DLN: 93493069006250 OMB No 1545-0047 Form **990 Return of Organization Exempt From Income Tax** 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the

▶ Do not enter social security numbers on this form as it may be made public

 \blacktriangleright Go to $\underline{www.irs.qov/Form990}$ for instructions and the latest information.

Open to Public Inspection

Treasui Interna		nue Service	► Go to <u>www.irs.qov/Form990</u> for instructions and the i	atest infor	mation.		Inspection			
A Fo	or the	e 2019 ca	alendar year, or tax year beginning 06-01-2018 ,and ending 05-31	-2019						
B Che	ck ıf a _l	pplicable	C Name of organization Illinois Institute of Technology		D Employe	er identifi	cation number			
		change	fillios fistitute of Technology		36-2170	0136				
☐ Nai		-	Doing business as		_					
		n/terminated								
		d return	Number and street (or P O box if mail is not delivered to street address) Room/suit 3424 SOUTH STATE STREET TC-4 FL	ie .	E Telephon	e number				
□ Арі	olicatio	on pending			(312) 5	67-3825				
			City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL 60616							
			F Name and address of principal officer		G Gross re		00,838,887			
			Alan W Cramb		his a group ref	turn for	□Yes ☑ No			
			SUITE 1900 10 W 35TH STREET CHICAGO, IL 60616		ordinates? all subordinat	es				
I Tax	-exen	npt status	·	incl	uded?		☐ Yes ☐No			
			✓ 501(c)(3) ☐ 501(c)() ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		No," attach a l up exemption	•	•			
J 444	edsit	e:► www	W IIT EDU	(e) Gio	up exemption	Humber				
K Forn	n of or	rganization	☑ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of for	mation 1940	M State	of legal domicile IL			
1 1 0111	01 01	garnzation	Corporation — Hast — Association — Other P							
Pa	ırt I	Sumi	mary							
			cribe the organization's mission or most significant activities DE DISTINCTIVE AND RELEVANT EDUCATION IN AN ENVIRONMENT OF SCI!	ENTIFIC TE	ברווטו סכוכא	I AND E	POEESSIONAL			
é			GE CREATION AND INNOVATION	LIVITITE, TE	CHIVOLOGICA	ic, AND	NOI ESSIONAL			
anc	-									
em	_									
NO.	2	Check thi	s box $\blacktriangleright \square$ if the organization discontinued its operations or disposed of ma	ore than 25	% of its net a	ssets				
ن ≉ح			of voting members of the governing body (Part VI, line 1a)		•	3	68			
5 9	4	Number o	of independent voting members of the governing body (Part VI, line 1b) .		•	4	66			
Ĭ.	5	Total num	nber of individuals employed in calendar year 2018 (Part V, line 2a)		•	5	4,006			
Activities & Governance			nber of volunteers (estimate if necessary)			6	107			
`			elated business revenue from Part VIII, column (C), line 12		•	7a	204,608			
	b	Net unrel	ated business taxable income from Form 990-T, line 34	· · ·		7b	0			
		C	one and anata (Data)(III line 14)	P	rior Year	-64	Current Year			
ē			ions and grants (Part VIII, line 1h)		63,052,5	_	84,788,322 279,548,821			
Rəvenue		_	Program service revenue (Part VIII, line 2g)							
æ			nt income (Part VIII, column (A), lines 3, 4, and 7d) enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,515,8	_	14,372,887 1,339,078			
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		351,835,7		380,049,108			
			and similar amounts paid (Part IX, column (A), lines 1–3)		113,217,0	_	122,331,391			
			paid to or for members (Part IX, column (A), line 4)		110,217,0		0			
S			other compensation, employee benefits (Part IX, column (A), lines 5–10)		151,169,1	166	150,501,802			
Expenses			nal fundraising fees (Part IX, column (A), line 11e)		38,5	_	99,334			
b ed			aising expenses (Part IX, column (D), line 25) ▶8,934,317		•		<u>, </u>			
Щ	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		94,215,4	121	97,232,693			
	18	Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		358,640,2	219	370,165,220			
	19	Revenue	less expenses Subtract line 18 from line 12		-6,804,4	197	9,883,888			
26.5 C 6.5				Beginnin	g of Current Y	ear	End of Year			
ets fan			. (0.1)(1.16)			70.5	622.000.111			
Net Assets or Fund Balances			ets (Part X, line 16)		635,766,7	_	632,900,141			
ž ž			Ilities (Part X, line 26)		238,451,0 397,315,7		245,678,268			
	rt II		ature Block		397,313,7	/ ⁴¹	387,221,873			
			erjury, I declare that I have examined this return, including accompanying s	schedules a	nd statements	s, and to	the best of my			
			f, it is true, correct, and complete Declaration of preparer (other than office	er) is based	on all informa	ation of v	hich preparer has			
any ki	iowie									
		*****			020-03-09					
Sign		Signati	re of officer	D	ate					
Here	:		EL HORAN VP FINANCE, CFO, & TREASURER							
		17	r print name and title) to	1 -	OTTN				
D-:-			rınt/Type preparer's name Preparer's signature Da		heck 🔲 ıf F	PTIN P00756195	i			
Paic		, F	rm's name ► CROWE LLP		elf-employed ırm's EIN ► 35-	0921680				
Prep		#I								
Use	υn	'Y F	rm's address ▶ 225 West Wacker Drive Suite 2600	P	hone no (312) 8	899-7000				
			Chicago, IL 606061224							
			this return with the preparer shown above? (see instructions)	<u> </u>	<u></u> .	✓ Y	es 🗆 No			
For P	aper	work Red	duction Act Notice, see the separate instructions.	Cat No	11282Y		Form 990 (2018)			

Form	990 (2018)					Page 2					
Pa	rt III Statement	of Program Ser	vice Accomplis	hments							
	Check If Sche	dule O contains a re	sponse or note to	any line in this Part III		🗹					
1	Briefly describe the o	organization's missio	n	·							
	ROVIDE DISTINCTIVE		JCATION IN AN EN	VIRONMENT OF SCIEN	TIFIC, TECHNOLOGICAL, AND	PROFESSIONAL KNOWLEDGE					
CREP	TION AND INNOVATION	JIN									
2	-	, ,		5 ,	hich were not listed on						
						. Yes 🗹 No					
	If "Yes," describe the										
3	Did the organization	cease conducting, o	r make significant	changes in how it cond	ucts, any program						
	services?										
	If "Yes," describe the	ese changes on Sche	edule O								
4		nd 501(c)(4) organız	ations are required	to report the amount of	largest program services, as of grants and allocations to of						
4a	(Code) (Expenses \$	222,104,426	including grants of \$	122,331,391) (Revenue \$	196,693,382)					
	See Additional Data										
4b	(Code) (Expenses \$	33,387,438	ıncludıng grants of \$) (Revenue \$	40,014,460)					
	See Additional Data										
4c	(Code) (Expenses \$	24,073,319	including grants of \$) (Revenue \$	16,685,844)					
	See Additional Data										
	See Additional Data	Table									
4d	Other program servi	•	•								
	(Expenses \$	42,199,242	including grants of	\$) (Revenue \$	26,155,135)					
4e	Total program serv	vice evnences	321,764,4	25	<u> </u>	· · · · · · · · · · · · · · · · · · ·					

Form	990 (2018)			Page 3
Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16^7 If "Yes," complete Schedule D, Part VII	11b		No
	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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

column (A), line 2º If "Yes," complete Schedule I, Parts I and III

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

No

20b

d the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current d former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete hedule J	23 24a 24b	Yes Yes	No
d former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete hedule J	23 24a	Yes	No
e last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and implete Schedule K. If "No," go to line 25a		Yes	
d the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		1
			No
40.0000 mm overlike series	24c		No
d the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
d the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"	25a		No
at the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		No
mer officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?	26		No
ntributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		No
	28a		No
	28b		No
	28c	Yes	
ma l	29	Yes	
	30		No
d the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	32		No
d the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 1 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
961	34	Yes	
d the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	35b	Yes	
	36		No
d the organization conduct more than 5% of its activities through an entity that is not a related organization and that treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	38	Yes	
	the displacement of the proposed of the proposed of the organization of the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," in mipslete Schedule L, Part I. the organization has not been reported on any of the organization's prior Forms 990 or 990-E2? "Yes," complete Schedule L, Part I. d the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or mer officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? "Yes," complete Schedule L, Part II. d the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial intributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member any of these persons? If "Yes," complete Schedule L, Part III. as the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV structions for applicable filing thresholds, conditions, and exceptions) current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, rt IV. family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, rt IV. family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, rt IV. at the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. d the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation intributions? If "Yes," complete Schedule M. d the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part I. d the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and it V, Iiii III. d the organization have a controlled entity within the meaning of section \$12(b)(13)? If "Yes," comp	the organization angage in an excess benefit transaction with a disqualified person during the year? If "Yes," mighete Schedule L, Part I . 25a the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and at the dramation has not been resported on any of the organization's prior Forms 990 or 990-EZ? 25b "Yes," complete Schedule L, Part I . 25b "Yes," complete Schedule L, Part I . 25c and the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial thributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member any of these persons? If "Yes," complete Schedule L, Part III . 27 as the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial thributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member any of these persons? If "Yes," complete Schedule L, Part III . 28c as the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV . 28a as the organization applicable filing thresholds, conditions, and exceptions) current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, It IV . 28b carrier of firector, trustee, or director indirect owner? If "Yes," complete Schedule L, Part IV . 28c dit he organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation nitributions? If "Yes," complete Schedule M . 30 dit he organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . 31 dit he organization sell, exchange, dispose of, or transfer more than 25% of its net assets? "Yes," complete Schedule R, Part II . 31 dit he organization receive contributions of art, instorical treasures, or other similar assets, or qualified conservation and the organization on will not only t	the organization and are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," mplete Schedule L, Part I . 25a

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

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

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

No

Yes

6,864

1a

1b

	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	<u></u>	L
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Γ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	Γ
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a	Ī

10a 10b

11a

11b

12b

13b

13c

8

9a

9h

12a

13a

14a

14b

15

No

No

Form **990** (2018)

No solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a Yes

7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Yes Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Yes d If "Yes," indicate the number of Forms 8282 filed during the year 7d |

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h

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

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

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

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

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

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

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

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

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

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

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

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

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

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

which the organization is licensed to issue qualified health plans

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

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

Sponsoring organizations maintaining donor advised funds.

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

Section 501(c)(7) organizations. Enter

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

Page **6**

Pai	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										
So	ection A. Governing Body and Management										
36	ection A. Governing Body and Management		Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	68	103								
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O										
b	Enter the number of voting members included in line 1a, above, who are independent 1b	66									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer, director, trustee, or key employee?	ner 2	Yes								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervol of officers, directors or trustees, or key employees to a management company or other person?	rision 3		No							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4		No							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No							
6	Did the organization have members or stockholders?	6		No							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or members of the governing body?	nore 7a		No							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, o persons other than the governing body?	r 7 b		No							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following	r by									
а	The governing body?	8a	Yes								
Ь	Each committee with authority to act on behalf of the governing body?	. 8b	Yes								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No							
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code	e.)								
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		No							
	IDID THE ORGANIZATION HAVE local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?			No							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate	es, 10b	Yes	No							
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to	10b	Yes	No							
ь 11а Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form?	10b	Yes Yes	No							
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b the 11a		No							
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	10b the 11a 12a 12b	Yes	No							
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	10b the 11a 12a 12b	Yes	No							
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10b the 11a 12a 12b 7 12c	Yes Yes	No							
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b the 11a 12a 12b 12c 13 14	Yes Yes Yes	No							
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	10b the 11a 12a 12b 12c 13 14	Yes Yes Yes	No							
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b the 11a 12a 12b 7 12c 13 14	Yes Yes Yes Yes Yes Yes	No							
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b the 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	No							
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b the 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes	No							
b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b the 11a 12a 12b 12c 13 14 15a 15b 16a tton	Yes Yes Yes Yes Yes Yes								
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exerticipal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exerticipal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exerticipal in the process in the following procedure	10b the 11a 12a 12b 11a 14 115a 15b 16a 16a	Yes Yes Yes Yes Yes Yes								
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participating in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exert status with respect to such arrangements?	10b the 11a 12a 12b 11a 14 115a 15b 16a 16a	Yes Yes Yes Yes Yes Yes								
b 11a b 12a c 13 14 15 a b T6a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participa in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exertistus with respect to such arrangements? Ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed. MD, SC Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s	10b the 11a 12a 12b 7 12c 13 14 nt 15a 15b 16a tion npt 16b	Yes Yes Yes Yes Yes Yes								
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exertstatus with respect to such arrangements? Ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed. MD , SC	10b the 11a 12a 12b 7 12c 13 14 nt 15a 15b 16a tion npt 16b	Yes Yes Yes Yes Yes Yes								

policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records MICHAEL HORAN 3424 SOUTH STATE STREET TC-4TH FL CHICAGO, IL 60616 (312) 567-3825 20

