0	0	0
4 SUBIR SAHU SVP STUDENT SUCCESS	(i)	287,568	0	0	25,200	7,148	319,916	0
	(ii)	0	0	0	0	0	0	0
5 JANICE K MARINI FORMER SECRETARY	(i)	247,313	0	0	27,585	13,758	288,656	0
	(ii)	0	0	0	0	0	0	0
6 CHARLES CAIRNS AS OF 919 DEAN AND SVP, MED AFFAIRS	(i)	251,647	0	10,000	15,000	5,941	282,588	0
	(ii)	0	0	0	0	0	0	0
7 DARIN PFEIFER AS OF 919 SECRETARY	(i)	141,890	0	0	13,354	13,699	168,943	0
	(ii)	0	0	0	0	0	0	0

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

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

▶ **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 instructions and the latest information.**

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2012	23-2243852	70917SCB7	11-01-2012	33,242,964	REFUNDING OF 2002 SERIES A AND SERIES 2003		X		X		X
B	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2011A	23-2243852	70917RX75	05-16-2011	160,304,025	NEW CONSTR/BLDG RENOV/REFUNDING OF 1997, 1998, 1998-2, 2003B	X			X		X
C	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2007B	23-2243852	70917RNP6	10-04-2007	30,000,000	SCIENCE BLDG/DORMITORY/WELLNESS CENTER		X		X		X
D	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2005A&B	23-2243852	70917N3B8	02-16-2005	61,312,145	CAPITAL IMPROVEMENT/EQUIPMENT/ADV REFUNDING OF 1997/1999 BONDS	X			X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	19,660,000		37,290,000		7,560,000		9,140,000	
2	Amount of bonds legally defeased			128,425,000				24,490,000	
3	Total proceeds of issue	33,242,964		161,954,495		30,572,813		63,310,555	
4	Gross proceeds in reserve funds					2,700,000			
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	415,332		1,386,270		285,425		833,218	
8	Credit enhancement from proceeds					11,508		879,260	
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds			101,472,529		27,575,880		31,998,378	
11	Other spent proceeds	32,827,632		59,095,696				29,599,699	
12	Other unspent proceeds								
13	Year of substantial completion	2012		2014		2012		2012	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X		X			X		X
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, 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		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		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 ▶		0.280 %		0.040 %		0 %		0.180 %
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %		0.030 %		0 %		0.880 %
6 Total of lines 4 and 5		0.280 %		0.070 %		0 %		1.060 %
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?								
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		
b Exception to rebate?	X			X		X		
c No rebate due?	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								WELLS FARGO BANK
c Term of hedge								1980.0000000000 %
d Was the hedge superintegrated?								X
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							ROYAL BANK OF CANADA	
c Term of GIC							250.0000000000 %	
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?							X	
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
DATE REBATE COMPUTATION PERFORMED	ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2012 DATE THE REBATE COMPUTATION WAS PERFORMED: 06/05/2013 ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2011A DATE THE REBATE COMPUTATION WAS PERFORMED: 06/02/2014 ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2007B DATE THE REBATE COMPUTATION WAS PERFORMED: 08/16/2012 ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2016 DATE THE REBATE COMPUTATION WAS PERFORMED: 12/04/2017

Return Reference	Explanation
<p>SCHEDULE K SUPPLEMENTAL INFORMATION</p>	<p>PART II, LINE 3, COLUMN A: THE TOTAL PROCEEDS EXCEED THE ISSUE PRICE BY THE INVESTMENT EARNINGS ON THE PROJECT FUND PART II, LINE 11, COLUMNS A & B: THE OTHER SPENT PROCEEDS ARE THE REFUNDING PROCEEDS OF THE ISSUE PART IV, LINE 2C, COLUMN A: THE FINAL REBATE REPORT WAS COMPLETED ON 6/7/2013 PART IV, LINE 2C, COLUMN B: THE FINAL REBATE REPORT WAS COMPLETED ON 6/5/2013, WHICH WAS DETERMINED THE ISSUE MET THE 6 MONTH SPENDING EXCEPTION PART IV, LINE 2C, COLUMN C: THE FINAL REBATE REPORT WAS COMPLETED ON 8/16/2012 PART IV, LINE 2C, COLUMN D: THE FINAL REBATE REPORT WAS COMPLETED ON 09/20/2010 PART II, LINE 3: THE TOTAL PROCEEDS EXCEED THE ISSUE PRICE BY THE INVESTMENT EARNINGS ON THE PROJECT FUND PART II, LINE 11, COLUMNS A & B: THE OTHER SPENT PROCEEDS ARE THE REFUNDING PROCEEDS OF THE ISSUE PART IV, LINE 2C, COLUMN A: A REBATE CALCULATION WAS PERFORMED AS OF 10/01/2015 PART IV, LINE 2C, COLUMN B: THE FINAL REBATE REPORT WAS PERFORMED AS OF 08/16/2012</p>

