

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021****Open to Public Inspection**



<b>A</b> For the 2021 calendar year, or tax year beginning <u>07/01</u> , 2021, and ending <u>06/30</u> , 20 <u>22</u>																									
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization <u>VANDERBILT UNIVERSITY</u></td> <td><b>D</b> Employer identification number <u>62-0476822</u></td> </tr> <tr> <td colspan="2">Doing business as</td> <td rowspan="3"><b>E</b> Telephone number <u>(615) 343-6601</u></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2"><u>PMB 406310, 2301 VANDERBILT PLACE</u></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <u>NASHVILLE, TN 37240-6310</u></td> <td rowspan="2"><b>G</b> Gross receipts \$ <u>10,734,967,138</u></td> </tr> <tr> <td colspan="2"><b>F</b> Name and address of principal officer: <u>DANIEL DIERMEIER</u> <u>211 KIRKLAND, 2201 WESTEND, NASHVILLE, TN 37240</u></td> </tr> <tr> <td colspan="2"><b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No          If "No," attach a list. See instructions.       </td> </tr> <tr> <td colspan="2"><b>J</b> Website: ▶ <u>WWW.VANDERBILT.EDU</u></td> <td><b>H(c)</b> Group exemption number ▶</td> </tr> <tr> <td colspan="2"><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td><b>L</b> Year of formation: <u>1873</u> <b>M</b> State of legal domicile: <u>TN</u></td> </tr> </table>	<b>C</b> Name of organization <u>VANDERBILT UNIVERSITY</u>		<b>D</b> Employer identification number <u>62-0476822</u>	Doing business as		<b>E</b> Telephone number <u>(615) 343-6601</u>	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<u>PMB 406310, 2301 VANDERBILT PLACE</u>		City or town, state or province, country, and ZIP or foreign postal code <u>NASHVILLE, TN 37240-6310</u>		<b>G</b> Gross receipts \$ <u>10,734,967,138</u>	<b>F</b> Name and address of principal officer: <u>DANIEL DIERMEIER</u> <u>211 KIRKLAND, 2201 WESTEND, NASHVILLE, TN 37240</u>		<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.	<b>J</b> Website: ▶ <u>WWW.VANDERBILT.EDU</u>		<b>H(c)</b> Group exemption number ▶	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <u>1873</u> <b>M</b> State of legal domicile: <u>TN</u>
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**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<u>35</u>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<u>34</u>
	<b>5</b>	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<u>12,902</u>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<u>10,700</u>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<u>76,829,457</u>
	<b>b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<u>0</u>
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g)	<u>306,947,408</u>	<u>325,430,127</u>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>1,208,081,899</u>	<u>1,274,537,853</u>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>1,299,794,832</u>	<u>1,589,140,119</u>
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>29,422,008</u>	<u>127,532,583</u>
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u>2,844,246,147</u>	<u>3,316,640,682</u>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<u>410,818,784</u>	<u>437,904,982</u>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<u>724,662,639</u>	<u>765,411,669</u>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>33,999,362</u>	<u>183,844</u>	<u>328,102</u>
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>786,933,220</u>	<u>826,245,539</u>
	<b>18</b>	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>1,922,598,487</u>	<u>2,029,890,292</u>
<b>Net Assets or Fund Balances</b>	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<u>921,647,660</u>	<u>1,286,750,390</u>
	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<u>13,854,160,867</u>	<u>13,531,777,510</u>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<u>3,400,411,597</u>	<u>3,573,286,552</u>
			<u>10,453,749,270</u>	<u>9,958,490,958</u>

**Part II Signature Block**

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

<b>Sign Here</b>		<u>5/2/2023</u>	
	Signature of officer	Date	
	<u>BRETT SWEET, CFO</u>		
	Type or print name and title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	<u>TRAVIS PATTON</u>		<u>4/27/2023</u>
	Firm's name ▶ <u>PRICEWATERHOUSECOOPERS, LLP</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P00369623</u>
	Firm's address ▶ <u>655 NEW YORK AVE, NW, SUITE 1100, WASHINGTON, DC 20001</u>	Firm's EIN ▶ <u>13-4008324</u>	Phone no. <u>(202) 414-1000</u>

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2021)



Department of the Treasury  
Internal Revenue Service  
Ogden, UT 84201

Notice	CP211A
Tax period	June 30, 2022
Notice date	November 28, 2022
Employer ID number	62-0476822
To contact us	Phone 877-829-5500
Page 1 of 1	

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VANDERBILT UNIVERSITY  
% VANDERBILT UNIVERSITY  
2301 VANDERBILT PL PMB 406310  
NASHVILLE TN 37240-7727

206407

Important information about your June 30, 2022, Form 990

## We approved your Form 8868, Application for Automatic Extension of Time to File an Exempt Organization Return

We approved the Form 8868 for your June 30, 2022, Form 990, Return of Organization Exempt From Income Tax. Your new due date is May 15, 2023.

### What you need to do

File your June 30, 2022, Form 990 by May 15, 2023. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit [www.irs.gov/charities](http://www.irs.gov/charities) to learn about approved e-file providers, the types of returns you can file electronically, and whether you're required to file electronically.

### Additional information

- Visit [www.irs.gov/cp211a](http://www.irs.gov/cp211a).
- Find tax forms or publications by visiting [www.irs.gov/forms](http://www.irs.gov/forms) or calling 800-TAX-FORM (800-829-3676).
- Keep this notice for your records.

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐ Yes ☒ No**1** Briefly describe the organization's mission:SEE SCHEDULE O**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

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

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

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ 1,301,762,002 including grants of \$ 377,916,413) (Revenue \$ 1,197,274,993)  
SEE SCHEDULE O - EDUCATION**4b** (Code: ) (Expenses \$ 251,295,818 including grants of \$ 59,988,569) (Revenue \$ 77,248,175)  
SEE SCHEDULE O - ACADEMIC AND SCIENTIFIC RESEARCH**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **▶** 1,553,057,820

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b> ✓	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? See instructions . . . . .	<b>2</b> ✓	
<b>3</b> 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 . . . . .	<b>3</b>	✓
<b>4</b> <b>Section 501(c)(3) organizations.</b> 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 . . . . .	<b>4</b> ✓	
<b>5</b> 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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III . . . . .	<b>5</b>	✓
<b>6</b> 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 . . . . .	<b>6</b>	✓
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . .	<b>7</b>	✓
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<b>8</b> ✓	
<b>9</b> 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 . . . . .	<b>9</b>	✓
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V . . . . .	<b>10</b> ✓	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	<b>11a</b> ✓	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	<b>11b</b> ✓	
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	<b>11c</b>	✓
<b>d</b> 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 . . . . .	<b>11d</b>	✓
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	<b>11e</b> ✓	
<b>f</b> 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 . . . . .	<b>11f</b> ✓	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .	<b>12a</b>	✓
<b>b</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 . . . . .	<b>12b</b> ✓	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b> ✓	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b> ✓	
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b> ✓	
<b>15</b> 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 . . . . .	<b>15</b> ✓	
<b>16</b> 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 . . . . .	<b>16</b>	✓
<b>17</b> 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 . . . . .	<b>17</b> ✓	
<b>18</b> 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 . . . . .	<b>18</b> ✓	
<b>19</b> 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 . . . . .	<b>19</b>	✓
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	✓
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .	<b>21</b> ✓	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .	<b>22</b> ✓	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J . . . . .	<b>23</b> ✓	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . . . .	<b>24a</b>	✓
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .	<b>25a</b>	✓
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>25b</b>	✓
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II . . . . .	<b>26</b> ✓	
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III . . . . .	<b>27</b> ✓	
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV . . . . .	<b>28a</b>	✓
<b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV . . . . .	<b>28b</b> ✓	
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV . . . . .	<b>28c</b>	✓
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . .	<b>29</b> ✓	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . . . . .	<b>30</b> ✓	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . .	<b>31</b>	✓
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . .	<b>32</b>	✓
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I . . . . .	<b>33</b> ✓	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . . . .	<b>34</b> ✓	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>35a</b> ✓	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	<b>35b</b> ✓	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	<b>36</b>	✓
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI . . . . .	<b>37</b>	✓
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b> ✓	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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



	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable . . . . .	<b>1a</b> 18,882	
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . . . . .	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b> ✓	



<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b> (continued)			Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 12,902		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	<b>2b</b>	✓	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	✓	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>	✓	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>	✓	
<b>b</b>	If "Yes," enter the name of the foreign country ► <a href="#">AR, AS, BD, BC, BR, (CONTINUED ON SCHEDULE O)</a> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		✓
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6a</b>		✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	✓	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	✓	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		✓
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		✓
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	✓	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:			
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:			
<b>a</b>	Gross income from members or shareholders	<b>11a</b>		
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>		
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		✓
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>		
<b>15</b>	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 the instructions and file Form 4720, Schedule N.	<b>15</b>	✓	
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	✓	
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</b>		

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

### Section A. Governing Body and Management

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . . <b>1a</b> 35		
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 on Schedule O.		
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent . . . . . <b>1b</b> 34		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . . <b>2</b>	<input checked="" type="checkbox"/>	
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . . <b>3</b>		<input checked="" type="checkbox"/>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . <b>4</b>		<input checked="" type="checkbox"/>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . <b>5</b>		<input checked="" type="checkbox"/>
<b>6</b> Did the organization have members or stockholders? . . . . . <b>6</b>		<input checked="" type="checkbox"/>
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . . <b>7a</b>		<input checked="" type="checkbox"/>
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . . <b>7b</b>		<input checked="" type="checkbox"/>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body? . . . . . <b>8a</b>	<input checked="" type="checkbox"/>	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . . <b>8b</b>	<input checked="" type="checkbox"/>	
<b>9</b> 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 on Schedule O . . . . . <b>9</b>		<input checked="" type="checkbox"/>

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? . . . . . <b>10a</b>		<input checked="" type="checkbox"/>
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . . <b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . . <b>11a</b>	<input checked="" type="checkbox"/>	
<b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . <b>12a</b>	<input checked="" type="checkbox"/>	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . . <b>12b</b>	<input checked="" type="checkbox"/>	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. . . . . <b>12c</b>	<input checked="" type="checkbox"/>	
<b>13</b> Did the organization have a written whistleblower policy? . . . . . <b>13</b>	<input checked="" type="checkbox"/>	
<b>14</b> Did the organization have a written document retention and destruction policy? . . . . . <b>14</b>	<input checked="" type="checkbox"/>	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official . . . . . <b>15a</b>	<input checked="" type="checkbox"/>	
<b>b</b> Other officers or key employees of the organization . . . . . <b>15b</b>	<input checked="" type="checkbox"/>	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . . <b>16a</b>	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . <b>16b</b>	<input checked="" type="checkbox"/>	