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

353 N Clark St 3300 Chicago, IL 60610

compensation from the organization ► 100

Form 990 (2018)										,			Page 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
(A) Name and Title	(B) Average hours per week (list any hours	than c	one bo	ox, u an off	ot che unles fficer	neck mo ess pers er and a tee)	rson a	Repo comp fro organiz	(D) portable pensation om the ization (W-		on d (W-	Estima amount o compens from organizat	ated of other sation the	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	99-MISC)	2/1099-MISC)	related organizations		
See Additional Data Table						<u> </u>	#							
		-	_	<u> </u>	-	-	+-				+			
						<u> </u>	#							
		-	_	-		-	+				+			
						<u> </u>	#							
		-	_	<u> </u>	-	-	+-'				+			
	<u> </u>					片					<u></u>			
1b Sub-Total	Part VII , Section	Α				>	<u> </u>	7	7,099,093		0		727,479	
Total number of individuals (including of reportable compensation from the compensa	ng but not limited	d to thos					o rec			100,000				
3 Did the organization list any former	r officer, director	or trust	tee, k	ey e	—— empl	loyee,	or hi	ıahest co	ompensate	d employee on	$\overline{}$	Yes	No	
line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is	I for such individuals I for such individuals I for sum of repo	ortable o	comp	oensa	• ation	n and c	other	r compen	nsation froi		3	Yes		
organization and related organization	ns greater than \$	150,00	0? <i>If</i>	"Yes	," cc	omplet	te Sc	hedule J	1 for such		4	Yes		
5 Did any person listed on line 1a received services rendered to the organization										dividual for	5		No	
Section B. Independent Contract			_		_									
 Complete this table for your five high from the organization. Report compe 											mper	nsation		
	(A)				***	••••	-		T	(B)		Comper		
Power Ujamaa 3 LLC	e and business addre	<u>3SS</u>							Constructio	scription of services on		Comper 16	,990,328	
8750 W Bryn Mawr Chicago, IL 60631								I						
Chartwells Dining PO Box 91337					_				Food Service	ce		3	,895,526	
Chicago, IL 60963 GCA Services Group									Janitorial se	ervice		3	3,443,144	
3060 Solutions Center Chicago, IL 60677 Sodexo Inc and Affiliates									Food Service	ıre		2	2,419,479	
9801 Washingtonian Blvd Chicago, IL 20878					_									
Ventas Inc				_	_		_		Real estate	e rental services		2	,196,007	

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

ું છ	e Government grants (co	ntributions) 1e	45,238,777								
Contributions, Gif and Other Simila	f All other contributions, and similar amounts no	ا لمصلمانات	00.000								
outi her	above	_ 11	39,080,981								
┋ᇹ	g Noncash contributio in lines 1a - 1f \$		318,431								
Con	h Total. Add lines 1a-	·			84 788 222						
			Busines		84,788,322						
표	2a Tuition and Fees			611310	244,06	55,146	244,065,1	146			
	b Sales/Services of Auxillia	ary Enterprises		722320	16,68	35,844	16,482,3	381	203,4	63	
ر د	c Student Services			611710	17,69	96,831	17,696,8	331			
er v	d Equity Interest on IITRI			900000	1,10	01,000	1,101,0	000			
Program Service Revenue	e —										
ogra	f All other program ser	vice revenue				0		0		0	0
4	gTotal. Add lines 2a-2f	f	▶ 279	.548,821							
	3 Investment income (in		nterest, and other		5,700,686				-230	1	5,700,916
	similar amounts) 4 Income from investme		ond proceeds	<u> </u>	3,700,000				250		
	5 Royalties	•	•	•							
	[(ı) Real	(II) Personal								
	6a Gross rents	1,498,618									
	b Less rental expenses	39,633		7							
	c Rental income or	1,458,985		0							
	(loss)				1,458,985						450.005
	d Net rental income or	(I) Securities	(II) Other	-	1,456,965					:	1,458,985
	7a Gross amount	· · ·	1								
	from sales of assets other than inventory	79,246,000									
	b Less cost or other basis and sales expenses	70,573,799									
	C Gain or (loss) 8,672,201			0							
	d Net gain or (loss)		<u> </u>		8,672,201				1,375		3,670,826
<u> </u>	8a Gross income from fundraising events (not including \$ 468,564 of										
듄	contributions reported See Part IV, line 18	d on line 1c) • • • • a	 56,44	5							
Rev	b Less direct expenses		176,34	7							
Other Revenue	c Net income or (loss)		ents	_ 	-119,907						-119,907
₿	9a Gross income from ga See Part IV, line 19										
	L	a		4							
	b Less direct expensesc Net income or (loss)		les								
	10aGross sales of invento	ory, less									
	returns and allowance	es a									
	b Less cost of goods se			1							
	C Net income or (loss)			- 							
	Miscellaneous 11a	Revenue	Business Code	4							
	b										
	c										
	d All other revenue .				0		0		0		0
	e Total. Add lines 11a-	-11d	>		0						
	12 Total revenue. See	Instructions			380,049,108		345,358		204,608	4.1	5 710 920
					500,049,108	1 2/9,.	۵دد,د+ر		204,008	Form 99	5,710,820 0 (2018)

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all co	_	·	olete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .		(6)	<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	122,331,391	122,331,391		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	7,216,950	2,441,927	2,649,162	2,125,861
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	214,299	85,719	64,290	64,290
7 Other salaries and wages	117,340,371	97,190,404	15,927,332	4,222,635
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	6,223,396	4,882,281	1,106,275	234,840
9 Other employee benefits	12,948,809	10,581,988	1,753,781	613,040
10 Payroll taxes	6,557,977	5,136,062	1,148,912	273,003
11 Fees for services (non-employees)				
a Management				
b Legal	293,255	18,835	274,420	
c Accounting	266,623		266,623	
d Lobbying	167,535		167,535	
e Professional fundraising services See Part IV, line 17	99,334			99,334
f Investment management fees	802,379		802,379	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	28,087,095	24,123,403	3,300,837	662,855
12 Advertising and promotion	386,730	213,712	173,018	
13 Office expenses	6,084,059	4,975,843	738,471	369,745
14 Information technology	3,116,540	1,453,611	1,608,806	54,123
15 Royalties				
16 Occupancy	30,092,429	29,353,058	739,371	
17 Travel	3,305,690	2,575,204	528,451	202,035
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	288,488	208,335	67,597	12,556
20 Interest	9,237,275	6,373,720	2,863,555	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	14,365,932	9,818,932	4,547,000	
23 Insurance	738,663		738,663	
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				
<u>b</u>				
C				
d				_
e All other expenses	0	0	0	0
25 Total functional expenses. Add lines 1 through 24e	370,165,220	321,764,425	39,466,478	8,934,317
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Page **11**

26.912.858

632.900.141

31,799,164

10.370.141

175,374,998

14.000.000

14.133.965

245.678.268

151.624.332

17,146,738

218.450.803

387,221,873

632,900,141

Form **990** (2018)

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23.349.347

635,766,786

28,613,687

16.756.445

165,544,998

14,000,000

13.535.915

238.451.045

133.953.431

45,393,228

217.969.082

397,315,741

635,766,786

Form 990 (2018)

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Liabilities 22

Fund Balance

Assets or 30

Net

Intangible assets

Grants payable . .

Deferred revenue . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

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

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

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

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

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

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

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

		(A) Beginning of year		End of year
1 0	Cash-non-interest-bearing	24,080,029	1	3,012,287
2 9	Savings and temporary cash investments	3,132,566	2	293,787
3 P	Pledges and grants receivable, net	14,401,785	3	17,996,881
4 A	Accounts receivable, net	5,141,474	4	6,364,548
t	Loans and other receivables from current and former officers, directors, strustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	0
6 L	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employees and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part III of Schedule I		6	0

	Ū	section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations.		6	o		
Assets	7	Notes and loans receivable, net	9,513,620	7	8,474,138		
SS	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			3,826,773	9	3,165,639
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	594,580,509			
	b	Less accumulated depreciation	10 b	291,917,896	284,547,617	10c	302,662,613
	11	Investments—publicly traded securities .			237,914,273	11	245,466,896
	12	Investments—other securities See Part IV, line	13,463,716	12	1,053,908		
	13	Investments—program-related See Part IV, line	16,395,586	13	17,496,586		

Audit Act and OMB Circular A-133?

3a 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

Yes Form 990 (2018)

3b

Additional Data

Software ID: 18007697

Software Version: 2018v3.1

INSTRUCTION SUPPORT - This past fiscal year witnessed the largest class of incoming first-year students in three decades. The university has continued to expand its

EIN: 36-2170136

Name: Illinois Institute of Technology

Form 990 (2018)

Form 990, Part III, Line 4a:

academic offerings, which included the development of the first undergraduate degree in artificial intelligence in the Midwest. A new academic building was opened during the year and was designed to enhance and expand the activities of the university's longstanding Interprofessional Projects (IPRO), its Entrepreneurship Academy, and the Idea Shop Through eight different schools and colleges, instruction supports over 50 academic majors, more than 75 minors, and a variety of specializations and is made up of over 6,500 students, including 3,144 undergraduate, 2,509 graduate, 862 law students, and 51 students in continuing education programs. The University offered and awarded 600 bachelor, 1,437 master, 229 J D., and 104 Ph D. degrees during the 2019 academic year. The University's signature Interprofessional Projects Program (IPRO) joins together students from various academic disciplines to work as a team to tackle real-world problems, often on behalf of companies and nonprofits that sponsor the projects, using design-centered methodology and innovative thinking. All undergraduate students are required to take six credit hours of IPRO courses. Developed in 1995, IPRO consists of student teams from the junior through graduate levels, representing the breadth of the university's disciplines and professional programs. Each IPRO course is a unique project with teams that include the faculty and enrolled students. The courses encourage intellectual inquiry with research on the project subject, analysis, design, and development. Such experiential learning reinforces traditional education methods, providing students a richer academic experience allowing them to gain knowledge that goes beyond the regular classroom experience. When they graduate, students have learned to "speak the language" of other professions and have learned that problems can be "framed" from many different perspectives. Recently, IPRO project teams collaborated on developing a platform for safe prescription drug disposal, harvested condensate from HVAC systems to create drinking water for humans, worked with a developer to design a zero-net-energy community, created an educational web-based platform for guests at a local museum, and studied the relationship between wastewater injection and earthquakes. The University's Idea Shop helps to ignite ideas with cutting-edge tools to help students transform their new products and inventions into reality. This state-of-the-art, rapid-prototyping lab houses 3-D printers and scanners, multiple CNC milling machines, a vacuum cutter, and laser former. Full-time staff advise students on everything from equipment use to product marketability. This is where University students from all fields of study generate breakthrough ideas and guide them from concept to launch. It is an inviting place for returning alumni, students, and prospective students to interact and participate in workshops. The Idea Shop also serves the Chicago-area entrepreneurial community and facilitates the process by transforming student and faculty generated ideas into actual businesses, products, and patents. Within the College of Architecture is the university's Design/Build Studio where students can experience firsthand the entire life cycle of a small-building project. Students conceptualize, draft, design, and build a structure from the ground up, and they construct their projects around the world. The program has taken students to Indonesia, Ghana, Japan, New Orleans, Chile, Germany, and in the summer of 2018 to Puerto Rico, where students built a community building that allowed local citizens to cook for themselves and others

Form 990, Part III, Line 4b:

received 31 awards totaling \$7.2 million

RESEARCH - In correspondence with the growth of our academic programs and the development of our new facility, our university's research portfolio saw expansion over