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

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
DREXEL UNIVERSITY

Employer identification number

23-1352630

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	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2016	23-2243852	70917SXU2	08-02-2016	136,019,435	REFUNDING OF 2005A SERIES A AND SERIES 2003		X		X		X
B	PENNSYLVANIA HIGHER EDUCATIONAL FACILITIES AUTHORITY 2017	23-2243852	70917SV67	12-26-2017	141,570,375	ADVANCE REFUNDING PORTION OF SERIES 2011A		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired				9,605,000				
2	Amount of bonds legally defeased								
3	Total proceeds of issue		136,019,435		141,750,375				
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows				141,053,099				
7	Issuance costs from proceeds		692,483		697,276				
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds		135,326,952						
12	Other unspent proceeds								
13	Year of substantial completion		2016		2017				
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X			X				
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?	X		X					
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	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				
2	Are there any lease arrangements that may result in private business use of bond-financed property?	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					
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					
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 ▶		0.130 %		0.870 %				
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0.320 %		0 %				
6 Total of lines 4 and 5		0.450 %		0.870 %				
7 Does the bond issue meet the private security or payment test?		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				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	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				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X				
b Exception to rebate?		X	X					
c No rebate due?	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				
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

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				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the requirements of section 148?	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					

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) NEWPORT CAPITAL GROUP LLC	>35% TRUSTEE OWNED	158,753	CONSULTING FEE		No
(2) KIERA MURASKO-BLANK	FAMILY OF FORMER KEY EMP	69,588	EMPLOYMENT		No
(3) TINA DWYER	FAMILY OF KEY EMP	51,826	EMPLOYMENT		No
(4) ERIN SAHU	FAMILY OF KEY EMP	86,991	EMPLOYMENT		No
(5) NOMI EVE	FAMILY OF KEY EMP	52,769	EMPLOYMENT		No

Part V Supplemental Information

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

Return Reference	Explanation

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **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
DREXEL UNIVERSITY

Employer identification number
23-1352630

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	25	276,500	FAIR MARKET VALUE
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	46	1,222,792	FAIR MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
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** **11**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		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 didn't 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
PART I, COLUMN (B):	THE ORGANIZATION IS REPORTING THE NUMBER OF ITEMS IN COLUMN (B), NOT THE NUMBER OF CONTRIBUTIONS.