### Section C. Disclosure

**17** List the states with which a copy of this Form 990 is required to be filed ► NONE

**18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

**20** State the name, address, and telephone number of the person who possesses the organization's books and records ►  
DALANA ROBERTSON, 110 21ST AVENUE SOUTH SUITE 900, NASHVILLE, TN 37203, (615) 343-6601

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☒**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANDERS W. HALL SEE SCHEDULE O	50.0 3.8			✓				2,873,269	0	1,561,096
(2) JERRY STACKHOUSE SEE SCHEDULE O	50.0 0.0					✓		3,056,059	0	141,223
(3) CLARK LEA SEE SCHEDULE O	50.0 0.0					✓		3,011,618	0	40,263
(4) TIMOTHY C. CORBIN SEE SCHEDULE O	50.0 0.0					✓		2,264,990	0	182,069
(5) DANIEL DIERMEIER SEE SCHEDULE O	50.0 0.0	✓		✓				1,911,404	0	305,519
(6) DEREK MASON SEE SCHEDULE O	50.0 0.0					✓		2,166,660	0	0
(7) TRAVIS W. SHORE SEE SCHEDULE O	50.0 8.1					✓		1,364,456	0	657,731
(8) BRETT C. SWEET SEE SCHEDULE O	50.0 5.0			✓				1,508,313	0	241,091
(9) JOHN M. LUTZ SEE SCHEDULE O	50.0 0.0			✓				1,114,110	0	104,821
(10) SUSAN WENTE SEE SCHEDULE O	50.0 0.1						✓	976,444	0	49,836
(11) NICHOLAS S. ZEPPPOS SEE SCHEDULE O	50.0 0.0						✓	961,716	0	34,152
(12) CANDICE S. LEE SEE SCHEDULE O	50.0 0.2			✓				883,473	0	64,991
(13) LAWRENCE J. MARNETT SEE SCHEDULE O	50.0 0.0				✓			819,273	0	36,126
(14) JOHN GEER SEE SCHEDULE O	50.0 0.0				✓			692,671	0	117,160

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**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 for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) ERIC C. KOPSTAIN SEE SCHEDULE O	50.0 2.0			✓				720,494	0	64,510
(16) RUBY SHELLAWAY SEE SCHEDULE O	50.0 1.6			✓				716,127	0	51,036
(17) C. CYBELE RAVER SEE SCHEDULE O	50.0 0.0			✓				561,539	0	128,211
(18) ANDRE L. CHURCHWELL SEE SCHEDULE O	30.0 0.0			✓				609,491	0	0
(19) MALCOLM TURNER SEE SCHEDULE O	0.0 0.0						✓	549,333	0	0
(20) STEVE ERTEL SEE SCHEDULE O	50.0 0.1			✓				417,398	0	57,397
(21) NATHAN GREEN SEE SCHEDULE O	50.0 0.0			✓				433,607	0	36,447
(22) ADENA FRIEDMAN TRUSTEE	1.0 0.0	✓						0	0	0
(23) ADOLPHO A. BIRCH III SECRETARY	1.0 0.0	✓						0	0	0
(24) ALEXANDER C. TAYLOR TRUSTEE	1.0 0.0	✓						0	0	0
(25) (SEE STATEMENT)										
<b>1b Subtotal</b>								27,612,445	0	3,873,679
<b>c Total from continuation sheets to Part VII, Section A</b>								0	0	0
<b>d Total (add lines 1b and 1c)</b>								27,612,445	0	3,873,679

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 1,507

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	✓	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	✓	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		✓

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
LAYTON CONSTRUCTION COMPANY LLC, 9090 SANDY PKWY, SANDY, UT 84070	CONSTRUCTION SERVICES	59,438,725
VANDERBILT UNIVERSITY MEDICAL CENTER, 1161 21ST AVE S., D-3300 MCN, NASHVILLE, TN 37232-5445	AFFILIATION SERVICES	35,784,617
2U, INC., 7900 HARKINS RD., LANHAM, MD 20706	ONLINE EDUCATION SERVICES	12,406,253
BARTON MALOW BUILDERS, 26500 AMERICAN DRIVE, SOUTHFIELD, MI 48034-2252	CONSTRUCTION SERVICES	11,489,365
PARENT COMPANY INC., 643 W. COURT STREET, CINCINNATI, OH 45203	CONSTRUCTION SERVICES	5,532,556

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶** 241

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants, and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b>	Membership dues . . . . .	<b>1b</b>				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>	58,205			
	<b>d</b>	Related organizations . . . . .	<b>1d</b>				
	<b>e</b>	Government grants (contributions)	<b>1e</b>	186,117,348			
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	139,254,574			
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b>	\$ 25,708,952			
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		325,430,127			
	<b>Program Service Revenue</b>				Business Code		
<b>2a</b>		TUITION AND FEES		611310	689,932,749	689,932,749	
<b>b</b>		AFFILIATED ENTITY REV		611310	324,257,679	324,257,679	
<b>c</b>		ROOM, BOARD & AUXILIARY		611310	163,912,821	163,690,067	222,754
<b>d</b>		RESEARCH & OTHER CONTR		611310	77,248,175	77,248,175	
<b>e</b>		OTHER AUXILIARY		611310	5,573,810	5,463,185	110,625
<b>f</b>		All other program service revenue . . . . .		611310	13,612,619	13,612,619	0
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . .			1,274,537,853		
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .			262,051,226		51,391,961
	<b>4</b>	Income from investment of tax-exempt bond proceeds					
	<b>5</b>	Royalties . . . . .			107,452,718		11,354
	<b>6a</b>	Gross rents . . . . .	(i) Real	7,726,661			
			(ii) Personal				
	<b>b</b>	Less: rental expenses			3,613,359		
	<b>c</b>	Rental income or (loss)			4,113,302	0	
	<b>d</b>	Net rental income or (loss) . . . . .			4,113,302		4,113,302
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	8,741,715,000			
			(ii) Other				
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .			7,414,626,107		
	<b>c</b>	Gain or (loss) . . . . .			1,327,088,893	0	
	<b>d</b>	Net gain or (loss) . . . . .			1,327,088,893		9,431,107
	<b>8a</b>	Gross income from fundraising events (not including \$ 58,205 of contributions reported on line 1c). See Part IV, line 18 . . . . .			73,203		
	<b>b</b>	Less: direct expenses . . . . .			86,990		
	<b>c</b>	Net income or (loss) from fundraising events . . . . .			(13,787)		(13,787)
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .					
	<b>b</b>	Less: direct expenses . . . . .					
<b>c</b>	Net income or (loss) from gaming activities . . . . .						
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .						
<b>b</b>	Less: cost of goods sold . . . . .						
<b>c</b>	Net income or (loss) from sales of inventory . . . . .						
<b>Miscellaneous Revenue</b>				Business Code			
	<b>11a</b>	OTHER REVENUE		721110	15,980,350	318,694	15,661,656
	<b>b</b>						
	<b>c</b>						
	<b>d</b>	All other revenue . . . . .			0	0	0
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .			15,980,350			
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .			3,316,640,682	1,274,523,168	76,829,457	1,639,857,930

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	58,554,466	58,554,466		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	377,916,413	377,916,413		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	1,434,103	1,434,103		
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	17,729,425	3,300,891	11,661,637	2,766,897
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	100,466	100,466		
<b>7</b> Other salaries and wages . . . . .	613,373,380	538,774,116	59,994,249	14,605,015
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	31,056,746	27,279,585	3,037,670	739,491
<b>9</b> Other employee benefits . . . . .	64,803,072	52,060,886	10,253,421	2,488,765
<b>10</b> Payroll taxes . . . . .	38,348,580	33,684,576	3,750,887	913,117
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management . . . . .	2,024,566	191,094	1,833,472	
<b>b</b> Legal . . . . .	11,975,312		11,975,312	
<b>c</b> Accounting . . . . .	859,251		859,251	
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17 . . . . .	328,102			328,102
<b>f</b> Investment management fees . . . . .	254,591,083		254,591,083	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . . . .	89,513,840	74,103,361	13,491,849	1,918,630
<b>12</b> Advertising and promotion . . . . .	4,895,315	3,632,684	726,194	536,437
<b>13</b> Office expenses . . . . .	79,329,873	68,815,491	8,179,069	2,335,313
<b>14</b> Information technology . . . . .	29,002,597	24,760,653	3,251,621	990,323
<b>15</b> Royalties . . . . .	61,025,596	61,025,596		
<b>16</b> Occupancy . . . . .	95,053,920	77,473,500	15,299,615	2,280,805
<b>17</b> Travel . . . . .	19,651,647	17,702,565	1,039,452	909,630
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .	4,026,543	3,571,543	436,162	18,838
<b>20</b> Interest . . . . .	17,568,915	15,070,123	2,498,792	
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	95,539,448	70,289,500	23,711,178	1,538,770
<b>23</b> Insurance . . . . .	12,358,482	7,542,122	4,815,623	737
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) . . . . .				
<b>a</b> OTHER- PROGRAM . . . . .	9,418,576	9,404,532	14,044	
<b>b</b> OTHER- LIBRARY . . . . .	16,951,115	16,951,115		
<b>c</b> OTHER- SUBSCRIPTIONS . . . . .	1,525,372	1,144,884	372,877	7,611
<b>d</b> . . . . .				
<b>e</b> All other expenses . . . . .	20,934,088	8,273,555	11,039,652	1,620,881
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e . . . . .	2,029,890,292	1,553,057,820	442,833,110	33,999,362
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	54,465,387	<b>1</b>	102,989,529
	<b>2</b> Savings and temporary cash investments . . . . .	1,063,824,980	<b>2</b>	1,073,362,225
	<b>3</b> Pledges and grants receivable, net . . . . .	141,171,008	<b>3</b>	142,785,838
	<b>4</b> Accounts receivable, net . . . . .	59,396,205	<b>4</b>	76,518,779
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	0	<b>5</b>	495,931
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	513,325	<b>7</b>	904,407
	<b>8</b> Inventories for sale or use . . . . .	198,529	<b>8</b>	273,817
	<b>9</b> Prepaid expenses and deferred charges . . . . .	16,313,741	<b>9</b>	14,299,044
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 2,939,084,715		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 1,322,544,584		
	<b>11</b> Investments—publicly traded securities . . . . .	1,454,553,385	<b>10c</b>	1,616,540,131
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	6,216,468,806	<b>11</b>	4,964,936,648
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	4,766,361,347	<b>12</b>	5,463,678,430
	<b>14</b> Intangible assets . . . . .	19,406,552	<b>13</b>	17,578,281
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	61,487,602	<b>15</b>	57,414,450	
<b>17</b> Accounts payable and accrued expenses . . . . .	13,854,160,867	<b>16</b>	13,531,777,510	
<b>18</b> Grants payable . . . . .	224,322,103	<b>17</b>	289,979,198	
<b>19</b> Deferred revenue . . . . .		<b>18</b>		
<b>20</b> Tax-exempt bond liabilities . . . . .	1,922,500,328	<b>19</b>	1,887,200,104	
<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>20</b>		
<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .	0	<b>21</b>	0	
<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	627,102,185	<b>22</b>	668,792,354	
<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>23</b>		
<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D . . . . .	626,486,981	<b>24</b>		
<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	626,486,981	<b>25</b>	727,314,896	
<b>27</b> Net assets without donor restrictions . . . . .	3,400,411,597	<b>26</b>	3,573,286,552	
<b>28</b> Net assets with donor restrictions . . . . .				
<b>29</b> Capital stock or trust principal, or current funds . . . . .				
<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .				
<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .				
<b>32</b> Total net assets or fund balances . . . . .				
<b>33</b> Total liabilities and net assets/fund balances . . . . .				