Partners Institute, a purpose-driven, collaborative research and education center led by the University of Illinois System to bring together hundreds of top researchers and thousands of students to work with industry and government to solve real-world challenges and drive progress and economic growth. Throughout our colleges and research centers, and in topics as varied as energy, theoretical physics, and social justice, our research reflects our commitment to scientific, technological, and professional knowledge creation and innovation. Research awards received in fiscal year 2019 were \$34.4 million. The University received awards primarily in the areas of science.

the last year as well. Research is the hallmark of our culture of excellence. Our faculty, students, and staff are leading bold research and discovery in fields where technology and innovation are creating significant, meaningful change. A cancer imager team helped to usher in a new era in cancer detection. The university also joined the Discovery

engineering, technology, and mathematics all of which are synergistic with the strategic plan. Notably, the Electrical and Computer Engineering Department received 25 awards totaling \$3 3 million and the Computer Science Department received 20 awards for \$4 2 million. Also, the Biomedical Engineering Department received 25 awards for

\$4.8 million, the Biological Science Department 11 awards for \$1.8 million, Mechanical Material and Aerospace Engineering 34 awards totaling \$5.9 million, Physics Department 31 awards totaling \$2 million and the Department of Psychology 10 awards for \$1 6 million. In addition, the National Center for Food Safety and Technology

Form 990, Part III, Line 4c: AUXILIARY SERVICES - This provides for campus housing and dining for the students and includes residence halls and a dining room, apartment-style buildings, seven fraternity houses, and two sorority houses

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

office offers several programs that provide peer tutoring, exam reviews, advising and counseling

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code) (Expenses \$ 22,826,342 including grants of \$) (Revenue \$ 18,451,889) STUDENT SERVICES - This program provides health, academic, career services, transitional assistance, student orientation and other student

services including the student finance center, admissions, and registration (Code) (Expenses \$ 19,372,900 including grants of \$) (Revenue \$

through its several libraries and academic computing centers allowing students access to terminals. In addition, the Academic Resource Center

7,703,246) ACADEMIC SUPPORT - IIT provides students with the information skills to compete in today's challenging and rapidly changing environment

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

and Independent Contractors

Michael P Galvin

Chairman of the Board

Williams C Bartholomay

Jimmy A Akintonde

Judson B Althoff

Andrea L Berry

John P Calamos Sr

Trustee

Trustee

Trustee

Trustee

Trustee

	any hours		direct			ee)	2	organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
A Steven Crown	1 0	X		Ţ						
Vice Chair	0.0			×				0	0	0
Ellen M Jordan	1 0									
Vice Chair	0.0	X		X				0	0	0
Thomas E Lanctot	10									

Vice Chair	0.0						
Ellen M Jordan	10		<		_		
Vice Chair	0 0	X	Х		0	0	
Thomas E Lanctot	1 0				_		
Vice Chair	0 0	X	Х		0	0	
Alan Cramb	39 0						

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Thomas E Lanctot	1 0	V	,				
Vice Chair	0.0	_ ^	×		U	U	0
Alan Cramb	39 0	.,			245.055		47.440
President	10	×	×		846,866	0	47,140

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Ellen M Jordan	1 0	v	х		0	0	0
Vice Chair	0 0	^	^		0	0	0
Thomas E Lanctot	1 0	V	,				
Vice Chair	0 0	X	X		U	U	0
Alan Cramb	39 0						
President	1.0	X	×		846,866	0	47,140

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

and Independent Contractors

Trustee

Trustee

Trustee

Trustee

Trustee

James Dugan

Bryan R Dunn

Carter H Eckert

James R Gagnard

Partial Year Trustee

Craig J Duchossois

	any hours		dırect	or/t	rust	ee)		organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	es voldine Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
Frank Clark III	1 0	1						0	0	
Trustee	0 0	X							0	
Martin Cooper	1 0	х						0	0	
Trustee	0 0	1							0	
Robert A Cornog	1 0	1								
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Haram Cooper		Y			ا ا	l	İ
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James E Cowie	1 0						
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David L Crowell	1 0						

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

and Independent Contractors

James Hill Jr

Robert D Hoel

Martin C Jischke

Norbert O Kaiser

Trustee

Trustee

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Trustee

	any hours	0	direct	or/tı	rust	ee)		organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
S Christopher Gladwin	1 0	×						0	0	0
Trustee	0 0							0	0	Ů
Jamshyd N Godrej	1 0	×						0	0	0
Trustee	0 0									
Alvın L Gorman	1 0	×						0	0	0

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S Christopher Gladwin	1 0							
Trustee	0.0	×				0	0	
Jamshyd N Godrej	1 0							
Trustee	0.0	×				0	0	
Alvın L Gorman	1 0							
Trustee Emeritus	0 0	X				0	0	

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Trustee	0.0						
Alvın L Gorman	1 0				_	_	
Trustee Emeritus	0.0	X			0	0	0
Michael J Graff	1 0						
Trustee	0.0	X			0	0	0
Marc R Hannah	1 0						
Trustee	0.0	X			0	0	0
Flzie I. Higginhottom	10						

Trustee	0 0	^			0	l o	U
Alvın L Gorman	1 0						
Trustee Emeritus	0 0	Х			0	0	0
Michael J Graff	1 0						
Trustee	0 0	X			0	0	0
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Trustee	0 0	Х			0	0	0
Elzie L Higginbottom	1 0						_
Partial Year Trustee	0 0	Х			0	0	0

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Michael J Graff	1 0	\		\Box	П	\Box	П			
Trustee	0 0	^		₁	1	, 1		0		
Marc R Hannah	1 0	·		\Box	\Box	\Box				
Trustee	0 0	^				ıl		0		
Elzie L Higginbottom	1 0	_		\Box	П	\Box	П			
Partial Year Trustee	0 0	^						0	U	U
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Individual trustee or director

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Highest compensated employee

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organization and

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organizations

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

	for related organizations below dotted line)
Edward L Kaplan	10
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Trustee	0.0
Jeffrey A Karp	10
Trustee	0.0
Patrick J Kelly	1 0

Trustee

Trustee

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Trustee

Trustee

Trustee

Trustee

Eric C Larson

Joel D Krauss

John Krenhbiel Jr

Richard Neil Levy

Karen R Klein

Jules F Knapp

Kaarına Koskenalusta

and Independent Contractors

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

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

	any hours	(direct	or/ti	ruste	ee)		organization (W- 2/1099-MISC)	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	eavoldine Highest compensated	Former		(W- 2/1099- MISC)	organization and related organizations
Bruce C Liimatainen	10	х						0	0	0
Trustee	0.0									
Sherrie B Littlejohn	1 0	×						0	0	0
Trustee	0.0							-	_	_
Victor Lo	10									

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and Independent Contractors

Victor Lo

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Anıta M Nagler

Walter Nathan

Partial Year Trustee

Madhavan K Nayar

David J Miniat

Rosemarie Mitchell

Douglas M Monieson

Victor A Morgenstern

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

organization and related organizations

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

	any hours	ı	direct			ee)		organization (W-	organizations	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	
Victoria L Noonan	1 0	×						0	0	Ī
Trustee	0 0	l								
John G Olin	1 0	X						0	0	
Trustee	0.0									

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and Independent Contractors

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Mayarı Pritzker

John W Rowe

Mitchell Harris Saranow

Michael Steven Seedman

Carole Browe Segal

Harold Singleton III

Carl S Spetzler

Victoria L Noonan	10						
Trustee	0 0	^			0	0	
John G Olin	1 0						
Trustee	0 0	^			0	U	
Robert J Potter	1 0				0	0	

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

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Individual trustee or director

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Institutional

Trustee

Former
Highest compensated employee

employee

2/1099-MISC)

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(W- 2/1099-

MISC)

organization and

related

organizations

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

Efthimios J Stojka		
Trustee		
Stephen C Urrutia	·	

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Trustee

Ralph Wanger

Robert J Washlow

Eric G Vassilatos

Pallavi Verma

David J Vitale

John C Walden

Brian C Walker

Priscilla Anne Walter

and Independent Contractors

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

25,723

31,398

30,836

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

	any hours		direct	or/tı	rust	ee)		organization (W- 2/1099-MISC)	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former		(W- 2/1099- MISC)	organization and related organizations	
Alan W Wendorf	1 0	х						0	0	0	
Trustee	0.0							ľ			
Kevin W Willer	1 0	x						0	0	0	
Trustee	0.0										
Russell Betts	39 0										
Interim Provost/Distinguished Professor/Termed 7/31/18	0 0			×				383,939	0	24,750	
Betsy Hughes	39 0										

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Trustee	0.0						
Russell Betts	39 0						
Interim Provost/Distinguished Professor/Termed				X		383,939	
7/31/18	0.0						
Betsy Hughes	39 0						
, 3				Ιx		350,549	
Vice Pres, Inst Advancement	0.0					·	

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and Independent Contractors

VP Admnstrn/Facilities/Pub Saf

VP Finance, CFO, Treasurer

Vice Pres, Genrl Cnsl & Sec

Michael Horan

Anthony D'Amato

		Х			0	0	
Trustee	0 0						
Russell Betts	39 0						
Interim Provost/Distinguished Professor/Termed 7/31/18	0 0		Х		383,939	0	
Betsy Hughes	39 0						
· -			Х		350,549	0	
Vice Pres, Inst Advancement	0 0						
Michael Gosz	39 0						
			Х		308,450	0	
VP, Enrlmt/Vice Prov/AssocProf	0 0						
Darsh Wasan	39 0						
			Х		301,773	0	

Trabecco	00	- 1					
Russell Betts	39 0						
Interim Provost/Distinguished Professor/Termed 7/31/18	0 0		X		383,939	0	24,750
Betsy Hughes	39 0						
Vice Pres, Inst Advancement	0 0		×		350,549	0	47,141
Michael Gosz	39 0						
VP, Enrlmt/Vice Prov/AssocProf	0 0		X		308,450	0	44,718
Darsh Wasan	39 0						

,			хΙ		350,549	l o	47,141
Vice Pres, Inst Advancement	0 0		^		330,343		7,,141
Mıchael Gosz	39 0		,				
VP, Enrlmt/Vice Prov/AssocProf	0 0		×		308,450	0	44,718
Darsh Wasan	39 0						
Distinguised Professor,ChBE	0 0		X		301,773	0	39,431
Ophir Trigalo	39 0						

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282,596

280,242

259,168

VP, EIIIIIII() VICE PIOV/ASSOCPIOI	0.0						
Darsh Wasan	39 0		V		204 772		20,424
Distinguised Professor,ChBE	0.0		*		301,773		39,431
Ophir Trigalo	39 0		V		275.027		47.444
Vice Provost, CIO	0.0		^		275,927		47,141

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Distinguised Professor,ChBE	0.0				·		
Ophir Trigalo	39 0						
			Х		275,927	0	
Vice Provost, CIO	0.0				·		
Edwin Watts	39 0						

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

and Independent Contractors

Robert Brackett

Heather Harper

John Bilson

Dean

Vice President/Professor

Associate Clinical Professor

Mohammad Shahidehpour

Director, WISER/Professor

Chair/Hochsprung Chair

Hamid Arastoopour

Eunice Santos

Distinguished Bodine Professor

	any hours	director/trustee)						organization (W-	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Peter Kilpatrick	39 0			×				252,376	0	23,281	
Provost, SVP Academic Affairs	10			^				232,370		25,201	
Jess Goode	39 0										
Vice President	0 0			X				224,228	0	1,563	
	20.0		1	1							

Jess Goode	39 0							
Vice President	0 0		Х			224,228	0	
Natacha DePaola	39 0							
Kaplan Dean of Engineering	0 0			X		411,586	0	
	20.0							

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Vice i resident	0.0						
Natacha DePaola	39 0		v			_	
Kaplan Dean of Engineering	0 0		×		411,586	0	46,954
Harold Krent	39 0		,		200.007		46.047
Dean & Professor of Law	0 0		*		380,097	0	46,017

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321,698

306,298

387,040

381,739

336,036

296,902

Jess Goode	39 0					224 220		1.562
Vice President	0 0	^			224,228	0	1,563	
Natacha DePaola	39 0			V		411 506		46.054
Kaplan Dean of Engineering	0 0					411,586	0	46,954
Harold Kront	39 0							

32,108

39,431

38,404

46,954

39,558

31,330

and Independent Contractors (A) Name and Title

Average hours per week (list any hours for related organization below dotter line)
39
0
39

/BI

0 0

x, unless person officer and a pr/trustee)									
Officer	key employee	Highest compensated employee	Former						
		X							