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

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization
DREXEL UNIVERSITY

Employer identification number

23-1352630

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART V, LINES 7G & 7H:	NOT APPLICABLE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	MICHAEL C. FORMAN AND JOHN A. FRY - BUSINESS RELATIONSHIP MICHAEL C. FORMAN AND BRIAN R. FORD - BUSINESS RELATIONSHIP MICHAEL C. FORMAN AND CHARLES P. PIZZI - BUSINESS RELATIONSHIP MICHAEL C. FORMAN AND JOSEPH P. UJOBAL - BUSINESS RELATIONSHIP DENIS P. O'BRIEN, NICHOLAS DEBENEDICTIS AND CHARLES P. PIZZI - BUSINESS RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 IS PREPARED BY THE TAX OFFICE AND SUBMITTED TO THE EXECUTIVE VICE PRESIDENT, TREASURER AND CHIEF OPERATING OFFICER FOR REVIEW AND SIGNING. PRIOR TO FILING, FORM 990 AND ALL REQUIRED SCHEDULES ULTIMATELY FILED WITH THE INTERNAL REVENUE SERVICE WERE AVAILABLE TO EACH MEMBER OF THE BOARD OF TRUSTEES FOR THEIR REVIEW AND COMMENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>DREXEL UNIVERSITY'S CONFLICT OF INTEREST POLICY APPLIES TO ALL EMPLOYEES (WHETHER A KEY EMPLOYEE OR NOT), OFFICERS, AND TRUSTEES OF THE UNIVERSITY. THE CONFLICT OF INTEREST POLICY IS INTENDED TO SATISFY COMPLIANCE REQUIREMENTS AND GUIDE UNIVERSITY PERSONNEL IN AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT. THE KEY TO AVOIDING THOSE SITUATIONS THAT CAN RESULT IN A CONFLICT OF INTEREST OR COMMITMENT IS TO MAKE CONSTITUENTS AWARE OF WHAT CONSTITUTES A CONFLICT OF INTEREST AND FOR THEM TO DISCLOSE POTENTIAL SITUATIONS BEFORE THE ACTIVITY IS UNDERTAKEN. THE FORMAT FOR THE DISCLOSURE IS FOR EACH EMPLOYEE, OFFICER OR TRUSTEE TO COMPLETE A QUESTIONNAIRE ANNUALLY. THE COMPLETED QUESTIONNAIRE IS SUBMITTED TO THE HUMAN RESOURCES DEPARTMENT IN THE CASE OF EMPLOYEES REVIEWED AS REQUIRED BY THE VICE PRESIDENT AND UNIVERSITY CHIEF COMPLIANCE AND PRIVACY OFFICER. COMPLETED QUESTIONNAIRES FOR OFFICERS AND TRUSTEES ARE SUBMITTED DIRECTLY TO THE OFFICE OF THE GENERAL COUNSEL FOR REVIEW. AFTER REVIEW A DETERMINATION IS MADE AS TO WHETHER A CONFLICT OF INTEREST EXISTS AND AT WHAT LEVEL. THOSE EMPLOYEE CONFLICTS THAT ARE DETERMINED TO BE DETRIMENTAL TO THE UNIVERSITY ARE DISCUSSED WITH THE EMPLOYEE AND THE EMPLOYEE IS ENCOURAGED TO TERMINATE THE ACTIVITY. EMPLOYEES WHO WILLINGLY OR OTHERWISE CONTINUE TO VIOLATE THE CONFLICT OF INTEREST POLICY ARE SUBJECT TO DISCIPLINARY ACTION UP TO AND INCLUDING SUSPENSION WITHOUT PAY, DEMOTION OR TERMINATION OF EMPLOYMENT. IN THE CASE OF TRUSTEES, A CONFLICT OF INTEREST QUESTIONNAIRE IS MAILED ANNUALLY. TRUSTEES ARE REQUIRED TO COMPLETE THE QUESTIONNAIRE AND DISCLOSE ANY INTERESTS IN ANY CORPORATION, PARTNERSHIP OR OTHER ORGANIZATION IN WHICH THEY OWN OR CONTROL 5% OR MORE OF THE ENTITY.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>DREXEL IS COMMITTED TO COMPENSATING ITS EXECUTIVE TEAM AT A FAIR AND COMPETITIVE LEVEL. TO MEET THIS GOAL, DREXEL UNIVERSITY'S HUMAN RESOURCES DEPARTMENT PREPARES AN EXECUTIVE COMPENSATION ANALYSIS ANNUALLY USING THE COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION OF HUMAN RESOURCES (CUPA) SURVEY AND IRS FORM 990 INFORMATION AS THEY RELATE TO THE UNIVERSITY'S PEER GROUPS. POSITIONS INCLUDED IN THE ANALYSIS WERE THE PRESIDENT, EXECUTIVE VICE PRESIDENTS, SENIOR VICE PRESIDENTS, AND HIGHLY-COMPENSATED DEANS. USING THE EXECUTIVE COMPENSATION ANALYSIS, A THIRD-PARTY ADVISOR PREPARED A REPORT AND SUBMITTED THE REPORT TO THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES (THE "COMMITTEE") ALONG WITH CERTAIN PERFORMANCE CRITERIA. THE COMPENSATION ANALYSIS SERVED AS THE BASIS FOR THE PRESIDENT'S RECOMMENDATIONS FOR UNIVERSITY EXECUTIVES. THE THIRD-PARTY ADVISOR PROVIDED THE COMMITTEE WITH A LETTER ON THE APPROPRIATENESS OF THE DECISION-MAKING PROCESS AND REASONABLENESS OF THE PROPOSED COMPENSATION. ALL COMPENSATION WAS APPROVED BY THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES PRIOR TO BECOMING EFFECTIVE ON JULY 1, 2020.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	DREXEL UNIVERSITY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC IN A VARIETY OF WAYS. THE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON ITS WEBSITE, AND ITS GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES HAS RESPONSIBILITY FOR SELECTING THE INDEPENDENT ACCOUNTANT AND OVERSEEING THE AUDIT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION B, LINE 16B:	THE UNIVERSITY IMPLEMENTED A WRITTEN PROCEDURE, WHICH WAS APPROVED BY THE PRESIDENT'S CABINET, FOR EVALUATION OF JOINT VENTURE ARRANGEMENTS TO ENSURE THAT SUCH ARRANGEMENTS ARE CONSISTENT WITH THE UNIVERSITY'S TAX-EXEMPT PURPOSE.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
DREXEL UNIVERSITY