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	3,316,640,682
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,029,890,292
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,286,750,390
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	10,453,749,270
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	(1,770,511,038)
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	(11,497,664)
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	9,958,490,958

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		✓
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	✓	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	✓	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	✓	
<b>b</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 on Schedule O and describe any steps taken to undergo such audits.	✓	

Form **990** (2021)



**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 for related organizations below dotted line)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(25) ANDREW HOINE ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(26) BRUCE R. EVANS ----- CHAIRMAN	1.0 ----- 0.0	✓						0	0	0
(27) CINDY KENT ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(28) CONNER SEARCY ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(29) COREY E. THOMAS ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(30) DAMONTA MORGAN ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(31) DANIEL LOVINGER ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(32) DAVID W. PATTERSON ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(33) GEORGE HUBER ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(34) GREG S. ALLEN ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(35) IKE LAWRENCE EPSTEIN ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(36) JAY C. HOAG ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(37) JEFFREY J. ROTHSCHILD ----- VICE-CHAIRMAN	1.0 ----- 0.0	✓						0	0	0
(38) JENNIFER FRIST ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(39) JOHN R. INGRAM ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(40) JON WINKELRIED ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(41) JUSTIN ISHBIA ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(42) KATHLEEN E. JUSTICE-MOORE ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(43) KENYA WRIGHT ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(44) KITO K. HUGGINS ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (Check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(45) LEE BASS ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(46) MAKEBA BOATWRIGHT ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(47) MARK P. MAYS ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(48) MARK WILF ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(49) NORA W. TYSON ----- VICE-CHARIMAN	1.0 ----- 0.0	✓						0	0	0
(50) ROBERT C. SCHIFF, JR. ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(51) ROBERT LEVY ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(52) SEAN CONNOLLY ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(53) SHIRLEY M. COLLADO ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(54) STEVEN H. MADDEN, SR. ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(55) SUZANNE PEROT MCGEE ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0
(56) W. DOUGLAS PARKER ----- TRUSTEE	1.0 ----- 0.0	✓						0	0	0

**SCHEDULE A  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

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

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>					0	0

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

Cat. No. 11285F

Schedule A (Form 990) 2021

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	316,042,655	360,736,447	294,665,646	306,947,408	325,430,127	1,603,822,283
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
<b>4 Total.</b> Add lines 1 through 3 . . . . .	316,042,655	360,736,447	294,665,646	306,947,408	325,430,127	1,603,822,283
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						0
<b>6 Public support.</b> Subtract line 5 from line 4 . . . . .						1,603,822,283

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 . . . . .	316,042,655	360,736,447	294,665,646	306,947,408	325,430,127	1,603,822,283
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .	51,331,677	76,947,114	55,143,251	218,193,851	325,827,290	727,443,183
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	0	0	0	0	0	0
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .	99,457	86,147	64,889	0	73,203	323,696
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						2,331,589,162
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	5,800,546,994
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	68.79 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 . . . . .	<b>15</b>	78.08 %
<b>16a 33<sup>1</sup>/<sub>3</sub>% support test—2021.</b> If the organization did not check the box on line 13, and line 14 is 33 <sup>1</sup> / <sub>3</sub> % or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .		<input checked="" type="checkbox"/>
<b>b 33<sup>1</sup>/<sub>3</sub>% support test—2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 <sup>1</sup> / <sub>3</sub> % or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2021.</b> 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 <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2020.</b> 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 <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</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 . . . .						
<b>c</b> Add lines 7a and 7b . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .						
<b>c</b> Add lines 10a and 10b . . . .						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .						
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . <input type="checkbox"/>						

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

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 . . . .	<b>16</b>	%

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

<b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f), divided by line 13, column (f)) . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 . . . .	<b>18</b>	%
<b>19a 33 1/3% support tests—2021.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . <input type="checkbox"/>		
<b>b 33 1/3% support tests—2020.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . <input type="checkbox"/>		



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described on line 2, above, 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> 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 <b>Part VI</b> 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.			
<b>2a</b>			
<b>b</b> Did the activities described on line 2a, above, 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> 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? If "Yes" or "No," provide details in <b>Part VI</b> .			
<b>3a</b>			
<b>b</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 <b>Part VI</b> the role played by the organization in this regard.			
<b>3b</b>			

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

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

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2021

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

Section D—Distributions		Current Year	
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b>	Qualified set-aside amounts (prior IRS approval required—provide details in <b>Part VI</b> )	<b>5</b>	
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	<b>6</b>	
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	<b>8</b>	
<b>9</b>	Distributable amount for 2021 from Section C, line 6	<b>9</b>	
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>	

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016 . . . . .			
<b>b</b> From 2017 . . . . .			
<b>c</b> From 2018 . . . . .			
<b>d</b> From 2019 . . . . .			
<b>e</b> From 2020 . . . . .			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017 . . .			
<b>b</b> Excess from 2018 . . .			
<b>c</b> Excess from 2019 . . .			
<b>d</b> Excess from 2020 . . .			
<b>e</b> Excess from 2021 . . .			

Schedule A (Form 990) 2021

## Part VI

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.)

Return Reference - Identifier	Explanation						
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	Description	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	(1) GROSS FUNDRAISING REVENUE AND MISC. OPERATING INCOME	99,457	86,147	64,889	0	73,203	323,696
	Total	99,457	86,147	64,889	0	73,203	323,696



**SCHEDULE C**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Political Campaign and Lobbying Activities****For Organizations Exempt From Income Tax Under section 501(c) and section 527**

- **Complete if the organization is described below.** ► **Attach to Form 990 or Form 990-EZ.**  
 ► **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021****Open to Public Inspection****If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

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

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

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

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

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

Name of organization <b>VANDERBILT UNIVERSITY</b>	Employer identification number <b>62-0476822</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

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

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

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

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

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

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

Cat. No. 50084S

Schedule C (Form 990) 2021

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	560,756													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .	560,756													
<b>d</b>	Other exempt purpose expenditures . . . . .	1,976,840,216													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	1,977,400,972													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	250,000													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .	0													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .	0													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No													

**4-Year Averaging Period Under Section 501(h)**

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
<b>c</b> Total lobbying expenditures	573,472	592,748	489,320	560,756	2,216,296
<b>d</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
<b>f</b> Grassroots lobbying expenditures	0	0	0		0

Schedule C (Form 990) 2021

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

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

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

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

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

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

<b>1</b>	Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year	<b>2a</b>	
<b>b</b>	Carryover from last year	<b>2b</b>	
<b>c</b>	Total	<b>2c</b>	
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b>	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?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures. See instructions	<b>5</b>	

**Part IV** Supplemental Information

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

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**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service**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.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate value of contributions to (during year) . . . . .		
3 Aggregate value of grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.**

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . .	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(i) Revenue included on Form 990, Part VIII, line 1 . . . . .	► \$
(ii) Assets included in Form 990, Part X . . . . .	► \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1 . . . . .	► \$
b Assets included in Form 990, Part X . . . . .	► \$

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

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

**a** ☒ Public exhibition

**b** ☒ Scholarly research

**c** ☒ Preservation for future generations

**d** ☒ Loan or exchange program

**e** ☒ Other EDUCATION

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

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

**Part IV Escrow and Custodial Arrangements.**

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

	Amount
<b>c</b> Beginning balance	<b>1c</b>
<b>d</b> Additions during the year	<b>1d</b>
<b>e</b> Distributions during the year	<b>1e</b>
<b>f</b> Ending balance	<b>1f</b>

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

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

**Part V Endowment Funds.**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	10,928,512,328	6,917,370,798	6,270,876,230	4,608,461,291	4,136,465,261
<b>b</b> Contributions	122,443,535	423,800,008	978,780,332	1,549,707,251	172,664,350
<b>c</b> Net investment earnings, gains, and losses	(470,441,456)	3,934,880,718	(21,305,654)	394,155,692	519,217,263
<b>d</b> Grants or scholarships	127,116,659	117,488,246	119,632,223	118,763,645	115,304,268
<b>e</b> Other expenditures for facilities and programs	247,330,495	230,050,950	191,347,887	162,684,359	91,535,316
<b>f</b> Administrative expenses		0	0	0	13,045,999
<b>g</b> End of year balance	10,206,067,253	10,928,512,328	6,917,370,798	6,270,876,230	4,608,461,291

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

**a** Board designated or quasi-endowment ☐ 59.85 %

**b** Permanent endowment ☐ 15.24 %

**c** Term endowment ☐ 24.91 %

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

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

(i) Unrelated organizations

(ii) Related organizations

	Yes	No
<b>3a(i)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>3a(ii)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>3b</b>	<input type="checkbox"/>	<input type="checkbox"/>

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

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		224,320,240		224,320,240
<b>b</b> Buildings		2,022,659,188	1,016,118,634	1,006,540,554
<b>c</b> Leasehold improvements		14,444,589	8,621,695	5,822,894
<b>d</b> Equipment		394,714,434	280,660,826	114,053,608
<b>e</b> Other		282,946,264	17,143,429	265,802,835
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,616,540,131



**Part VII Investments—Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely held equity interests . . . . .		
(3) Other		
(A) LIMITED PARTNERSHIPS	4,719,690,870	END OF YEAR MARKET VALUE
(B) INTERESTS IN TRUSTS HELD BY OTHERS	31,063,511	END OF YEAR MARKET VALUE
(C) OTHER INVESTMENTS & SECURITIES	695,863,880	END OF YEAR MARKET VALUE
(D) MINORITY INTEREST	17,060,169	END OF YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) . . . . .	5,463,678,430	

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACTUARIAL LIABILITY FOR ANNUITIES PAYABLE	29,561,886
(3) ACTUARIAL LIABILITY FOR SELF INSURANCE	6,745,911
(4) GOVERNMENT ADVANCES FOR STUDENT LOANS	16,769,783
(5) FAIR VALUE OF SECURITIES SOLD SHORT	614,316,000
(6) LEASE LIABILITIES	59,921,316
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) . . . . .	727,314,896