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

(C)

compensation from the organization (W-2/1099-MISC) 294,977

216,606

(D)

Reportable

compensation from related organizations (W- 2/1099-MISC)

(E)

Reportable

compensation from the organization and related organizations

24,314

19,287

(F)

Estimated

amount of other

Sumanta Acharya

Wiel Arets

Professor & Department Chair

Professor/Former key employee

Position (do not check more than one box is both an directo ğ Institutional Mdual trustee

SCHEDUL Form 990 or 990EZ)			Charity Staturganization is a sect 4947(a)(1) nonexe Attach to Form		2018		
Department of the Tr		► Go to	www.irs.gov/Form	990 for the late	st information		Open to Public Inspection
lame of the or	ganization					Employer identific	cation number
Part I Re	ason for Pub	lic Charity Stat	us (All organization	e must comple	to this part 19	36-2170136	
			e it is (For lines 1 thro			dee mad decions.	
1	urch, conventior	n of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2 🗸 A sc	hool described in	section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3	spital or a coope	erative hospital ser	vice organization desci	nbed in section	170(b)(1)(A)(iii).	
	edical research c e, city, and state	•	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	Enter the hospital's
	rganization oper		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	ibed in section 170
	,, ,, , ,	'	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
	-	normally receives (A)(vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	ınıt or from the gener	al public described in
8	mmunity trust d	escribed in sectio i	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
	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.						
from Inve	activities relate stment income a	d to its exempt fur	(1) more than 331/39 actions—subject to cer ness taxable income (le omplete Part III)	tain exceptions,	and (2) no more	than 331/3% of its s	upport from gross
•			d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
mor	e publicly suppoi	rted organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or sec	ction 509(a)(2). See section 509(
a 🔲 Typ orga	e I. A supporting nization(s) the p	g organization oper	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
mar	agement of the		pervised or controlled in ation vested in the sar and C.				
			supporting organizatio	•	•	, -	ated with, its
d Typ	e III non-funct	tionally integrate ad The organizatio	ions) You must com d. A supporting organi n generally must satis rt IV, Sections A and	zation operated fy a distribution	in connection wi requirement and	th its supported orga	
e 🗌 Che	k this box if the	organization recei	ved a written determir	ation from the I		pe I, Type II, Type I	II functionally
		III non-functionally rted organizations	integrated supporting	organization		_	
			upported organization(Γ'			1
	of supported nization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	on in your governing document? monetary supply lines (see instruction)			(vi) Amount of other support (see instructions)
				Yes			
otal							
	Reduction Act	Notice, see the I	nstructions for	Cat No 11285	F :	Schedule A (Form 9	990 or 990-EZ) 2018

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 Schedule A, Part II, line 14

organization

instructions

supported organization

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

Page 2

90 90 %

91 44 %

▶Ⅵ

▶□

▶□

	III. If the organization fails to qualify under the tests listed below, please complete Part III.)										
	Section A. Public Support										
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	63,420,177	70,771,692	58,277,789	63,052,564	84,788,322	340,310,544				
2	Tax revenues levied for the organization's benefit and either										

paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 63,420,177 70,771,692 58,277,789 63,052,564 84,788,322 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 Public support. Subtract line 5 from line 4 Section B. Total Support

340,310,544 Calendar year (c)2016 (d)2017 (e)2018 (a)2014 **(b)**2015 (f)Total (or fiscal year beginning in) ▶ 70,771,692 Amounts from line 4 63,420,177 58,277,789 63,052,564 84,788,322 Gross income from interest. dividends, payments received on 5,056,675 5,450,043 5,610,143 7,715,863 7,199,534 securities loans, rents, royalties

337,627,402 340,310,544 31,032,258 and income from similar sources

2,683,142

Net income from unrelated business activities, whether or not the business is regularly carried on

Other income Do not include gain 10 or loss from the sale of capital 45,025 56,440 101,465 assets (Explain in Part VI)

Total support. Add lines 7 through 11 371,444,267 12 Gross receipts from related activities, etc (see instructions) 12

1,408,677,543 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,

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

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

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

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

b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

14

15

Schedule A (Form 990 or 990-EZ) 2018

P	art III Support Schedule for							
	(Complete only if you c the organization fails to						y unde	er Part II. If
S	ection A. Public Support	quality under t	ine tests listeu i	below, please co	ompiete Part II.)	<u> </u>		
	Calendar year	(-) 2014	(1.) 2015	(-) 2016	(4) 2047	(-) 20		(C) T-1-1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 20	18	(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 Gross receipts from activities that are						\longrightarrow	
3	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 The value of services or facilities							
5	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							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c							
	from line 6) ection B. Total Support							
30				I	1			
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 20	18	(f) Total
9							\neg	
10a	Gross income from interest,						\neg	
	dividends, payments received on							
	securities loans, rents, royalties and							
	income from similar sources						\longrightarrow	
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							\neg	
	loss from the sale of capital assets							
	(Explain in Part VI)						\longrightarrow	
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is fo	r the organization	's first, second, th	urd, fourth, or fift	h tax vear as a sec	tion 501(c)(3) or	ganization.
	check this box and stop here	.		,	,	\ -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	▶ □
Se	ection C. Computation of Public	Support Perce	ntage					
15	Public support percentage for 2018 (lin			column (f))		15		
16	Public support percentage from 2017 S		•	· · //		16		
	ection D. Computation of Investi	*	*					
17	Investment income percentage for 201			line 13. column (f	·))	17		
	Investment income percentage from 2			22, 20141111 (1	//			
18 10-	331/3% support tests—2018. If the		· ·	on line 14 and lin	ne 15 is more than	18 33 1/3% :	and line	17 is not
							and iirie	_
	more than 33 1/3%, check this box and s	-	-				. 22 - /-	▶ ∐
b	33 1/3% support tests—2017. If the	-			•		1/3' ک ک	_
	not more than 33 1/3%, check this box	and stop here.	The organization (qualifies as a publ	icly supported orga	anızatıon		▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	9a, or 19b, check	this box and see i	nstructions	ŝ	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 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 Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)

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

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below

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

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

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

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

7 substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7 8

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

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

9b

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

the organization had excess business holdings)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

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

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

10a answer line 10b below

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5		
Pa	rt IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting					
	organization					
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
_	<u> </u>					
	ection 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?		103	-140		
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3				
S	ection E. Type III Functionally-Integrated Supporting Organizations		l			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)				
	The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test Answer (a) and (b) below.	į	Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	_				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h				

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6					
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.								
	Section A - Adjusted Net Income (A) Prior Year (optional)								
1	Net short-term capital gain	1							
2	Recoveries of prior-year distributions 2								
3	Other gross income (see instructions) 3								
4	4 Add lines 1 through 3								
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8							
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1							
а	Average monthly value of securities	1a							
b	Average monthly cash balances	1 b							
С	Fair market value of other non-exempt-use assets	1c							
d	Total (add lines 1a, 1b, and 1c)	1d							
е	Discount claimed for blockage or other factors (explain in detail in Part VI)								
2	Acquisition indebtedness applicable to non-exempt use assets	2							
3	Subtract line 2 from line 1d	3							
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4							
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5							
6	Multiply line 5 by 035	6							
7	Recoveries of prior-year distributions	7							
8	Minimum Asset Amount (add line 7 to line 6)	8							
	Section C - Distributable Amount		_	Current Year					
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1							
2	Enter 85% of line 1	2							
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3							
4	Enter greater of line 2 or line 3	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6							
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see					

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

c Remainder Subtract lines 4a and 4b from 4

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

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

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

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Schedule A (Form	Page 8							
Sec Pari Sec	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							
990 Schedule	990 Schedule A, Supplemental Information							
Return F	Reference	Explanation						
Schedule A, Parl	t II, Line 10	DESCRIPTION - GROSS INCOME FROM FUNDRAISING EVENTS, COLUMN A - , COLUMN B - , COLUMN C - ,						

COLUMN D - 45025 0, COLUMN E - 56440 0, COLUMN F - 101465 0,

Schodula A (Form 990 or 990-E7) 2018

Other Income

SCHEDULE C

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

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493069006250

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶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.

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

Inspection

	Section 527 organizations Comple	te Part I-A only n Form 990, Part IV, Line 4, or Form 9	00 E7 Bart VI lu	o 47 (Lobbying Actu	rituas)	thon		
		t have filed Form 5768 (election under s					В	
• 8	Section 501(c)(3) organizations tha	t have NOT filed Form 5768 (election ur	nder section 501(h)) Complete Part II-B	Do no	ot complete Pa	art II-A	
	e organization answered "Yes" o xy Tax) (see separate instruction	n Form 990, Part IV, Line 5 (Proxy Tax	() (see separate i	nstructions) or Form	990-E	Z, Part V, lin	e 35c	
	Section 501(c)(4), (5), or (6) organi							
Name of the organization Illinois Institute of Technology					Employer identification number 36-2170136			
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political car	npaign activities ir	n Part IV (see instruction	ons foi	r definition of		
2	Political campaign activity expenditures (see instructions)				\$			
3	Volunteer hours for political camp	• • • • • • • • • • • • • • • • • • • •						
Par	t I-B Complete if the orga	nization is exempt under section	n 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 sec	tion 4955 tax, did it file Form 4720 for t	this year?			☐ Yes	□ No	
4a	Was a correction made?					☐ Yes	□ No	
ь	If "Yes," describe in Part IV							
Par		nization is exempt under section	n 501(c), exce	ept section 501(c)	(3).			
1	Enter the amount directly expend	led by the filing organization for section	527 exempt funct	ion 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 expenditur	res Add lines 1 and 2 Enter here and or	n Form 1120-POL,	line 17b ►	\$			
4	Did the filing organization file Form 1120-POL for this year?						□ No	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to							⊔ No	
,	organization made payments For	r each organization listed, enter the amount of that were promptly and directly deliver	ount paid from the	filing organization's fu	unds A	Also enter the		
	fund or a political action committe	ee (PAC) If additional space is needed,	provide information	on in Part IV				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	om	(e) Amount	of political	
	• •			filing organization's		contributions received and promptly and		
				funds If none, ent -0-	er	directly deliv		
						separate		
						organization enter		
1								
_								
2								
3								
4								
					-			
5								
6								
	Panerwork Reduction Act Notice see	the instructions for Form 990 or 990-EZ.	1	No 50084S Schedul	0 C /F:	num 000 00	0 EZ) 2010	
U. P	aportion reduction Act Hotice, See	or actions for Form 330 or 330-EZ.	Cat	NU DUUK45 SCREQUI	せんじん	ULI 990 OF 99	0-641 4018	

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e))

2a Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Schedule C, Part II-B, Line 1 DETAILED

DESCRIPTION OF THE LOBBYING

ACTIVITY

activity

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

(b)

Amount

(a)

No

Yes

1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
е	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			167,535
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	Other activities?		No		
j	Total Add lines 1c through 1i				167,535
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				
С	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5).	(5), o	r sectio	n	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)				c)(6)
	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	III-A	, line 3,	is	
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).				
	Current year	2a			
b	Carryover from last year	2b			
С	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			
Pa	art IV Supplemental Information				
	vide the descriptions required for Part l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), l	Part II-	A, lines 1	and 2 (s	ee
ınst	ructions), and Part II-B, line 1 Also, complete this part for any additional information				
	Return Reference Explanation				

THOMSON COBURN WAS RETAINED TO HELP WITH FEDERAL LOBBY REGISTRATION AND DISCLOSURE

STRATEGY AND AS LIAISON WITH THE OFFICE OF THE GOVERNOR AND OTHER STATE AGENCIES AS DIRECTED BY IIT IN ADDITION, IIT'S VICE PRESIDENT AND ASSOCIATE VICE PRESIDENT FOR EXTERNAL AFFAIRS INTERACT WITH FEDERAL, STATE, AND LOCAL OFFICIALS REGARDING SUCH MATTERS

REQUIREMENTS IIT WAS REPRESENTED BY ALL CIRCO INC FOR DEVELOPMENT OF LEGISLATIVE

SCHEDULE D

Supplemental Financial Statements

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

DLN: 93493069006250 OMB No 1545-0047

(Form 990)