Employer identification number
23-1352630

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) DRAGON RISK LIMITED CO 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 47-1086093	LIABILITY INSURANCE	VT	381,623	14,522,804	DREXEL UNIVERSITY
(2) DUC LLC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 46-4944473	DEVELOPMENT AND INVESTMENT	PA	0	0	DREXEL UNIVERSITY
(3) DREXEL GLOBAL INITIATIVES LLC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 47-1829445	EDUCATIONAL	PA	0	0	DREXEL UNIVERSITY
(4) DREXEL UNIVERSITY ONLINE LLC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 47-3606161	EDUCATIONAL	DE	20,949,951	14,508,073	DREXEL UNIVERSITY

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) ACADEMIC ASSETS INC 3201 ARCH STREET SUITE 420 PHILADELPHIA, PA 19104 23-2455915	HOLDING COMPANY	PA	501(C)(3)	12C, III-FI	DREXEL UNIVERSITY	Yes	
(2) ACADEMIC PROPERTIES INC 3201 ARCH STREET SUITE 420 PHILADELPHIA, PA 19104 23-2411680	STUDENT HOUSING	PA	501(C)(3)	12C, III-FI	ACADEMIC ASSETS INC		No
(3) THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA 1900 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19103 23-1352000	MUSEUM	PA	501(C)(3)	11	DREXEL UNIVERSITY	Yes	
(4) 11TH STREET FAMILY HEALTH SERVICES INC 3201 ARCH STREET SUITE 420 PHILADELPHIA, PA 19104 46-4233500	PROVIDES FACILITIES USE FOR DREXEL UNIVERSITY	PA	501(C)(3)	12C, III-FI	DREXEL UNIVERSITY	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	
(1) 3509 SPRING GARDEN LP 3201 ARCH ST STE 420 PHILADELPHIA, PA 19104 46-2116704	REAL ESTATE	PA						No			No	
(2) 3509 SPRING GARDEN MT LP 3201 ARCH ST STE 420 PHILADELPHIA, PA 19104 46-3273473	REAL ESTATE	PA						No			No	
(3) DREXEL UNIVERSITY CITY DEVELOPMENT LLC 3201 ARCH ST STE 420 PHILADELPHIA, PA 19104 46-4883724	REAL ESTATE INVESTMENT	PA						No			No	
(4) 1200 CHESTNUT STREET I LP 3201 ARCH ST STE 420 PHILADELPHIA, PA 19104 81-4692503	REAL ESTATE	PA						No			No	
(5) DUC LLC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 46-4944473	DEVELOPMENT AND INVESTMENT	PA	DREXEL UNIVERSITY	RELATED	153,624	19,427,024		No			No	95.000 %

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) 3509 SPRING GARDEN GP INC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 46-2117383	REAL ESTATE	PA	DREXEL UNIVERSITY	C		2,317,873	100.000 %	Yes	
(2) 3509 SPRING GARDEN MT MANAGER INC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 46-2121349	REAL ESTATE	PA	DREXEL UNIVERSITY	C		84	100.000 %	Yes	
(3) 1200 CHESTNUT STREET GP INC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 81-4705625	REAL ESTATE	PA	DREXEL UNIVERSITY	C		22,625,716	100.000 %	Yes	
(4) 3205 LANCASTER AVE INC 3201 ARCH STREET STE 420 PHILADELPHIA, PA 19104 82-4364098	REAL ESTATE	PA	DREXEL UNIVERSITY	C			100.000 %	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	Yes	
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)	Yes	
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)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)	Yes	
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.

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 23-1352630

Name: DREXEL UNIVERSITY

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

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
11TH STREET FAMILY SERVICES INC	K	560,000	BOOK AMOUNT
1200 CHESTNUT STREET I LP	E	174,000	BOOK AMOUNT
1200 CHESTNUT STREET I LP	A	2,146,000	BOOK AMOUNT
3509 SPRING GARDEN MT LP	K	343,000	BOOK AMOUNT
3509 SPRING GARDEN LP	K	277,000	BOOK AMOUNT
ACADEMIC PROPERTIES INC	K	4,665,000	BOOK AMOUNT
ACADEMIC PROPERTIES INC	M	169,000	BOOK AMOUNT
DUC LLC	B	19,273,000	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	Q	236,000	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	L	4,135,000	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	D	1,701,000	BOOK AMOUNT
THE ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA	A	23,000	BOOK AMOUNT