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

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

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

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

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

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

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

**Part XIII Supplemental Information.**

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

[SEE STATEMENT](#)

## Part XIII

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

Return Reference - Identifier	Explanation
SCHEDULE D, PART III, LINE 1A - COLLECTIONS OF ART - FINANCIAL STATEMENT FOOTNOTE	PURCHASES FOR THE FINE ART AND LIBRARY COLLECTIONS ARE NOT INCLUDED IN THE AMOUNTS ABOVE AS VANDERBILT EXPENSES SUCH ITEMS AT THE TIME OF PURCHASE. AS OF JUNE 30, 2022, THE ESTIMATED REPLACEMENT COST, INCLUDING PROCESSING COSTS TO PROPERLY IDENTIFY, CATALOG, AND SHELVES MATERIALS, FOR LIBRARY COLLECTIONS TOTALED \$464.0 MILLION AND FOR FINE ART COLLECTIONS TOTALED \$43.7 MILLION. ANY PROCEEDS FROM DEACCESSIONED COLLECTION ITEMS ARE USED FOR THE DIRECT CARE OF EXISTING COLLECTIONS. DIRECT CARE IS AN INVESTMENT THAT ENHANCES THE LIFE, USEFULNESS, OR QUALITY OF THE COLLECTION.
SCHEDULE D, PART III, LINE 4 - COLLECTIONS OF ART - DESCRIPTION OF COLLECTIONS	VANDERBILT MAINTAINS VARIOUS COLLECTIONS OF ART, HISTORICAL TREASURES AND OTHER SIMILAR ASSETS IN DEPARTMENTS ACROSS THE UNIVERSITY. SUCH COLLECTIONS INCLUDE, BUT ARE NOT LIMITED TO, HISTORICAL DRAWINGS; HISTORICAL SCIENTIFIC INSTRUMENTS; HISTORICAL FURNITURE; PAINTINGS; PHOTOGRAPHY; BOOK COLLECTIONS; AND OTHER SIMILAR ITEMS AND ARTIFACTS. ALL SUCH COLLECTIONS FURTHER VANDERBILT'S EXEMPT PURPOSE BY PROVIDING HISTORICAL MATERIALS FOR STUDENTS AND RESEARCHERS, AND BY PROVIDING CULTURAL, HISTORICAL AND EDUCATIONAL OPPORTUNITIES TO VANDERBILT STUDENTS AND THE COMMUNITY AT LARGE THROUGH EXHIBITS, DISPLAYS, AND LOAN OR EXCHANGE PROGRAMS.
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	VANDERBILT'S ENDOWMENT FUNDS, AS RELATED TO PART V, ARE INTENDED TO BE USED FOR SCHOLARSHIPS, FELLOWSHIPS, ENDOWED ACADEMIC CHAIR SUPPORT, AND CAPITAL AND OPERATIONAL SUPPORT.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	<p>VANDERBILT IS A TAX-EXEMPT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("THE CODE"), AND GENERALLY IS EXEMPT FROM FEDERAL INCOME TAXES ON RELATED INCOME PURSUANT TO SECTION 501(A) OF THE CODE. VANDERBILT IS, HOWEVER, SUBJECT TO FEDERAL AND STATE INCOME TAX ON UNRELATED BUSINESS INCOME, AND PROVISION FOR SUCH TAXES IS INCLUDED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. VANDERBILT REGULARLY EVALUATES ITS TAX POSITION AND DOES NOT BELIEVE IT HAS ANY MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE DISCLOSURE OR ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS.</p> <p>THE TAX CUTS AND JOBS ACT ("TCJA") IMPACTS VANDERBILT IN SEVERAL WAYS, INCLUDING IMPOSING EXCISE TAXES ON CERTAIN EXCESS COMPENSATION AND NET INVESTMENT INCOME, AND ESTABLISHING NEW RULES FOR CALCULATING UNRELATED BUSINESS TAXABLE INCOME. VANDERBILT HAS REFLECTED THE TAX ASSETS, LIABILITIES, AND PAYABLES IN THE CONSOLIDATED FINANCIAL STATEMENTS BASED ON REASONABLE ESTIMATES.</p>

**SCHEDULE E  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Schools**▶ **Complete if the organization answered "Yes" on Form 990,  
Part IV, line 13, or Form 990-EZ, Part VI, line 48.**▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

**Part I**

	YES	NO
<b>1</b> 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? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>2</b> 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3</b> Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or 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 . . . . . <u>VANDERBILT MEETS THE CRITERIA ESTABLISHED BY SECTION 4.0 OF IRS REVENUE PROCEDURE 75-50.</u> <u>VANDERBILT DRAWS A SUBSTANTIAL PERCENTAGE OF ITS STUDENTS FROM AROUND THE NATION AND THE</u> <u>WORLD, ENROLLING STUDENTS OF RACIAL MINORITY GROUPS IN MEANINGFUL NUMBERS, AND FOLLOWS A</u> <u>RACIALLY NONDISCRIMINATORY POLICY AS TO STUDENTS. VANDERBILT SATISFIES THE PUBLICITY</u> <u>(CONTINUED ON SUPPLEMENTAL SECTION)</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4</b> Does the organization maintain the following?		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? . . . . . If you answered "No" to any of the above, please explain. If you need more space, use Part II. _____ _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>5</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>b</b> Admissions policies? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>c</b> Employment of faculty or administrative staff? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>d</b> Scholarships or other financial assistance? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>e</b> Educational policies? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>f</b> Use of facilities? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>g</b> Athletic programs? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>h</b> Other extracurricular activities? . . . . . If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. _____ _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>6a</b> Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" on either line 6a or line 6b, explain on Part II.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>7</b> 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 . . . . .	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(SEE STATEMENT)

Area for supplemental information with horizontal dashed lines.

## Part II

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

Return Reference - Identifier	Explanation
SCHEDULE E, PART I, LINE 3 - RACIALLY NONDISCRIMINATORY POLICY	<p>(CONTINUED FROM SCHEDULE E, PART I, LINE 3)</p> <p>REQUIREMENT BY INCLUDING A STATEMENT OF THE UNIVERSITY'S RACIALLY NONDISCRIMINATORY POLICY AS TO STUDENTS IN ALL ITS BROCHURES AND CATALOGS DEALING WITH STUDENT ADMISSIONS, PROGRAMS, AND SCHOLARSHIPS. VANDERBILT ALSO INCLUDES A REFERENCE TO ITS RACIALLY NONDISCRIMINATORY POLICY ON ITS WEBSITE AND IN OTHER WRITTEN ADVERTISING THAT THE UNIVERSITY USES AS A MEANS OF INFORMING PROSPECTIVE STUDENTS OF ITS PROGRAMS.</p> <p>VANDERBILT'S RACIALLY NONDISCRIMINATORY POLICY IS AS FOLLOWS:</p> <p>IN COMPLIANCE WITH FEDERAL LAW, INCLUDING THE PROVISIONS OF TITLE VI AND TITLE VII OF THE CIVIL RIGHTS ACT OF 1964, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, SECTIONS 503 AND 504 OF THE REHABILITATION ACT OF 1973, THE AMERICANS WITH DISABILITIES ACT (ADA) OF 1990, THE ADA AMENDMENTS ACT OF 2008, EXECUTIVE ORDER 11246, AND THE VIETNAM ERA VETERANS READJUSTMENT ASSISTANCE ACT OF 1974 AS AMENDED BY THE JOBS FOR VETERANS ACT, AND THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT, AS AMENDED, AND THE GENETIC INFORMATION NONDISCRIMINATION ACT OF 2008, VANDERBILT UNIVERSITY DOES NOT DISCRIMINATE AGAINST INDIVIDUALS ON THE BASIS OF THEIR RACE, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, RELIGION, COLOR, NATIONAL OR ETHNIC ORIGIN, AGE, DISABILITY, MILITARY SERVICE, COVERED VETERANS STATUS, OR GENETIC INFORMATION IN ITS ADMINISTRATION OF EDUCATIONAL POLICIES, PROGRAMS, OR ACTIVITIES, ADMISSIONS POLICIES, SCHOLARSHIP AND LOAN PROGRAMS, ATHLETIC OR OTHER UNIVERSITY-ADMINISTERED PROGRAMS, OR EMPLOYMENT. IN ADDITION, THE UNIVERSITY DOES NOT DISCRIMINATE AGAINST INDIVIDUALS ON THE BASIS OF THEIR GENDER EXPRESSION CONSISTENT WITH THE UNIVERSITY'S NONDISCRIMINATION POLICY.</p>
SCHEDULE E, PART I, LINE 6(A) - FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENTAL AGENCY	<p>VANDERBILT PARTICIPATES IN THE FOLLOWING PROGRAMS: FEDERAL PELL GRANTS, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS (FSEOG), FEDERAL DIRECT STAFFORD SUBSIDIZED/UNSUBSIDIZED LOANS, FEDERAL DIRECT GRADUATE PLUS LOANS, FEDERAL DIRECT PARENT LOAN FOR UNDERGRADUATE STUDENTS (PLUS LOANS), FEDERAL NURSING LOAN, FEDERAL WORK STUDY PROGRAM, TENNESSEE STUDENT ASSISTANCE AWARDS, AND THE TENNESSEE EDUCATION LOTTERY SCHOLARSHIP PROGRAM. VANDERBILT ALSO RECEIVES VARIOUS FEDERAL AND STATE GRANTS AND CONTRACTS FOR ACADEMIC AND SCIENTIFIC RESEARCH.</p>



**SCHEDULE F  
(Form 990)****Statement of Activities Outside the United States**

OMB No. 1545-0047

**2021****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**▶ **Attach to Form 990.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ **Yes** ☐ **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0	1	GRANTMAKING		14,049
(2) EAST ASIA AND THE PACIFIC	0	5	GRANTMAKING		345,425
(3) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	6	GRANTMAKING		616,104
(4) NORTH AMERICA (CANADA & MEXICO ONLY)	0	2	GRANTMAKING		201,203
(5) SUB-SAHARAN AFRICA	0	2	GRANTMAKING		184,465
(6) EAST ASIA AND THE PACIFIC	0	1	FUNDRAISING		2,447
(7) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	21	FUNDRAISING		67,444
(8) NORTH AMERICA (CANADA & MEXICO ONLY)	0	7	FUNDRAISING		6,361
(9) EAST ASIA AND THE PACIFIC	0	61	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	97,397
(10) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	491	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	1,624,215
(11) MIDDLE EAST AND NORTH AFRICA	0	20	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	33,801
(12) NORTH AMERICA (CANADA & MEXICO ONLY)	0	159	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	337,629
(13) RUSSIA AND NEIGHBORING STATES	0	2	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	3,014
(14) SOUTH AMERICA	0	39	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	285,656
(15) SOUTH ASIA	0	6	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	18,379
(16) SOUTH AMERICA	0	2	GRANTMAKING		72,857
(17) (SEE STATEMENT)					
<b>3a Subtotal . . . . .</b>	<b>0</b>	<b>825</b>			<b>3,910,446</b>
<b>b Total from continuation sheets to Part I . . . . .</b>	<b>0</b>	<b>66</b>			<b>966,960,699</b>
<b>c Totals (add lines 3a and 3b)</b>	<b>0</b>	<b>891</b>			<b>970,871,145</b>