2

	al Revenue Service	► Go to <u>www.irs.g</u>	ov/Form990 for		est information.		In	spection
	me of the organization					Employer i	identification	number
line	ois Institute of Technology					36-2170136	5	
₽a	rt I Organizations Main					1		
	Complete If the organ	iization answered "Ye						
	Takal mumahan ak an diakunan		(a) Dono	r advis	ed funds	(b)Fur	nds and other	accounts
	Total number at end of year	to (during year)						
	Aggregate value of contributions Aggregate value of grants from (
	Aggregate value at end of year	during year)						
	Did the organization inform all organization's property, subject		_		ts held in donor ad	lvised funds a		Yes □ No
	Did the organization inform all of charitable purposes and not for private benefit?						for	Yes 🗆 No
ar	rt III Conservation Easer	nents. Complete if th	ne organization a	nswer	ed "Yes" on Forn	n 990, Part :	IV, line 7.	
	Purpose(s) of conservation ease	ments held by the orga	nızatıon (check all t	hat app	oly)			
	Preservation of land for pu	blic use (e g , recreation	n or education)		Preservation of an	historically in	nportant land	area
	Protection of natural habit	at			Preservation of a c	ertified histor	ıc structure	
	Preservation of open space	2						
	Complete lines 2a through 2d if easement on the last day of the	the organization held a	qualified conservat	ion con	tribution in the for		rvation	of the Vear
а	Total number of conservation ea					2a	1 at the Life (n the real
b	Total acreage restricted by cons	ervation easements				2b		
С	Number of conservation easeme	nts on a certified histori	c structure included	d ın (a)		2c		
d	Number of conservation easeme structure listed in the National R		red after 7/25/06,	and no	t on a historic	2d		
	Number of conservation easemetax year ▶	ents modified, transferre	ed, released, exting	uished,	or terminated by	the organizati	on during the	
	Number of states where propert	y subject to conservation	on easement is loca	ted ▶_				
	Does the organization have a wand enforcement of the conserv	ritten policy regarding that ation easements it hold:	he periodic monitor s?	ıng, ıns	pection, handling o	of violations,	☐ Yes	□ No
	Staff and volunteer hours devot	ed to monitoring, inspec	cting, handling of vi	olation	s, and enforcing co	onservation ea	sements durir	ng the year
	Amount of expenses incurred in	monitoring, inspecting,	handling of violation	ons, and	d enforcing conser	vation easeme	ents during the	e year
	Does each conservation easement and section $170(h)(4)(B)(II)^2$	ent reported on line 2(d)	above satisfy the r	equire	ments of section 1	70(h)(4)(B)(ı)) Yes	□ No
	In Part XIII, describe how the o balance sheet, and include, if a the organization's accounting fo	plicable, the text of the	footnote to the org					
ar	t III Organizations Main Complete of the organ					er Similar	Assets.	
а	If the organization elected, as p art, historical treasures, or othe provide, in Part XIII, the text of	r sımılar assets held for	public exhibition, e	ducatio	on, or research in f			
b	If the organization elected, as p historical treasures, or other sin following amounts relating to th	nılar assets held for pub						
((i) Revenue included on Form 990	, Part VIII, line 1				▶ \$		
(ii	ii)Assets included in Form 990, Pa	art X				▶ \$		
-	If the organization received or h following amounts required to b	neld works of art, histori				ncıal gaın, pro	vide the	
а	Revenue included on Form 990,	Part VIII, line 1				▶ \$		

Assets included in Form 990, Part X

Par	t IIII	Organizations Ma	aintaining Collection	ons of Art, Hist	torical	Treas	ures, o	Other	Similar As:	sets (con	tınued)	
3		g the organization's acq s (check all that apply)	uisition, accession, and	other records, che	eck any	of the f	ollowing t	hat are a	significant us	se of its co	llection	
а		Public exhibition			d [Loa	n or excha	ange prog	ırams			
b		Scholarly research			e _	Oth	er					
С		Preservation for future	generations									
4	Prov Part	ide a description of the XIII	organization's collection	ns and explain how	they fu	rther tl	ne organiz	ation's ex	kempt purpos	e in		
5		ng the year, did the orga ts to be sold to raise fur							ılar	☐ Yes	□ N-	0
Pai	rt IV		odial Arrangement ganızatıon answered		990, Pa	ırt IV,	line 9, o	r reporte	ed an amour	nt on For	m 990,	Part
1a		e organization an agent ided on Form 990, Part X		other intermediary	for con	tributio	ns or othe	er assets i	not	☐ Yes	□ N	o
ь	If "Y	es," explain the arrange	ment in Part XIII and o	omplete the follow	ving tab	e			An	nount		_
С										_		
d	Addı	tions during the year						1d				_
е	Dıstr	ributions during the year	-					1e				_
f	Endı	ng balance						1f				_
2a	Did t	the organization include	an amount on Form 99	0, Part X, line 21,	for escr	ow or c	ustodial a	ccount lia	bility?	☐ Yes	□ N	o
b	If "Y	es," explain the arrange	ment in Part XIII Chec	k here if the expla	nation h	as bee	n provide	d in Part)	KIII			
	rt V		ds. Complete if the o									
			(a)	Current year	(b) Prior y			ears back	(d)Three year	s back (e) Four year	s back
1a	Begini	ning of year balance .		251,798,501	243,	746,501	22	26,847,501	240,7	52,501	239,9	982,501
b	Contri	butions		1,349,000		325,000		2,246,000		29,000		394,000
С	Net in	vestment earnings, gair	ns, and losses	2,074,000	14,	727,000	2	27,253,000	,	34,000		076,000
d	Grant	s or scholarships		6,065,360	5,	571,397		5,903,690	5,4	07,125	4,8	891,780
е		expenditures for facilitie rograms	es	6,161,640	6,	328,603		6,696,310	7,1	92,875	6,8	808,220
f	Admir	nistrative expenses .										
g	End or	f year balance		242,994,501	251,	798,501	24	13,746,501	226,8	47,501	240,7	752,501
2		ide the estimated percei	= :	•	ne 1g, co	olumn (a)) held a	s				
а	Boar	d designated or quasi-e		%								
b	Perm	nanent endowment 🕨	78 %									
C		porarily restricted endov										
3a	Are t	percentages on lines 2a there endowment funds	•		that are	held a	nd admını	stered fo	r the		V	N-
	_	nization by inrelated organizations								3a(i	Yes	No No
	• •	related organizations .								3a(ii		No
b		es" on 3a(II), are the rel		d as required on S	Schedule	R? .				3b		
4	Desc	cribe in Part XIII the inte	ended uses of the organ	nization's endowme	ent fund	s						
Pai	rt VI			II) . II =								
	Dess	<u> </u>	ganization answered (a) Cost or other bas				_		m 990, Par	· ·	10. Book value	
	Desci	ription of property	(a) Cost or other bas (investment)	(b) Cost or d	uner Dasi	s (otner)	(c) Acc	umulated d	repreciation	(a)	DOOK VAIUE	e
1a	Land				19	,749,36	7				19	,749,367
b	Buildii	ngs			469	,457,66	9	:	224,202,299		245	,255,370
С	Lease	hold improvements				,416,09	7		4,416,097			0
d	Equipi	ment			92	,357,91	6		63,045,650		29	,312,266

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

8,345,610

302,662,613

253,850

	ilion answe	ered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category		
(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	value	
(2) Closely-held equity interests		
A)		
В)		
C)		
D)		
E)		
F)		
(G)		
H)		
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990,		e 11c. See Form 990, Part X, line 13.
(a) Description of investment (b) E	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 Fo	rm 990, Part	IV, line 11d See Form 990, Part X, line 15
(a) Description		(b) Book value
2)		
3)		
4)		
6)		
6) 7)		
6) 7) 8)		
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15)	· · ·	n 990 Part TV line 11e or 11f
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered 'See Form 990, Part X, line 25.		· · · · · · · · · · · · · · · · · · ·
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered 'See Form 990, Part X, line 25. 1. (a) Description of liability		ok value
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability 1) Federal income taxes		· · · · · · · · · · · · · · · · · · ·
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. (a) Description of liability 1) Federal income taxes Obligation under split interest Deposits by students & others		6,650,888 751,408 1,595,345
7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes 1) 1) Federal income taxes 2) 2) Description under split interest 2) Deposits by students & others 3) Obstretirement benefit obligation		ok value 6,650,888 751,408
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes Obligation under split interest Deposits by students & others Postretirement benefit obligation Asset retirement obligation Lease liability		6,650,888 751,408 1,595,345 1,809,882
Fortal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. L. (a) Description of liability (1) Federal income taxes Obligation under split interest Deposits by students & others Postretirement benefit obligation Asset retirement obligation Lease liability (6)		6,650,888 751,408 1,595,345 1,809,882 1,456,502
7) 88) 99) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes Obligation under split interest Deposits by students & others Postretirement benefit obligation Asset retirement obligation Lease liability 6) 7)		6,650,888 751,408 1,595,345 1,809,882 1,456,502
See Form 990, Part X, line 25.		6,650,888 751,408 1,595,345 1,809,882 1,456,502
7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answered See Form 990, Part X, line 25. 1. (a) Description of liability 1) Federal income taxes Deligation under split interest Deposits by students & others Postretirement benefit obligation Asset retirement obligation Lease liability 6) 7) 8)		6,650,888 751,408 1,595,345 1,809,882 1,456,502
(6) (7) (8) (9) (7) (8) (9) (7) (8) (8) (9) (8) (9) (1) (1) (1) (2) (2) (3) (3) (4) (4) (5) (5) (5) (6) (7) (8) (8) (8) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (7) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	(b) Boo	0k value 6,650,888 751,408 1,595,345 1,809,882 1,456,502 1,869,940 14,133,965

Schedule D (Form 990) 2018

Pa		venue per Audited Financial Statements With Revenue per F zation answered 'Yes' on Form 990, Part IV, line 12a.	leturn	
1		upport per audited financial statements	1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on i			
ь	Donated services and use of facili	ties	1	
С	Recoveries of prior year grants		7	
d	Other (Describe in Part XIII) .	2d	1	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1		
а	Investment expenses not include	d on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) .	4b	7	
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)	5	
Par		penses per Audited Financial Statements With Expenses per zation answered 'Yes' on Form 990, Part IV, line 12a.	Return.	
1	Total expenses and losses per au	dited financial statements	1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25		
а	Donated services and use of facili	ties		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII) .	2d		
е	Add lines 2a through 2d	 	2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:		_
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII) $\ .$	4b		
С	Add lines 4a and 4b		4c	
5		c. (This must equal Form 990, Part I, line 18)	5	
Pai	t XIII Supplemental Info	rmation		
		art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Pa 2d and 4b Also complete this part to provide any additional information	rt V, line 4, P	art X, line 2, Part
	Return Reference	Explanation		
See /	Additional Data Table			
	<u> </u>			

Page 4

chedule D (Form 990) 2018			
Part XIII Supplemental Info	mation (continued)		
Return Reference	Explanation		

Schedule D (Form 990) 2018

Additional Data

Software ID: 18007697
Software Version: 2018v3.1

EIN: 36-2170136

Name: Illinois Institute of Technology

Supplemental Informati

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	The purpose of the endowment funds is to facilitate donors' desires to make substantial lo ng-term gifts to the University and to develop a new and significant source of revenue for the University In doing so, the endowment fund will provide a secure, long-term source of funds to (a) fund special programs, (b) ensure long-term growth, (c) enhance the University's ability to meet changing community needs, and (d) support the administrative expenses of the University as deemed appropriate.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The University has received a determination letter from the Internal Revenue Service (IRS) stating that they are exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code except for tax on unrelated business income. It is management's belief that none of its activities have produced material unrelated business income, and that the University has operated in a manner that qualifies it for tax-exempt status. U.S. generally accepted accounting principles require. University management to evaluate tax positions taken by the University and recognize a tax liability (or asset) if the University has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Management has analyzed tax positions taken by the University and has concluded that as of May 31, 2019 and 2018, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the consolidated financial statements. The University is subject to routine audits by taxing juris dictions, however, there are currently no audits for any tax periods in progress. The University management believes it is no longer subject to income tax examinations for years prior to 2016.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493069006250 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest instructions. Inspection Department of the Treasury Namel & the organization **Employer identification number** Illinois Institute of Technology 36-2170136 Part I YES NO 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? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο 5с c Employment of faculty or administrative staff? Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f No g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2018)

Schedule E (Form 990 or 990EZ) (2018)	Page 2
Part II Supplemental Information. Provide the explain any other additional information (see instructions)	anations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide
Return Reference	Explanation
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	POLICY PUBLISHED YEARLY IN VARIOUS STUDENT BULLETINS IT ALSO APPEARS ON APPLICATIONS, AND OTHER FORMS, AND IT IS POSTED ON THE UNIVERSITY'S WEBSITE
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	Department of Education - Federal Supplemental Education Opportunity Grants Federal Direct Loans Federal Work Study Program Federal Perkins Loan Program Federal Pell Grant Program Illinois Student Assistance Commission - Illinois Monetary Award Program Grants Grant Program for Descendants of Police, Fire, or Correctional Officers Golden Apple Foundation awards to minority students pursuing teaching careers

Schedule F (Form 990 or 990-F7) (2018)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493069006250 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Illinois Institute of Technology 36-2170136 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e.g., program service, describe for and investments and independent fundraising, program specific type of in region region contractors in services, investments, grants service(s) in region region to recipients located in the region) See Add'l Data 10 765,130 3a Sub-total b Total from continuation sheets to Part I 10 c Totals (add lines 3a and 3b) 765,130

Schedule F (Form 990) 2018	•		•	•			Page 3
				ad States. Complete if	the organization an	nswered "Yes" to Form 99	90, Part IV, line 16.
	duplicated if addition			Т	Т	Т	Т
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
				1		1	1
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4						Sche [,]	dule F (Form 990) 2018

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

Schedule F (Form 990) 2018 Page 5							
Provid amou metho	de the nts of od); ar	tal Information Information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; nivestments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting d Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide al information (see instructions).					
990 Schedule F,		lemental Information Explanation					
Schedule F, Part I, 3 DESCRIPTION (ACTIVITY OUTSIE UNITED STATES	, Line OF DE	EUROPE/SOUTH AMERICA IIT IS MAINLY ENGAGED IN THE RECRUITMENT OF EUROPEAN AND LATIN AMERICAN STUDENTS TO THE PROGRAMS OF THE UNIVERSITY OFFERED AT IIT'S CHICAGO CAMPUS SOUTH ASIA TO FACILITATE IIT'S ABILITY TO DELIVER LONG DISTANCE INTERNET-BASED EDUCATIONAL PROGRAMS TO RESIDENTS OF VARIOUS CITIES IN INDIA AND THE RECRUITMENT OF INDIAN STUDENTS TO THE PROGRAMS OF THE UNIVERSITY OFFERED AT IIT'S CHICAGO CAMPUS. FAST ASIA AND PACIFIC, IIT IS					

MAINLY ENGAGED IN THE RECRUITMENT OF STUDENTS FROM EAST ASIA AND THE PACIFIC TO THE PROGRAMS OF THE UNIVERSITY OFFERED AT IIT'S CHICAGO CAMPUS

Additional Data

South Asia

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 36-2170136

Name: Illinois Institute of Technology

FACILITATE DELIVERY OF

ON-LINE EDUCATIONAL PROGRAMS AND STUDENT

RECRUITING

263,399

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	1	Program Services	STUDENT RECRUITING	155,225

6 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) Fast Asia and the Pacific 2 Program Services STUDENT RECRUITING 279,981 South America 1 Program Services ISTUDENT RECRUITING 66,525

SCHEDULE G

Department of the Treasury

DLN: 93493069006250

OMB No 1545-0047

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

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

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

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** Illinois Institute of Technology 36-2170136 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply ✓ Mail solicitations ✓ Solicitation of non-government grants ✓ Internet and email solicitations ✓ Solicitation of government grants Phone solicitations Special fundraising events ✓ In-person solicitations 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? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to fundraiser have or entity (fundraiser) (or retained by) (or retained by) from activity custody or fundraiser listed in organization control of col (i) contributions? Yes No PHONE SOLICITING Ruffalo Noel Levitz LLC 1025 Kirkwood Pkwy SW Nο 36,949 24,611 12,338 Cedar Rapids, IA 52404 CONSULT ON WASHBURN & MCGOLDRICK RAISING FUNDS 24 N Bryn Mawr Avenue Suite No 29,217 -29,217 252 Bryn Mawr, PA 19010 FUND RAISING Ruffalo Noel Levitz ISOFTWARE 1025 Kirkwood Pkwy SW Nο 45,506 -45,506 Cedar Rapids, IA 52404 36,949 99,334 Total -62,385

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

CT, FL, MD, OR, SC

licensing

Sche	dule G (Form 990 or 990-EZ) 2018				Page 3
11	Does the organization conduct gaming	activities with nonmembers?		☐ Yes	
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entity		□Yes	
13	Indicate the percentage of gaming acti	vity conducted in			
a	The organization's facility		13a		%
b	An outside facility		13b		<u>%</u>
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books and re	coras		
	Name ►				
	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		Yes	□ No
b		evenue received by the organization > \$ and the the third party > \$	е		
С	If "Yes," enter name and address of the				
	Name 🕨				
	Address				
16	Gaming manager information				
	Name ►				
	Gaming manager compensation ► \$				
	Description of services provided ►				
	☐ Director/officer	☐ Employee ☐ Independent contractor			
17 a	•	e law to make charitable distributions from the gaming proceeds to			_
b		red under state law distributed to other exempt organizations or spent		Yes	□No
Pai		ities during the tax year > \$ •n. Provide the explanations required by Part I, line 2b, columns 5c, 16, and 17b, as applicable. Also provide any additional infor		_	
	Return Reference	Explanation			
	dule G, Part I, Line 2b(v) Amounts paid ndraiser	Washburn & McGoldrick LLC was engaged to increase private philanthrop budget, endowment and facilities. All of these resources are intended to purposes of the institution. Washburn & McGoldrick LLC do not at any tire contributions. IIT exercises control and approval over the content and with Washburn & McGoldrick LLC never conducts solicitations on IIT's behalf based on a monthly retainer and a per diem rate. Expenses are billed secost, for travel, overnight accommodations, meals, and out-of-pocket exconducted telephone fundraising campaigns for IIT and provided service donations to support the educational mission of IIT. Their services relate strategies of the campaign and telephone solicitations to individuals ider All funds raised were controlled by IIT. Ruffalo Noel Levitz LLC was paid conducting the telephone fundraising campaigns. In addition, Ruffalo Nowhite-labeled crowdfunding software and Giving Day Module allowed IIT initiatives through a custom-branded website and thematic framework.	enhanceme have olume of Paymer eparately expenses to second to the other offices for sell Levit:	te the educe custody of any solic if any solic ints for server as expen Ruffalo N cure pledge concept, in lists suppreservices processing turns and turns an	cational or control of itation as vices are ded and at oel Levitz LLC es and design and plied by IIT provided in oprietary,
	dule G, Part I, Line 2b(II) Describe the ody or control arrangement	RUFFALO NOEL LEVITZ, LLC-RUFFALO NOEL LEVITZ LLC CONDUCTED TO CAMPAIGNS FOR IIT AND PROVIDED SERVICES TO SECURE PLEDGES A THE EDUCATIONAL MISSION OF IIT THEIR SERVICES RELATED TO THE STRATEGIES OF THE CAMPAIGN AND TELEPHONE SOLICITATIONS TO II LISTS SUPPLIED BY IIT ALL FUNDS RAISED WERE CONTROLLED BY IIT WAS PAID FEES FOR SERVICES PROVIDED IN CONDUCTING THE TELEPHONE SOLICITATIONS OF THE TELEPHONE SOLICITATION WASHBURN & MCGOLDRICK LLC-WASHBURN & MCGOLDRINCREASE PRIVATE PHILANTHROPIC SUPPORT FOR IIT'S OPERATING BUT FACILITIES ALL OF THESE RESOURCES ARE INTENDED TO ENHANCE TO FEED THE INSTITUTION WASHBURN & MCGOLDRICK LLC DO NOT AT ANY CONTROL OF CONTRIBUTIONS IIT EXERCISES CONTROL AND APPROVATION OF ANY SOLICITATION AS WASHBURN & MCGOLDRICK LLC NESOLICITATIONS ON IIT'S BEHALF PAYMENTS FOR SERVICES ARE BASE AND A PER DIEM RATE EXPENSES ARE BILLED SEPARATELY AS EXPENDING TRAVEL, OVERNIGHT ACCOMMODATIONS, MEALS, AND OUT-OF-POCKET LEVITZ-RUFFALO NOEL LEVITZ ALSO PROVIDED SUBSCRIPTION SERVICENDED SERVICES AND	ND DON CONCENDIVIDU RUFFA RUFFA ICK LLC JDGET, HE EDU TIME H AL OVER OD ON A DED ANI T EXPEN CES FOR	NATIONS TEPT, DESIGNALS IDEN LO NOEL LUNDRAISII CWAS ENG ENDOWME CATIONAL HAVE CUST NOTHER CON NOUCTS MONTHLY D AT COST SES , RUF R WHITE-L	O SUPPORT IN AND ITIFIED ON LEVITZ LLC NG ISAGED TO ENT AND PURPOSES TODY OR TENT AND RETAINER IN FOR FALO NOEL ABELED
	dule G, Part I, Line 2b(v) payment of or payment of expenses	RUFFALO NOEL LEVITZ, LLC-PAYMENT OF FEES ,WASHBURN & MCGOLD FEES ,RUFFALO NOEL LEVITZ-PAYMENT ONLY FOR SOFTWARE ,	RICK LI	LC-PAYMEN	NT OF

DLN: 93493069006250 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Illinois Institute of Technology 36-2170136 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (2)(4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2
Part III Grants and Other As			als. Complete If the orga	inization answered "Yes	on Form 990, Part IV, line 22	-
(a) Type of grant or assist	ance	(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		6508	122,331,391			
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Supplemental	Information	on. Provide the inf	ormation required in l	Part I, line 2; Part III	, column (b); and any other a	dditional information.
Return Reference	Explanation	on				
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	THE USE OI	GRANT FUNDS IS M	ONITORED THROUGH A	GRANT MANAGEMENT S	SYSTEM	

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19306	59006	250
Sch	edule J	Co	mpensat	ion Information	40	1B No	1545-0	0047
(For	n 990)	For certain Office	ers, Directors, T	rustees, Key Employees, and Hig	hest			
		Complete if the org	Compensa	ated Employees /ered "Yes" on Form 990, Part IV	. line 23.	20	18	₹
			▶ Attach	to Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.go</u>	<u>v/Form990</u> for	instructions and the latest inform	nation.		to Pul ectio	
	ne of the organiza				Employer identificat			
Illin	ois Institute of Techr	nology			36-2170136			
Pa	rt I Questi	ons Regarding Compensa	tion					
							Yes	No
1a				f the following to or for a person liste y relevant information regarding the				
	First-class	or charter travel		Housing allowance or residence for	personal use			
	_	companions		Payments for business use of perso				
		nification and gross-up payment	s 🔽	Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chaut	reur, cher)			
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1?	2	Yes	
	directors, truste	es, officers, including the CEO/E	xecutive Directo	r, regarding the items checked in line	e la?			
3				ed to establish the compensation of the	ne			
	_	•	1 1 7	not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	✓ Compensa			Mother				
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	7	Approval by the board or compensa	tion committee			
		-	_					
4	During the year, related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
_	_	ance payment or change-of-cont	tral navmant?			4a		No
a b		r receive payment from, a suppl		ified retirement plan?		4b		No
c	•	r receive payment from, an equi	•	'		4c		No
				plicable amounts for each item in Par	III			
5), 501(c)(4), and 501(c)(29)	=	must complete lines 5-9. the organization pay or accrue any				
5		ontingent on the revenues of		the organization pay or accrue any				
а	The organization	1?				5a		No
b	Any related orga					5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	17				6a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Sectio escribed in lines 5 and 6? If "Yes		the organization provide any nonfixe rt III	d	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe			N
9		8, dıd the organızatıon also follo	w the rebuttable	presumption procedure described in	Regulations section	9		No
For E	``	iction Act Notice, see the Ins	tructions for Ec	orm 000 Cat No 5	50053T Schedule 1		2 000)	2018

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

Part II Officers, Directors, Trustees, Rey Employees, and Ting								
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII							
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	nts for that indi	or that individual				
(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table						•		
	1	1	1		1	I	1	
							!	
				+				
	+			+				
				+				
1-		-		+				
1								
			1					