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

Cat. No. 50082W

Schedule F (Form 990) 2021

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

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
(1)			CENTRAL AMERICA AND THE CARIBBEAN	RESEARCH	14,049	CHECK		NOT APPLICABLE	NOT APPLICABLE
(2)			SOUTH AMERICA	RESEARCH	16,660	CHECK		NOT APPLICABLE	NOT APPLICABLE
(3)			EAST ASIA AND THE PACIFIC	RESEARCH	43,285	CHECK		NOT APPLICABLE	NOT APPLICABLE
(4)			EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	319,353	CHECK		NOT APPLICABLE	NOT APPLICABLE
(5)			SOUTH AMERICA	RESEARCH	56,198	CHECK		NOT APPLICABLE	NOT APPLICABLE
(6)			EAST ASIA AND THE PACIFIC	RESEARCH	116,551	CHECK		NOT APPLICABLE	NOT APPLICABLE
(7)			SUB-SAHARAN AFRICA	RESEARCH	31,097	CHECK		NOT APPLICABLE	NOT APPLICABLE
(8)			EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	86,412	CHECK		NOT APPLICABLE	NOT APPLICABLE
(9)			EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	24,750	CHECK		NOT APPLICABLE	NOT APPLICABLE
(10)			EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	14,036	CHECK		NOT APPLICABLE	NOT APPLICABLE
(11)			NORTH AMERICA (CANADA & MEXICO ONLY)	RESEARCH	178,312	CHECK		NOT APPLICABLE	NOT APPLICABLE
(12)			NORTH AMERICA (CANADA & MEXICO ONLY)	RESEARCH	22,891	CHECK		NOT APPLICABLE	NOT APPLICABLE
(13)			EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	78,542	CHECK		NOT APPLICABLE	NOT APPLICABLE
(14)			EAST ASIA AND THE PACIFIC	RESEARCH	27,455	CHECK		NOT APPLICABLE	NOT APPLICABLE
(15)			SUB-SAHARAN AFRICA	RESEARCH	153,368	CHECK		NOT APPLICABLE	NOT APPLICABLE
(16)			(SEE STATEMENT)						

**2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . **18**

**3** Enter total number of other organizations or entities . . . **0**

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

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

Schedule F (Form 990) 2021

**Part I**      **Activities per Region** (continued)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(17) CENTRAL AMERICA AND THE CARIBBEAN	0	13	FUNDRAISING		23,989
(18) CENTRAL AMERICA AND THE CARIBBEAN	0	37	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	313,583
(19) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		748,971,447
(20) SUB-SAHARAN AFRICA	0	0	INVESTMENTS		53,195,986
(21) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	3	INVESTMENTS		160,078,512
(22) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	INVESTMENTS		4,326,383
(23) SOUTH AMERICA	0	4	FUNDRAISING		11,039
(24) SUB-SAHARAN AFRICA	0	9	PROGRAM SERVICES	EDUCATIONAL PROGRAMS, RESEARCH, CONFERENCES, TRAVEL	39,760

**Part II****Grants and Other Assistance to Organizations or Entities Outside the United States** (continued)

(a) Name of Organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(16)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	93,010	CHECK		NOT APPLICABLE	NOT APPLICABLE
(17)		EAST ASIA AND THE PACIFIC	RESEARCH	111,500	CHECK		NOT APPLICABLE	NOT APPLICABLE
(18)		EUROPE (INCLUDING ICELAND AND GREENLAND)	RESEARCH	46,634	CHECK		NOT APPLICABLE	NOT APPLICABLE



## Part V

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

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	VANDERBILT UNIVERSITY MAINTAINS A FORMAL POLICY DEFINING ITS PROCEDURES FOR MONITORING THE USE OF SPONSORED FUNDS BY SUBRECIPIENTS LOCATED OUTSIDE THE UNITED STATES WHO ARE PERFORMING A PORTION OF A SPONSORED PROJECT EXTERNALLY AWARDED TO VANDERBILT. THE POLICY PROVIDES GUIDANCE TO ENSURE THAT SUBRECIPIENTS CONDUCT THEIR PORTIONS OF THE SPONSORED PROJECTS IN COMPLIANCE WITH LAWS, REGULATIONS AND TERMS AND CONDITIONS OF AWARDS AND SUBAWARDS AND THAT REIMBURSED COSTS INCURRED BY SUBRECIPIENTS ARE ALLOWED. THE POLICY ADDRESSES THE ROLES AND RESPONSIBILITIES OF THE CENTRAL OFFICES AND ACADEMIC DEPARTMENTS OF THE UNIVERSITY AND DESCRIBES THE MONITORING PROCEDURES FOR EACH AREA. THE FULL TEXT OF VANDERBILT'S SUBRECIPIENT MONITORING GUIDELINES IS AVAILABLE ONLINE AT THE FOLLOWING WEB ADDRESS:  <a href="https://finance.vanderbilt.edu/procedures-forms/subrecipient_monitoring_guidelines.pdf">HTTPS://FINANCE.VANDERBILT.EDU/PROCEDURES-FORMS/SUBRECIPIENT_MONITORING_GUIDELINES.PDF</a>
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -ACCRUAL SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL SOUTH AMERICA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL

**SCHEDULE G  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- |   |  |
|---|--|
| <b>a</b> <input checked="" type="checkbox"/> Mail solicitations               | <b>e</b> <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input checked="" type="checkbox"/> Internet and email solicitations | <b>f</b> <input checked="" type="checkbox"/> Solicitation of government grants     |
| <b>c</b> <input checked="" type="checkbox"/> Phone solicitations              | <b>g</b> <input checked="" type="checkbox"/> Special fundraising events            |
| <b>d</b> <input checked="" type="checkbox"/> In-person solicitations          |  |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b> BENTZ WHALEY FLESSNER AND ASSOCIATES, INC., 7900 XERXES AVENUE SOUTH, SUITE 980, MINNEAPOLIS, MN 55431	CONSULTING		✓		23,231	
<b>2</b> GRENZEBAH, GLIER AND ASSOCIATES, 2100 S. MICHIGAN AVENUE, SUITE 2100, CHICAGO, IL 60604	CONSULTING		✓		215,695	
<b>3</b> PENTERA LLC, 8650 COMMERCE PLACE, BUILDING A SUITE G, INDIANAPOLIS, IN 46268	CONSULTING		✓		59,358	
<b>4</b> WASHBURN & MCGOLDRICK, LLC, 24 N. BRYN MAWR AVE. #252, BRYN MAWR, PA 19010	CONSULTING		✓		29,818	
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>Total</b> . . . . . ▶				0	328,102	0

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

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

		(a) Event #1 <u>BASEBALL BANQUET</u> (event type)	(b) Event #2 <u>VANDY GOLF DAY</u> (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .	31,775	99,633		131,408
	<b>2</b> Less: Contributions . . . . .	0	58,205		58,205
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	31,775	41,428	0	73,203
Direct Expenses	<b>4</b> Cash prizes . . . . .	0	0		0
	<b>5</b> Noncash prizes . . . . .	0	476		476
	<b>6</b> Rent/facility costs . . . . .	0	0		0
	<b>7</b> Food and beverages . . . . .	37,802	3,221		41,023
	<b>8</b> Entertainment . . . . .	0	41,377		41,377
	<b>9</b> Other direct expenses . . . . .	3,956	158		4,114
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				86,990
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				(13,787)

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

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

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

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

**b** If "No," explain: \_\_\_\_\_

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

**b** If "Yes," explain: \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ ..... and the amount of gaming revenue retained by the third party ▶ \$ .....
- c** If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

**16** Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

☐ Director/officer

☐ Employee

☐ Independent contractor

**17** Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ .....

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

[SEE NEXT PAGE](#)

## Part IV

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

Return Reference - Identifier	Explanation
SCHEDULE G, PART I, LINE 2B(V) - PAYMENT OF FEES OR PAYMENT OF EXPENSES	THE TOTAL AMOUNT PAID TO PENTERA LLC FOR FISCAL YEAR 2022 WAS \$59,357.70 WHICH INCLUDES PROFESSIONAL FUNDRAISING FEES OF \$48,208 AND FUNDRAISING EXPENSES OF \$11,149.70. THE CONTRACT BETWEEN VANDERBILT UNIVERSITY AND PENTERA LLC CALLS FOR THE REIMBURSEMENT OF FUNDRAISING EXPENSES INCURRED BY PENTERA LLC, SUCH AS PRINTING, POSTAGE, AND ADVERTISING AND PROMOTIONAL EXPENSES, WHICH ARE INVOICED SEPARATELY FROM PROFESSIONAL SERVICE FEES.