Schedule 3 (10111 330) 2010	raye 3							
art III Supplemental Information								
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information								
Return Reference Explanation								
Schedule J, Part I, Line 1a Health or	The University provided membership dues for Alan Cramb, President, and Peter Kilpatrick, Provost to one business and one civic organization. These memberships							

served a business purpose that helped to support the mission of the University

Dage 3

Schedule 1 (Form 990) 2018

social club dues or initiation fees

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

EIN: 36-2170136

Name: Illinois Institute of Technology

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

(A) Name and Title			of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
Alan Cramb	(1)	654,802	170,000	22,064	24,750	22,390	894,006	0
President	(11)	0	0	0	0	0	0	0
Russell Betts	(1)	327,497	35,000	21,442	24,750	0	408,689	0
Interim Provost/Distinguished Professor/Termed 7/31/18	(11)	0	0	0	0	0	0	0
Betsy Hughes	(1)	321,335	26,892	2,322	24,750	22,391	397,690	0
Vice Pres, Inst Advancement	(11)	0	0	0	0	0	0	0
Mıchael Gosz	(1)	257,208	50,000	1,242	23,967	20,751	353,168	0
VP, Enrlmt/Vice Prov/AssocProf	(11)	0	0	0	0	0	0	0
Darsh Wasan	(1)	298,831	0	2,942	24,750	14,681	341,204	0
Distinguised Professor,ChBE	(11)	0	0	0	0	0	0	0
Ophir Trigalo	(1)	273,605	0	2,322	24,750	22,391	323,068	0
Vice Provost, CIO	(11)	0	0	0	0	0	ol	0
Edwin Watts	(1)	279,135	0	3,461	24,750	973	308,319	0
VP Admnstrn/Facilities/Pub Saf	(11)	0	0	0	0	0	ol	0
Michael Horan	(1)	276,678	0	3,564	24,750	6,648	311,640	0
VP Finance, CFO, Treasurer	(11)	0		0	0	0		0
Anthony D'Amato	(1)	258,358	0	810	23,659	7,177	290,004	0
Vice Pres, Genrl Cnsl & Sec	(11)	0			0	0		0
Peter Kılpatrıck	(1)	232,391	0	19,985	17,759	5,522	275,657	0
Provost, SVP Academic Affairs	(11)	0	0	0	0	0	0	0
Jess Goode	(1)	223,751	0	477	1,563	0	225,791	0
Vice President	(11)	0						
Natacha DePaola	(1)	390,764	0	20,822	24,750	22,204	458,540	0
Kaplan Dean of Engineering	(11)	0			0			
Harold Krent	(1)	339,533	0	40,564	24,750	21,267	426,114	0
Dean & Professor of Law	(11)	0			0			0
Robert Brackett	(1)	316,095	0	5,603	24,750	7,358	353,806	0
Vice President/Professor	(11)	0	0	0	0	0	 	0
John Bilson	(1)	300,637	0	5,661	24,750	14,681	345,729	0
Dean	(11)	0	0	0	0	0	0	0
Heather Harper	(1)	170,490	216,215	335	16,200	22,204	425,444	0
Associate Clinical Professor	(11)	0	0	0	0	0	 ol	0
Mohammad Shahidehpour	(1)	378,175	0	3,564	24,750	22,204	428,693	0
Distinguished Bodine Professor	(11)	0	0	0	0	0	ol	0
Hamid Arastoopour	(1)	312,116	0	23,920	24,750	14,808	375,594	0
Director, WISER/Professor	(11)	0	0	0	0	0		0
Eunice Santos	(1)	296,212	0	690	24,750	6,580	328,232	0
Chair/Hochsprung Chair	(11)	0	ი	n	0	0	 	0
Sumanta Acharya	(1)	272,913	0	22,064	24,127	187	319,291	0
Professor & Department Chair	(11)	0	0	0	0	0		0
Chall			ı		<u> </u>	Ů	ı	<u> </u>

(A) Name and Title

(B) Breakdown of W-2 and/or 1099-MISC compensation

(i) Base Compensation

(ii) Bonus & incentive

(iii) Compensation

(iii) Other deferred compensation

(b) Nontaxable benefits

(c) Retirement and other deferred compensation

(b) Nontaxable benefits

(c) Retirement and other deferred compensation

(b) Nontaxable benefits

(c) Retirement and other deferred compensation

(d) Nontaxable benefits

(e) Total of columns (B) (iii) Columns (B) (IIII)

			compensation	Other reportable compensation	compensation			prior Form 990
Wiel Arets	(1)	213,604	0	3,002	19.287	0	235,893	0

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

Professor/Former key employee

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493069006250 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule K Supplemental Information on Tax-Exempt Bonds (Form 990) **2018** ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ➤ Attach to Form 990. Department of the Treasury Internal Revenue Service ▶Go to www.irs.gov/Form990 for the latest information. Name of the organization Employer identification number Illinois Institute of Technology 36-2170136 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 (i) Pool behalf of financing ıssuer Yes No Yes No Yes ILLINOIS FINANCE AUTHORITY Х 86-1091967 45200BYH5 03-23-2006 156,502,991 REFINANCE & FACILITY RENOVATION ILLINOIS FINANCE AUTHORITY 86-1091967 000000000 01-31-2019 22,278,000 REFUND A PRIOR TAX-EXEMPT Х Χ ISSUE DATED 7/22/2009 AND FOR FACILITY RENOVATION AND **EQUIPMENT** ILLINOIS FINANCE AUTHORITY 86-1091967 000000000 06-28-2018 17,972,000 REIMBURSEMENT FOR THE Х Χ ACQUISITION OF STUDENT RESIDENT FACILITIES

19,895,000

156,502,991

1,418,858

51,378,575

103,705,558

No

No

Χ

Χ

Cat No 50193E

2008

Δ

Yes

Χ

Χ

Χ

Χ

Yes

No

Х

Х

Χ

D

C

22,278,000

300.999

321,404

21,655,597

No

Х

No

Χ

Χ

2019

Yes

Х

Χ

Χ

Yes

ol

17,972,000

92.573

17,879,427

No

Χ

Χ

No

Χ

Χ

Yes

Yes

Schedule K (Form 990) 2018

D

No

No

2018

C

Yes

Χ

Χ

Yes

Part II **Proceeds**

2

3

5

6

7

8

9

10

11

12

13

14

15

16

17

1

Part 🏻

Were the bonds issued as part of an advance refunding issue? .

Private Business Use

Were the bonds issued as part of a current refunding issue?

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

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

Was the organization a partner in a partnership, or a member of an LLC, which owned property

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

b

C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

D

D

Schedule K (Form 990) 2018

No

Yes

Yes

C

No

X

Χ

0 %

0 %

0 %

Χ

Х

Yes

Χ

No

Χ

Х

Χ

Х

C

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

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

Has the organization or the governmental issuer entered into a qualified

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

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

Rebate not due yet?

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

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

Yes

Х

No

Χ

Χ

Χ

Χ

Χ

Α

Yes

Χ

Nο

Χ

Χ

0 %

0 %

0 %

В

Yes

Χ

Χ

Х

Χ

Yes

Χ

No

Χ

Χ

Χ

X

No

Х

Χ

0 %

0 %

0 %

Χ

Х

Yes

Х

Х

Х

Yes

Χ

Nο

Explanation

If the total proceeds of the issue exceeds the issue price of the respective bond, the difference is due to investment earnings. Earnings are included in the total

Х

Yes

Χ

Х

No

Yes

Х

No

Yes

Page 3

Nο

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

Χ

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

Schedule K (Form 990) 2018

period?

Part V

Part VI

bonds on Schedule K

the GIC satisfied?

requirements of section 148? . . .

Return Reference

Schedule K. Part II. Line 3 All listed

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

proceeds of each issue

Return Reference	Explanation
	Issuer name ILLINOIS FINANCE AUTHORITY The calculation for computing no rebate due was performed on 01/27/2011

Return Reference	Explanation
	Issuer name ILLINOIS FINANCE AUTHORITY The calculation for computing no rebate due was performed on 02/25/2019

Explanation
Issuer name ILLINOIS FINANCE AUTHORITY The calculation for computing no rebate due was performed on 02/25/2019

efile GRAPHI	C print - DO	NOT PROCES	S As	Filed Data -					DL	N: 93	4930	690	06250		
Schedule L (Form 990 or 990	I-EZ) ► Com	plete if the org	anizatio	ons with Ir	on Form 9	90, Part IV, li	nes 2	:5a, 2	25b, 26		МВ No	1545	5-0047		
			, <mark>28</mark> b, or	· 28c, or Form 99 tach to Form 990	0-EZ, Part V	, line 38a or 4		,	·		20	1	8		
Department of the Tre	l l	≯ Go t	o <u>www.</u>	irs.gov/Form990	for the late	st information	۱.				Open	to P	ublic		
Internal Revenue Serv Name of the org							Er	nplo	yer ide	ntifica		oecti numb			
Illinois Institute of	Technology							-	0136						
				01(c)(3), section 5			ganız	ations	only)						
		<u>nization answere</u> ualified person		on Form 990, Part I					rt V, lır Pescript		(4) Cor	rected?		
1 (a) Name or disq	uaimeu person			rganization	illiled person an	"		ansactı			es	No		
							-								
			+				+								
Cor	nplete if the orgonical or	ganization answered " int on Form 990, Part X ship (c) Purpose (d)						38a, or Form 99 (f)Balance due	(g) defa	(g) In default? Approved board committee			(i)Written d by agreement?		
			То	From			Yes	No	Yes	No	Yes		No		
Total	•	•	•	•	\$										
Part III Gra	nts or Assis	tance Benefit	tina Int	erested Persoi	15.										
				"Yes" on Form 9		, line 27.									
(a) Name of Inter	rested person	(b) Relationship interested perso organizat	on and th		of assistance	(d) Type o	of assi	stand	e	(e) Pu	rpose (of ass	ıstance		
									_						
									_						
For Paperwork Rec	luction Act Note	ce, see the Instru	ctions foi	 	Z. C.	at No 50056A		Scl	redule I	(Form	990 0	r 990-	EZ) 2018		

(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) POWER UJAMAA 3 LLC	Trustee James A Akıntonde is an executive of Power Ujamaa 3 LLC's parent company	7,529,492	INDEPENDENT CONTRACTOR		No
Part V Supplemental Information					

Provide additional information for responses to questions on Schedule L (see instructions) Return Reference Explanation Schedule L, Part IV BUSINESS TRANSACTIONS WITH INTERESTED BUSINESS TRANSACTIONS WITH INTERESTED PERSONS SCHEDULE L, PART IV THE TRANSACTIONS LIST IN SCHEDULE L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS, WERE PERSONS CONSISTENT WITH THE CONFILCT OF INTEREST POLICY DESCRIBED IN SCHEDULE OF ILLINOIS INSTITUTE.