**SCHEDULE I  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) (SEE STATEMENT)	95-2102389	501(C)(3)	27,028	0	N/A	N/A	RESEARCH
(2) ALPHACORE INC 304 S ROCKFORD DR, TEMPE, AZ 85281	46-0900048	N/A	93,740	0	N/A	N/A	RESEARCH
(3) (SEE STATEMENT)	52-2213870	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(4) ARIZONA STATE UNIVERSITY 1100 S MCALLISTER AVENUE, TEMPE, AZ 85287	86-0196696	GOVT	60,171	0	N/A	N/A	RESEARCH
(5) (SEE STATEMENT)	58-1418202	501(C)(3)	633,883	0	N/A	N/A	RESEARCH
(6) AUSTIN PEAY STATE UNIVERSITY 601 COLLEGE ST, CLARKSVILLE, TN 37044	62-0961836	501(C)(3)	77,096	0	N/A	N/A	RESEARCH
(7) (SEE STATEMENT)	74-1613878	501(C)(3)	145,935	0	N/A	N/A	RESEARCH
(8) (SEE STATEMENT)	61-0444650	501(C)(3)	128,334	0	N/A	N/A	RESEARCH
(9) (SEE STATEMENT)	36-6212451	501(C)(3)	8,000	0	N/A	N/A	CONTRIBUTION
(10) (SEE STATEMENT)	04-2103547	501(C)(3)	7,112	0	N/A	N/A	RESEARCH
(11) BROWN UNIVERSITY BOX 1997, PROVIDENCE, RI 02912	05-0258809	501(C)(3)	56,612	0	N/A	N/A	RESEARCH
(12) (SEE STATEMENT)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 1433 Enter total number of other organizations listed in the line 1 table ▶ 11

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

Cat. No. 50055P

Schedule I (Form 990) 2021



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
<b>1</b> (SEE STATEMENT)	10,434	377,880,991	0	N/A	N/A
<b>2</b> (SEE STATEMENT)	75	35,422	0	N/A	N/A
<b>3</b>					
<b>4</b>					
<b>5</b>					
<b>6</b>					
<b>7</b>					

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

(SEE STATEMENT)

**Part II Grants and Other Assistance to Governments and Organizations in the United States (continued)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(12) CARNEGIE MELLON UNIVERSITY 500 FORBES AVE, PITTSBURGH, PA 15213	25-0969449	501(C)(3)	31,639	0	N/A	N/A	RESEARCH
(13) CASE WESTERN RESERVE UNIVERSITY 10900 EUCLID AVE, CLEVELAND, OH 44106	34-1018992	501(C)(3)	9,234	0	N/A	N/A	RESEARCH
(14) CENTENNIAL PARK CONSERVANCY PO BOX 196340, NASHVILLE, TN 37219	58-1609026	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(15) CENTER FOR NONPROFIT MANAGEMENT 37 PEABODY STREET, SUITE 201, NASHVILLE, TN 37210	58-2000064	501(C)(3)	30,000	0	N/A	N/A	CONTRIBUTION
(16) CHATTANOOGA AREA REGIONAL TRANSPORTATION AUTHORITY (CARTA) 1617 WILCOX BLVD, CHATTANOOGA, TN 37406	62-6103220	N/A	25,082	0	N/A	N/A	RESEARCH; TRAINING
(17) CHRISTIAN BROTHERS UNIVERSITY 650 EAST PARKWAY SOUTH, MEMPHIS, TN 38104	62-0476666	501(C)(3)	39,289	0	N/A	N/A	TRAINING
(18) CLEMSON UNIVERSITY 105 SIKES HALL, CLEMSON, SC 29634	57-6000254	501(C)(3)	13,717	0	N/A	N/A	RESEARCH
(19) COLUMBIA UNIVERSITY 1130 AMSTERDAM AVE, NEW YORK, NY 10027	13-5598093	501(C)(3)	22,773	0	N/A	N/A	RESEARCH
(20) COMMUNITY INITIATIVES 1000 BROADWAY, SUITE #480, OAKLAND, CA 94607	94-3255070	501(C)(3)	6,000	0	N/A	N/A	CONTRIBUTION
(21) COMPASS EVALUATION AND RESEARCH INC 5720 FAYETTEVILLE RD, 202, DURHAM, NC 27713	27-0845506	N/A	61,973	0	N/A	N/A	RESEARCH
(22) CORNELL UNIVERSITY ATTN: JUDY BYERS, 110 SAGE HALL, ITHACA, NY 14853	15-0532082	501(C)(3)	258,128	0	N/A	N/A	RESEARCH
(23) COSECHA COMMUNITY DEVELOPMENT 2621 NOLENSVILLE PIKE, NASHVILLE, TN 37211	84-3620342	501(C)(3)	10,500	0	N/A	N/A	CONTRIBUTION
(24) CREATIVE GIRLS ROCK P.O. BOX 330812, NASHVILLE, TN 37203	84-2460498	501(C)(3)	7,500	0	N/A	N/A	CONTRIBUTION
(25) CUMBERLAND CENTER, INC. 1900 BELMONT BLVD. BOX 5035, NASHVILLE, TN 37212	20-8691236	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(26) DANA FARBER CANCER INSTITUTE INC ATTN GENERAL ACCOUNTING, MAIL STOP BP425, BOSTON, MA 02215	04-2263040	501(C)(3)	696,450	0	N/A	N/A	RESEARCH
(27) DONALD DANFORTH PLANT SCIENCE CENTER 975 N WARSON RD, ST LOUIS, MO 63132	31-1584621	501(C)(3)	196,683	0	N/A	N/A	RESEARCH

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(28) DUKE UNIVERSITY OFFICE OF RESEARCH SUPPORT, BOX 90077, DURHAM, NC 27708	56-0532129	501(C)(3)	42,694	0	N/A	N/A	RESEARCH
(29) DYNAMIC OBJECT LANGUAGE LABS INC 2 PARSONAGE HILL ROAD, HAVERHILL, MA 01832	04-3193589	N/A	150,420	0	N/A	N/A	RESEARCH
(30) EAST TENNESSEE STATE UNIVERSITY BOX 70565, JOHNSON CITY, TN 37614	62-6021046	501(C)(3)	7,247	0	N/A	N/A	TRAINING; OTHER SPONSORED
(31) EMBRACED WISDOM RESOURCE GROUP LLC 2906 S SIDNEY CT, DENVER, CO 80231-6024	45-3487017	N/A	6,090	0	N/A	N/A	RESEARCH
(32) EMORY UNIVERSITY 1440 CLIFTON RD NE SUITE 108, ATLANTA, GA 30322	58-0566256	501(C)(3)	316,934	0	N/A	N/A	RESEARCH
(33) FAIR HOUSING COUNCIL 107 MUSIC CITY CIRCLE , SUITE 318, NASHVILLE, TN 37214	62-1681223	501(C)(3)	11,500	0	N/A	N/A	CONTRIBUTION
(34) FISK UNIVERSITY DEAN OF FINANCIAL AID, STUDENT ACCOUNTS, NASHVILLE, TN 37208	62-0202000	501(C)(3)	115,903	0	N/A	N/A	RESEARCH; TRAINING; INSTRUCTION
(35) FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH ST, MARC 470, MIAMI, FL 33199	65-0177616	GOVT	28,991	0	N/A	N/A	RESEARCH
(36) FLORIDA STATE UNIVERSITY SPONSORED RESEARCH ACCOUNTING SERV, 874 TRADITIONS WAY STE 300, TALLAHASSEE, FL 32306	59-1961248	GOVT	129,362	0	N/A	N/A	RESEARCH
(37) GENERAL ELECTRIC COMPANY 655 MELROSE AVE, NASHVILLE, TN 37211	14-0689340	N/A	195,585	0	N/A	N/A	RESEARCH
(38) GEORGE MASON UNIVERSITY CASHIERS OFFICE, 4400 UNIVERSITY DR MS 2E1, FAIRFAX, VA 22030	54-0836354	501(C)(3)	126,509	0	N/A	N/A	RESEARCH
(39) GEORGIA INSTITUTE OF TECHNOLOGY GEORGIA TECH RESEARCH CORPORATION, AMAC, ATLANTA, GA 30318	58-6002023	GOVT	152,391	0	N/A	N/A	RESEARCH
(40) GEORGIA SOUTHERN UNIVERSITY RESEARCH AND SERVICE FOUNDATION, INC. PO BOX 8005, STATESBORO, GA 30460-8005	58-2354256	501(C)(3)	23,659	0	N/A	N/A	RESEARCH
(41) GEORGIA STATE UNIVERSITY RESEARCH FOUNDATION INC PO BOX 3999, ATLANTA, GA 30302	58-1845423	501(C)(3)	16,208	0	N/A	N/A	RESEARCH
(42) GEORGIA TECH RESEARCH CORPORATION AMAC, 512 MEANS ST SUITE 250, ATLANTA, GA 30318	58-0603146	501(C)(3)	197,090	0	N/A	N/A	RESEARCH
(43) GREENWAYS FOR NASHVILLE INC. METRO BOARD OF PARKS AND RECREATION, PO BOX 196340, NASHVILLE, TN 37219	62-1570596	501(C)(3)	20,000	0	N/A	N/A	CONTRIBUTION

## PUBLIC INSPECTION COPY

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(44) H LEE MOFFITT CANCER CENTER AND RESEARCH INSTITUTE PO BOX 742801, ATLANTA, GA 30374	59-2451713	501(C)(3)	49,735	0	N/A	N/A	RESEARCH
(45) HARRIS COUNTY TX 8410 LANTERN POINT DR, HOUSTON, TX 77054	76-0454514	N/A	116,657	0	N/A	N/A	RESEARCH
(46) HOPE FAMILY HEALTH SERVICES 1124 NEW HIGHWAY 52, WESTMORELAND, TN 37186	20-1944166	501(C)(3)	56,022	0	N/A	N/A	RESEARCH
(47) INDIANA UNIVERSITY 107 S INDIANA AVE, BLOOMINGTON, IN 47405-7000	35-6001673	GOVT	152,381	0	N/A	N/A	RESEARCH
(48) INSTITUTE FOR BROADENING PARTICIPATION PO BOX 607, 281 MAIN STREET, DAMARISCOTTA, ME 04543	20-1891162	501(C)(3)	96,682	0	N/A	N/A	RESEARCH
(49) JOHNS HOPKINS UNIVERSITY OFFICE OF THE CONTROLLER, 1101 EAST 33RD STREET, BALTIMORE, MD 21218	52-0595110	501(C)(3)	182,081	0	N/A	N/A	RESEARCH
(50) KESTREL INSTITUTE 3260 HILLVIEW AVE, PALO ALTO, CA 94304	94-2750021	501(C)(3)	229,440	0	N/A	N/A	RESEARCH
(51) KP PHARMACEUTICAL TECHNOLOGY INC 1212 W RAPPEL AVENUE, BLOOMINGTON, IN 47404	35-2025958	N/A	23,416	0	N/A	N/A	RESEARCH
(52) LEADERSHIP NASHVILLE P.O. BOX 190498, NASHVILLE, TN 37219	62-0986090	501(C)(3)	15,000	0	N/A	N/A	CONTRIBUTION
(53) LIPSCOMB UNIVERSITY STUDENT ACCOUNTS, 3901 GRANNY WHITE PIKE, NASHVILLE, TN 37203	62-0485733	501(C)(3)	7,745	0	N/A	N/A	TRAINING; OTHER SPONSORED
(54) MANAGEMENT LEADERSHIP FOR TOMORROW 7201 WISCONSIN AVENUE , SUITE 400, BETHESDA, MD 20814	52-1795164	501(C)(3)	100,000	0	N/A	N/A	CONTRIBUTION
(55) MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVENUE, BUILDING 11 320, CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	415,206	0	N/A	N/A	RESEARCH
(56) MATTHEW WALKER COMPREHENSIVE HEALTH CENTER INC 1035 14TH AVE N, NASHVILLE, TN 37208	62-1035426	501(C)(3)	73,107	0	N/A	N/A	TRAINING
(57) MEHARRY MEDICAL COLLEGE 1005 DR D B BOULEVARD, NASHVILLE, TN 37208	62-0488046	501(C)(3)	133,439	0	N/A	N/A	RESEARCH
(58) MEMORIAL SLOAN - KETTERING CANCER CENTER 125 YORK AVE, NEW YORK, NY 10065	13-1924236	501(C)(3)	64,911	0	N/A	N/A	RESEARCH
(59) METROPOLITAN NASHVILLE PUBLIC SCHOOLS 2601 BRANSFORD AVE, NASHVILLE, TN 37204	62-0717138	501(C)(3)	348,783	0	N/A	N/A	RESEARCH

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(60) MICHIGAN STATE UNIVERSITY 426 AUDITORIUM RD, EAST LANSING, MI 48824	38-6005984	501(C)(3)	126,854	0	N/A	N/A	TRAINING
(61) MIDDLE TENNESSEE STATE UNIVERSITY WMOT FM, PO BOX 3, MURFREESBORO, TN 37132	62-6005794	GOVT	64,085	0	N/A	N/A	RESEARCH; TRAINING; OTHER SPONSORED
(62) NASHVILLE ADULT LITERACY COUNCIL 4805 PARK AVE, NASHVILLE, TN 37209	58-1488230	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(63) NASHVILLE BALLET INC. 3630 REDMON STREET, , NASHVILLE, TN 37209	47-4340559	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(64) NASHVILLE CIVIC DESIGN CENTER 138 SECOND AVE. NORTH, STE. 106, NASHVILLE, TN 37201	31-1743508	501(C)(3)	20,500	0	N/A	N/A	CONTRIBUTION
(65) NASHVILLE OPERA ASSOCIATION INC. 3622 REDMON STREET, NASHVILLE, TN 37209	62-1130145	501(C)(3)	30,000	0	N/A	N/A	CONTRIBUTION
(66) NASHVILLE PUBLIC EDUCATION FOUNDATION 1207 18TH AVENUE SOUTH, SUITE 202, NASHVILLE, TN 37212	48-1266314	501(C)(3)	20,000	0	N/A	N/A	CONTRIBUTION
(67) NATIONAL ACADEMY OF SCIENCES 2101 CONSTITUTION AVE NW, WASHINGTON, DC 20418	53-0196932	501(C)(3)	50,000	0	N/A	N/A	CONTRIBUTION
(68) NEW MEXICO INSTITUTE OF MINING AND TECHNOLOGY NM BUREAU OF GEOLOGY, 801 LEROY PLACE, SOCORRO, NM 87801	85-6000411	501(C)(3)	66,826	0	N/A	N/A	RESEARCH
(69) NISSAN TECHNICAL CENTER NORTH AMERICA 39001 SUNRISE DR, FARMINGTON HILLS, MI 48331	95-2108010	N/A	123,814	0	N/A	N/A	RESEARCH
(70) NORTH CAROLINA STATE UNIVERSITY OFFICE OF CONTRACTS AND GRANTS, BOX 7214, RALEIGH, NC 27695	56-6000756	GOVT	462,504	0	N/A	N/A	RESEARCH
(71) NORTHERN CALIFORNIA INSTITUTE FOR RESEARCH AND EDUCATION 4150 CLEMENT ST, SAN FRANCISCO, CA 94121	94-3084159	501(C)(3)	79,355	0	N/A	N/A	RESEARCH
(72) NORTHWESTERN UNIVERSITY ACCOUNTING SERVICES FOR RESEARCH, AND SPONSORED PROGRAMS, EVANSTON, IL 60208	36-2167817	501(C)(3)	939,555	0	N/A	N/A	RESEARCH
(73) OASIS CENTER INC 1704 CHARLOTTE PK STE 200, NASHVILLE, TN 37203	62-0968273	501(C)(3)	38,327	0	N/A	N/A	RESEARCH
(74) OHIO STATE UNIV RESEARCH FOUNDATION OHIO STATE UNIVERSITY, 1960 KENNEY ROAD, COLUMBUS, OH 43210	31-6401599	501(C)(3)	568,467	0	N/A	N/A	RESEARCH

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(75) OREGON HEALTH & SCIENCE UNIVERSITY SPONSORED PROJECT ADMIN, 2525 SW 1ST AVENUE, PORTLAND, OR 97201	93-1176109	501(C)(3)	556,232	0	N/A	N/A	RESEARCH
(76) OREGON STATE UNIVERSITY 15TH & JEFFERSON ST, CORVALLIS, OR 97330	61-1730890	GOVT	380,672	0	N/A	N/A	RESEARCH
(77) PAJARITO POWDER, LLC 3600 OSUNA ROAD NE, SUITE 309, ALBUQUERQUE, NM 87109	45-4278439	N/A	25,026	0	N/A	N/A	RESEARCH
(78) PELLISSIPPI STATE COMMUNITY COLLEGE ACCOUNTS RECEIVABLE CLERK, 10915 HARDIN VALLEY ROAD, KNOXVILLE, TN 37933	62-0938734	GOVT	20,000	0	N/A	N/A	TRAINING
(79) PRINCETON UNIVERSITY PRINCETON UNIVERSITY, PRINCETON, NJ 08544	21-0634501	501(C)(3)	19,709	0	N/A	N/A	RESEARCH
(80) PROJECT RETURN 109 LAFAYETTE STREET, NASHVILLE, TN 37210	62-1058325	501(C)(3)	15,000	0	N/A	N/A	CONTRIBUTION
(81) REGENTS OF THE UNIVERSITY OF CALIFORNIA OFFICE OF THE SECRETARY AND COS, 111 FRANKLIN ST, 12TH FL, OAKLAND, CA 94607	95-6006145	501(C)(3)	77,110	0	N/A	N/A	RESEARCH
(82) REGENTS OF THE UNIVERSITY OF CALIFORNIA AT LOS ANGELES CONTRACT AND GRANT ADMINISTRATION, LOS ANGELES, CA 90095	95-6006143	501(C)(3)	389,831	0	N/A	N/A	RESEARCH
(83) RUSH UNIVERSITY MEDICAL CENTER 1620 W HARRISON ST, CHICAGO, IL 60612	36-2174823	501(C)(3)	99,939	0	N/A	N/A	RESEARCH
(84) RUTGERS UNIVERSITY FIBER OPTIC MATERIALS RESEARCH, PISCATAWAY, NJ 08855	22-6001086	501(C)(3)	398,969	0	N/A	N/A	RESEARCH
(85) SAMARITAN MINISTRIES OF TEMPLE CHURCH 3810 KINGS LANE, NASHVILLE, TN 37218	62-1341004	501(C)(3)	15,000	0	N/A	N/A	CONTRIBUTION
(86) SECOND HARVEST FOOD BANK OF MIDDE TN 331 GREAT CIRCLE ROAD, NASHVILLE, TN 37228	62-1049447	501(C)(3)	6,074	0	N/A	N/A	CONTRIBUTION
(87) SICKLE CELL FOUNDATION OF TENNESSEE PO BOX 330575, NASHVILLE, TN 37203	26-3954703	501(C)(3)	15,000	0	N/A	N/A	RESEARCH
(88) SOUTHEASTERN REGIONAL EDUCATION SERVICE CENTER INC 165 SOUTH RIVER ROAD, UNIT F, BEDFORD, NH 03110	02-0315121	501(C)(3)	352,445	0	N/A	N/A	RESEARCH
(89) SOUTHERN METHODIST UNIVERSITY OFFICE OF FINANCIAL AID, DALLAS, TX 75275	75-0800689	501(C)(3)	133,095	0	N/A	N/A	RESEARCH; TRAINING



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(90) SOUTHWEST RESEARCH INSTITUTE 6220 CULEBRA RD, SAN ANTONIO, TX 78238-5166	74-1070544	501(C)(3)	8,047	0	N/A	N/A	RESEARCH
(91) STANFORD UNIVERSITY LELAND STANFORD JUNIOR UNIVERSITY, OFFICE OF SPONSORED RESEARCH, STANFORD, CA 94305	94-1156365	501(C)(3)	370,050	0	N/A	N/A	RESEARCH
(92) STATE OF TENNESSEE 502 DEADERICK ST, 13TH FLOOR, NASHVILLE, TN 37243	62-6001445	GOVT	5,131	0	N/A	N/A	RESEARCH
(93) TEMPLE UNIVERSITY 1801 N BROAD ST, PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	24,426	0	N/A	N/A	RESEARCH
(94) TENNESSEE COLLEGE ACCESS & SUCCESS NETWORK (TCASN) 1704 CHARLOTTE AVENUE, #200, NASHVILLE, TN 37203	45-4475679	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(95) TENNESSEE PERFORMING ARTS CENTER P.O. BOX 190660, NASHVILLE, TN 37219	58-1320590	501(C)(3)	30,000	0	N/A	N/A	CONTRIBUTION
(96) TENNESSEE SPORTS HALL OF FAME 312 ROSA L PARKS AVE, 13TH FLOOR, NASHVILLE, TN 37243	23-7036422	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(97) TENNESSEE STATE MUSEUM FOUNDATION 505 DEADERICK STREET, NASHVILLE, TN 37243	51-0200584	501(C)(3)	6,000	0	N/A	N/A	CONTRIBUTION
(98) TENNESSEE STATE UNIVERSITY DIRECTOR OF SPONSORED RESEARCH, 3500 JOHN MERRITT BLVD, NASHVILLE, TN 37209	62-0786119	501(C)(3)	154,732	0	N/A	N/A	RESEARCH; TRAINING
(99) TENNESSEE TECHNOLOGICAL UNIVERSITY BOX 5036, COOKEVILLE, TN 38505	62-0646806	501(C)(3)	34,825	0	N/A	N/A	TRAINING
(100) TENNESSEE TECHNOLOGY DEVELOPMENT CORP. DBA LAUNCH TENNESSEE 90 OCEANSIDE DRIVE, NASHVILLE, TN 37204	62-1765738	501(C)(3)	10,000	0	N/A	N/A	CONTRIBUTION
(101) TEQUILA JOHNSON DBA THE EQUITY GROUP LLC 800 THIRD AVE, 36TH FLOOR, NEW YORK, NY 10022	83-1602874	501(C)(3)	62,500	0	N/A	N/A	RESEARCH
(102) TEXAS A&M ENGINEERING EXPERIMENT STATION 400 HARVEY MITCHELL PKWY SOUTH, SUITE 300, COLLEGE STATION, TX 77845	74-1974733	501(C)(3)	139,216	0	N/A	N/A	RESEARCH
(103) TEXAS TECH UNIVERSITY OFFICE OF STUDENT ACCOUNTS, GSC SUITE 2801, COLLEGE STATION, TX 77843	75-6002622	501(C)(3)	15,628	0	N/A	N/A	RESEARCH
(104) THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ALABAMA 500 UNIVERSITY BLVD EAST, TUSCALOOSA, AL 35401	63-6001138	501(C)(3)	124,520	0	N/A	N/A	OTHER SPONSORED