Schedule L, Part IV BUSINESS
TRANSACTIONS WITH INTERESTED
PERSONS

BUSINESS TRANSACTIONS WITH INTERESTED PERSONS SCHEDULE L, PART IV THE TRANSACTIONS LISTED
IN SCHEDULE L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS, WERE
CONSISTENT WITH THE CONFLICT OF INTEREST POLICY DESCRIBED IN SCHEDULE O ILLINOIS INSTITUTE
OF TECHNOLOGY REQUIRES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY FOR ALL BUSINESS
TRANSACTIONS WITH INTERESTED PERSONS IN FY 2019, TRUSTEE JAMES A AKINTONDE WAS AN
EXECUTIVE FOR THE PARENT COMPANY WHICH HAD A JOINT VENTURE, POWER UJAMAA 3 LLC POWER

TRANSACTIONS WITH INTERESTED PERSONS IN FY 2019, TRUSTEE JAMES A AKINTONDE WAS AN EXECUTIVE FOR THE PARENT COMPANY WHICH HAD A JOINT VENTURE, POWER UJAMAA 3 LLC POWER UJAMAA 3 LLC WAS AWARDED A CONTRACT, PURSUANT TO AN RFP, TO CONSTRUCT A CAMPUS INNOVATION CENTER PAYMENTS FOR THIS CONSTRUCTION WERE MADE FROM TEMPORARILY RESTRICTED GIFTS THAT WERE RECEIVED AS A RESULT OF AN INTERNAL CAPITAL CAMPAIGN

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493069006250 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Illinois Institute of Technology 36-2170136 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 5,604,583 Market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles Food inventory . . . 19 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ See Additional Data Other ▶ (______) 26 Other ▶ (______) 27 Other ▶ (______) 28 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 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2
I, column (b), the	formation. lation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part number of contributions, the number of items received, or a combination of both. Also complete dditional information.
Return Reference	Explanation
Schedule M, Part I Explanations of reporting method for number of contributions	Securities - Publicly traded - number of contributions Other - Engineering equipment number of contributions Other - WBBM News radio Chicago Media Package number of contributions Other - Flat Panel Smartboard 7000 Series number of contributions Other - 65" Mondopad Ultra, anti-glare touchscreen collaboration system number of contributions Other - Instruction material including drawings, programs, and memorabilia for school of architecture number of contributions Other - IBM 5110 portable computer with data tapes and manuals number of contributions
	Schedule M (Form 990) (2018)

Additional Data

Other ▶ (

and manuals

IBM 5110 portable computer with data tapes

			Software ID:	18007697	
			Software Version:	2018v3.1	
			EIN:	36-2170136	
			Name:	Illinois Institute of Techno	ology
Part I, Lines 25-28		_			
		(a) Check if applicable	(b) Number of contributions of items contributed	(c) r Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
Other ► (Engineering equipment)		Х		1 128,000	Market value
Other ▶ (WBBM News radio Chicago Media Package)	X		1 67,500	Market value
Other ► (Flat Panel Smartboard 7000 Series)	Х		7,198	Market value
Other ► (65" Mondopad Ultra, anti- glare touchscreen collaboration system)	X		1 6,100	Market value
Other ▶ (Instruction material including drawings, programs, and memorabilia for school of architecture)	X		1 4,050	Market value

1,000 Market value

Х

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SCHEDUL (Form 990 or EZ)	Complete to provide information for responses Form 990 or 990-EZ or to provide any addi Attach to Form 990 or 990	to specific questions on tional information. D-EZ.	OMB No 1545-0047 2018 Open to Public Inspection
Name Betherofganization Illinois Institute of Technology		Employer identi 36-2170136	fication number
Return Reference	e O, Supplemental Information Explanation	1	
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 22,826,342 including grants of \$)(Revenue \$ 18,451,889) s program provides health, academic, career services, transitional assis entation and other student services including the student finance center registration	stance, student orı	

Return Reference	Explanation	
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 19,372,900 including grants of \$)(Revenue \$ 7,703,246) ACADEMIC SUPPORT - IIT provides students with the information skills to compete in today's challenging and rapidly changing environment through its several libraries and academic computing centers allowing students access to terminals. In addition, the Academic Resource Center office offers several programs that provide peer tutoring, exam reviews, advising and counseling.	

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	As stated in Article 5, Section 5 of the organizations By-Laws, there shall be an Executive e Committee of the Board of Trustees. With the caveat that the Board of Trustees may override the Executive Committee and except as otherwise provided in Article 5, Section 6, the Board of Trustees delegates to the Executive Committee all the powers vested in the Board of Trustees by law or by these Bylaws in the management of the property, business and affairs of the corporation. The Executive Committee shall include, as ex officion members, the Chair of the Board, the immediate past Chair, any Vice Chairs, the Chairs of all committee silsted in Article 5, Sections 3 and 4, and the President. If the Chair of the Board of the Board of the Board of the Board of the Executive Committee for the term of his or her office as Chair of the Board of the IIT Alumni Association. Up to eight additional members of the Executive Committee shall be annually elected for three-year terms by the Board of Trustees from the regularly elected members of the Board.

Return Reference	Explanation
VI, Line 2	A Steven Crown, Richard N Levy, Craig J Duchossois, and Kevin Willer - Business relationship, John Rowe and Efthimios S Stojka - Business relationship, Patrick J Kelly, James E Cowie, Craig J Duchossois - Business relationship, Victor A Morgenstern and Anita M Nagler - Business relationship, James Cowie and Jim Dugan - Business relationship, Eric C Larson and Craig J Duchossois - Business relationship, A Stephen Crown and Brian C Walker - Business relationship, S Christopher Gladwin and Michael Seedman - Business relationship

Return Reference	Explanation
Form 990,	THE FORM 990 IS REVIEWED BY THE VP FINANCE, CFO & TREASURER, AVP FINANCE & CONTROLLER, ASS
Part VI, Line	OCIATE CONTROLLER, AND BY THE VP GENERAL COUNSEL & SECRETARY ONCE THE FORM 990 IS APPROVE
11b Review	D BY MANAGEMENT, THE FORM IS PRESENTED TO THE AUDIT AND COMPLIANCE COMMITTEE AND THE EXECU
of form 990	TIVE COMMITTEE (ACTING FOR THE FULL BOARD OF TRUSTEES) FOR REVIEW WHEN THIS REVEIW IS COM
by governing	PLETED, IT IS PUT ON A TRUSTEE WEBSITE GIVING ALL THE TRUSTEES THE OPPORTUNITY TO REVIEW
body	ONCE ALL REVIEWS ARE COMPLETED, THE VP FINANCE, CFO & TREASURER SIGNS THE FORM 990

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	ON AN ANNUAL BASIS, IIT EMPLOYEES AND BOARD OF TRUSTEE MEMBERS MUST REVIEW THE CONFLICT OF INTEREST POLICY ALL EMPLOYEES AND TRUSTEES ARE REQUIRED TO SIGN AND DATE A CONFLICT OF I NTEREST ATTESTATION DOCUMENT WHETHER A CONFLICT IS PRESENT OR NOT GENERAL COUNSEL MONITOR S THE EMPLOYEES AND TRUSTEES THAT HAVE REVIEWED THE POLICY AND DOCUMENTS THE CONFLICT OF I NTEREST INSTANCES

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	THE BOARD OF TRUSTEES HAS ESTABLISHED AN INDEPENDENT COMPENSATION COMMITTEE THAT IS RESPON SIBLE FOR RECOMMENDING THE PRESIDENT'S (CEO) SALARY THE COMMITTEE WILL BASE THE SALARY ON A HUMAN RESOURCE BENCHMARK STUDY COMPARING SELECTED UNIVERSITIES HAVING SIMILAR STUDENT E NROLLMENTS AND PROGRAMS ON AN ANNUAL BASIS, HUMAN RESOURCES WILL PROVIDE THE COMMITTEE AN UPDATED BENCHMARK SURVEY FOR THEIR REVIEW BASED ON THE ANNUAL SURVEY, THE COMMITTEE MAY RECOMMEND AN ADJUSTMENT TO THE PRESIDENT'S SALARY AFTER THE EXECUTIVE COMMITTEE REVIEWS THE COMPENSATION COMMITTEE RECOMMENDATIONS, IT VOTES TO APPROVE THE COMPENSATION

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The authority to recommend the annual salaries of the Vice Presidents and other senior off icers is delegated to an independent Compensation Committee by the Board of Trustees. The Committee, with input from the President, obtains comparative analyses and studies from the Human Resource department with respect to compensation of similar organizations to ensure that the University's compensation is comparable. After the Executive Committee reviews the compensation committee recommendations, it votes to approve the compensation.

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990,	FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE LOCATED ON THE
Part VI, Line	ILLINOIS INSTITUTE OF TECHNOLOGY'S WEBSITE
19 Required	
documents	
available to	
the public	

	Return Reference	Explanation
	Form 990, Part XI, Line	CHANGE IN VALUE OF BENEFICIAL INTEREST IN PERPETUAL TRUSTS56674, CHANGE IN ASSET RETIR EMENT OBLIGATION, NET - 515477, OTHER, NET1041236, EXTINGUISHMENT OF DEBT771626, R
	9 Other changes in	ESTRUCTURING EXPENSES5996192,
	net assets or fund	
l	balances	

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SCHEDULE R
(Form 990) Related

Complete if the org

Department of the Treasury

Internal Revenue Service

Name of the organization

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 <u>www.irs.gov/Form990</u> for instructions and the latest information.

2018

DLN: 93493069006250OMB No 1545-0047

Open to Public Inspection

Employer identification number

Illinois Institute of Technology							36-2	170136				
Part I Identification of Disregarded Entities Complete	ıf the organ	ızatıon answe	ered "Yes	on Form	n 990, Part I	[V, lıne	33.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary ac		Legal don or foreig	(c) omicile (state To gn country)		i) ncome	(e) End-of-year assets		.s Direct contro entity		
Part II Identification of Related Tax-Exempt Organizati	i ons Comple	ete if the orga	anization	answered	"Yes" on Fo	orm 990), Part I\	/, line 34 t	oecause	ıt had one or	more	
related tax-exempt organizations during the tax year (a) Name, address, and EIN of related organization		(b) ry activity	(c Legal domi or foreign	cıle (state	(d) Exempt Code	section	Public ch (if section	(e) arity status n 501(c)(3))	Dire	(f) ect controlling entity	Section (13) cor	512(b) ntrolled
(1)IIT RESEARCH INSTITUTE 10 WEST 35TH STREET CHICAGO, IL 60616 36-2169122	RESEARCH	RESEARCH		L	501(c)(3)		11		ILLINOIS INSTITUTE OF TECHNOLOGY		Yes Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Forn	n 990.		Ca	t No 501	35Y				Sch	edule R (Form	990) 20	018

Part III Identification of Related Organizations tre	ations Taxable as a Feated as a partnership	Partnership during the ta	Complet x year.	te ıf the	organizatio	n ansv	wered "Ye	es" on Form	990,	Part I	V, line 34 t	ecau	se ıt	had	
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	g Predon g Income(I unrela exclude tax ul section:	ninant related, ated, d from nder s 512-	(f) Share of total incom		(I Disprop alloca		(i) Code V-UBI amount in bo 20 of Schedule K-: (Form 1065)	Gene man part	j) eral or aging :ner?	(Percel owne	
					J1.	+)			Yes	No	1	Yes	No		
Part IV Identification of Related Organization because it had one or more related or							ation ans	wered "Yes	" on F	orm 9	90, Part IV	, line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c Leg dom (state or coun	gal icile foreign	Dire	(d) ct controlling entity	Type (C cor	(e) of entity rp, S corp, trust)	(f) Share of tota Income		(g) e of end year assets	l-of- Perc	h) entage ership		(i) Section (b)(i) contro entit	n 512 13) ol l ed
(1) PERPETUAL TRUST (7) BENEFICIAL INTEREST IN DONOR TRUSTS	DISTRIBUTION OF TRUST ASSETS TO BENEFICIARIES			N/A		Trust								Yes	No
C/O IIT 3424 SOUTH STATE STREET TC-4 FL CHICAGO, IL 60616															
(2) ILLINOIS INSTITUTE OF TECHNOLOGY (INDIA) PRIVATE LTD	FACILITATES EDUCATIONAL PROGRAMS	IN	l	ILLI	IOIS ITUTE OF	C Corp	oration	310,27	9	147,	535 100	%		Yes	
677 16th Main 6th Cross 3rd Block Koramangala Behind BDA complex BENGALORE 560034 IN					INOLOGY										
													\dashv		
											<u> </u>				

(1)IIT India

(2)IIT Research Institute

(3)IIT Research Institute

(4)IIT Research Institute

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

r Other transfer of cash or property to related organization(s) . . .

Lease of facilities, equipment, or other assets to related organization(s) . . .

Performance of services or membership or fundraising solicitations for related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

Name of related organization

Sale of assets to related organization(s).

Purchase of assets from related organization(s).

Exchange of assets with related organization(s). .

No

No No

No

No

No

No

No No

1f

1i

1j Yes

1k

11 Yes

1m

1n 10

1r

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

Yes

Yes 1p **1**q 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?								

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	T		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)	ιБ		No
С	Gift, grant, or capital contribution from related organization(s)	[c		No
d	Loans or loan guarantees to or for related organization(s)	ıd		No
_	Loans or loan guarantees by related organization(s)	ίe		No

)	Gift, grant, or capital contribution to related organization(s)	1 b	
:	Gift, grant, or capital contribution from related organization(s)	1c	
ı	Loans or loan guarantees to or for related organization(s)	1 d	
•	Loans or loan guarantees by related organization(s)	1b 1c 1d 1e	
			Γ

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

(b)

Transaction type (a-s)

(c)

Amount involved

292,636

266,500

382,238

1.631.846

FMV

FMV

FMV

FMV

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) e all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	allocations? a		Disproprtionate		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	x managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
										Schedul	e R (Forn	1 99	0) 2018		