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(105) THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS 352 HENRY ADMIN BUILDING, MC350, 506 S WRIGHT ST, URBANA, IL 61801	37-6000511	501(C)(3)	879,073	0	N/A	N/A	RESEARCH; TRAINING
(106) THE EQUITY ALLIANCE PO BOX 331821, NASHVILLE, TN 37203	81-5394158	501(C)(3)	20,000	0	N/A	N/A	CONTRIBUTION
(107) THE NEXT DOOR PO BOX 23336, NASHVILLE, TN 37203	43-2001774	501(C)(3)	13,000	0	N/A	N/A	CONTRIBUTION
(108) THE PENNSYLVANIA STATE UNIVERSITY UNIVERSITY LIBRARIES, 502 PATERNO LIBRARY, UNIVERSITY PARK, PA 16802	24-6000376	GOVT	79,579	0	N/A	N/A	RESEARCH
(109) THE TOMORROW COMPANIES INC 25 DORCHESTER AVE, ROOM 52150, BOSTON, MA 02205	61-1778389	N/A	12,256	0	N/A	N/A	RESEARCH
(110) THE UNIVERSITY OF TENNESSEE THE UNIVERSITY OF TENNESSEE, KNOXVILLE, TN 37996	62-6001636	GOVT	777,523	0	N/A	N/A	RESEARCH; TRAINING; OTHER SPONSORED
(111) THE URBAN INSTITUTE 500 L'ENFANT PLAZA SW, WASHINGTON, DC 20024	52-0880375	501(C)(3)	11,676	0	N/A	N/A	RESEARCH
(112) TOUGALOO COLLEGE 500 WEST COUNTY LINE ROAD, TOUGALOO, MS 39174	64-0303093	501(C)(3)	200,246	0	N/A	N/A	RESEARCH
(113) UNIVERSITY COMMUNITY HEALTH SERVICES INC 601 BENTON AVE, NASHVILLE, TN 37204	62-1438461	501(C)(3)	26,719	0	N/A	N/A	TRAINING
(114) UNIVERSITY OF ALABAMA AT BIRMINGHAM STUDENT ACCOUNTING SERVICES, 1400 UNIVERSITY BLVD STE 322, BIRMINGHAM, AL 35294	63-6005396	501(C)(3)	173,247	0	N/A	N/A	OTHER SPONSORED
(115) UNIVERSITY OF ARIZONA BOARD OF REGENT, PO BOX 3308, TUCSON, AZ 85722	74-2652689	GOVT	28,627	0	N/A	N/A	RESEARCH
(116) UNIVERSITY OF ARKANSAS FAYETTEVILLE UNIVERSITY OF ARKANSAS, FAYETTEVILLE, AR 72701	71-6003252	GOVT	23,219	0	N/A	N/A	RESEARCH
(117) UNIVERSITY OF CALIFORNIA BERKELEY SPONSORED PROJECTS OFFICE, 2150 SHATTUCK AVENUE ROOM 313, BERKELEY, CA 94704	94-6002123	501(C)(3)	380,378	0	N/A	N/A	RESEARCH
(118) UNIVERSITY OF CALIFORNIA DAVIS ONE SHEILDS AVE, DAVIS, CA 95616	94-6036494	501(C)(3)	26,870	0	N/A	N/A	RESEARCH
(119) UNIVERSITY OF CALIFORNIA SAN DIEGO OFFICE OF CONTRACT & GRANT ADMIN, 9500 GILMAN DRIVE, LA JOLLA, CA 92093	95-6006144	501(C)(3)	297,749	0	N/A	N/A	RESEARCH

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(120) UNIVERSITY OF CALIFORNIA SAN FRANCISCO OFFICE OF SPONSORED RESEARCH, 3333 CALIFORNIA STREET STE 315, SAN FRANCISCO, CA 94143	94-6036493	501(C)(3)	125,008	0	N/A	N/A	RESEARCH
(121) UNIVERSITY OF CALIFORNIA SANTA CRUZ 1156 HIGH STREET, SANTA CRUZ, CA 95064	94-1539563	501(C)(3)	37,025	0	N/A	N/A	RESEARCH
(122) UNIVERSITY OF CENTRAL FLORIDA 12424 RESEARCH PARKWAY SUITE 300, ORLANDO, FL 32826	59-2924021	501(C)(3)	54,934	0	N/A	N/A	RESEARCH
(123) UNIVERSITY OF COLORADO 1800 GRANT ST, SUITE 800, DENVER, CO 80203	84-6000555	501(C)(3)	55,784	0	N/A	N/A	RESEARCH
(124) UNIVERSITY OF CONNECTICUT 438 WHITNEY RD EXTENSION UNIT 1133, SPONSORED PROGRAM SERVICES, STORRS MANSFIELD, CT 06269	06-0772160	GOVT	466,163	0	N/A	N/A	RESEARCH; TRAINING
(125) UNIVERSITY OF DAYTON 300 COLLEGE PARK, DAYTON, OH 45469	31-0536715	501(C)(3)	182,662	0	N/A	N/A	RESEARCH
(126) UNIVERSITY OF DENVER BURSARS OFC THIRD PARTY BILLING, 2197 S UNIVERSITY BLVD STE 223, DENVER, CO 80208	84-0404231	501(C)(3)	54,533	0	N/A	N/A	RESEARCH
(127) UNIVERSITY OF GEORGIA RESEARCH FOUNDATION, INC 310 EAST CAMPUS ROAD, TUCKER HALL ROOM 411, ATHENS, GA 30602	58-1353149	501(C)(3)	214,661	0	N/A	N/A	RESEARCH; TRAINING
(128) UNIVERSITY OF HOUSTON COLLEGE OF OPTOMETRY, CHRIS KUETHER INSTRUMENT DESIGNER, HOUSTON, TX 77204	74-6001399	501(C)(3)	38,058	0	N/A	N/A	RESEARCH
(129) UNIVERSITY OF LOUISVILLE RESEARCH FOUNDATION INC 300 EAST MARKET ST SUITE 300, ATTN JULIE RENN, LOUISVILLE, KY 40202	61-1029626	501(C)(3)	15,300	0	N/A	N/A	RESEARCH
(130) UNIVERSITY OF MARYLAND UNIVERSITY OF MARYLAND, COLLEGE PARK, MD 20742	52-6002033	501(C)(3)	34,718	0	N/A	N/A	RESEARCH
(131) UNIVERSITY OF MASSACHUSETTS 100 MORRISSEY BLVD, BOSTON, MA 02125	04-3167352	GOVT	84,447	0	N/A	N/A	RESEARCH
(132) UNIVERSITY OF MEMPHIS BURSARS OFFICE, ADMINISTRATION BUILDING, MEMPHIS, TN 38152	62-0648618	501(C)(3)	344,299	0	N/A	N/A	RESEARCH; TRAINING
(133) UNIVERSITY OF MIAMI OFFICE OF STUDENT ACCOUNT SERVICES, PO BOX 249115, CORAL GABLES, FL 33124	59-0624458	501(C)(3)	75,916	0	N/A	N/A	RESEARCH
(134) UNIVERSITY OF MICHIGAN 3003 S. STATE STREET, ANN ARBOR, MI 48109	38-6006309	501(C)(3)	76,322	0	N/A	N/A	RESEARCH; OTHER SPONSORED

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(135) UNIVERSITY OF MINNESOTA REGENTS REGENTS OF THE UNIV OF MINNESOTA, OFFICE OF SPONSORED FINAN REPORTING, MINNEAPOLIS, MN 55455	41-6007513	501(C)(3)	588,304	0	N/A	N/A	RESEARCH; TRAINING
(136) UNIVERSITY OF MISSOURI RESEARCH ANIMAL DIAGNOSTIC LAB, 4011 DISCOVERY DRIVE, COLUMBIA, MO 65201	43-6003859	501(C)(3)	12,462	0	N/A	N/A	RESEARCH
(137) UNIVERSITY OF NORTH CAROLINA AT GREENSBORO PO BOX 26170, GREENSBORO, NC 27402	56-6001468	501(C)(3)	67,711	0	N/A	N/A	RESEARCH
(138) UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER PO BOX 99335, FORT WORTH, TX 76199	75-6064033	501(C)(3)	138,501	0	N/A	N/A	RESEARCH
(139) UNIVERSITY OF OREGON 1600 MILLRACE DRIVE SUITE 207, TEACHING AND LEARNING, EUGENE, OR 97403	46-4727800	GOVT	133,961	0	N/A	N/A	RESEARCH
(140) UNIVERSITY OF PITTSBURGH UNIVERSITY OF PITTSBURGH PRESS, 3400 FORBES AVE 5TH FLOOR, PITTSBURGH, PA 15260	25-0965591	501(C)(3)	728,596	0	N/A	N/A	RESEARCH
(141) UNIVERSITY OF SOUTH CAROLINA USC REGIONAL CAMPUSES AND, CONTINUING EDUCATION, COLUMBIA, SC 29208	57-6001153	GOVT	14,996	0	N/A	N/A	RESEARCH
(142) UNIVERSITY OF SOUTH FLORIDA ATTN RESEARCH PROJECTS RECEIVABLES, PO BOX 864568, ORLANDO, FL 32886	59-3102112	GOVT	41,721	0	N/A	N/A	RESEARCH
(143) UNIVERSITY OF TENNESSEE AT CHATTANOOGA OFFICE OF GRANTS AND RESEARCH, 218 RACE HALL, CHATTANOOGA, TN 37403	59-2353733	GOVT	185,340	0	N/A	N/A	RESEARCH; TRAINING; OTHER SPONSORED
(144) UNIVERSITY OF TEXAS AT AUSTIN 2500 SPEEDWAY MBB1.220E, 1 UNIVERSITY STATION A4800, AUSTIN, TX 78712	74-6000203	GOVT	207,229	0	N/A	N/A	RESEARCH; TRAINING
(145) UNIVERSITY OF UTAH 201 S PRESIDENTS CIRCLE ROOM 411, SALT LAKE CITY, UT 84112	87-6000525	501(C)(3)	109,147	0	N/A	N/A	RESEARCH
(146) UNIVERSITY OF VIRGINIA PO BOX 400195, OFFICE OF SPONSORED PROGRAMS, CHARLOTTESVILLE, VA 22904	54-6001796	501(C)(3)	406,404	0	N/A	N/A	RESEARCH
(147) UNIVERSITY OF WASHINGTON GRANT & CONTRACT ACCOUNTING, 3917 UNIVERSITY WAY NE, SEATTLE, WA 98105	91-6001537	GOVT	551,006	0	N/A	N/A	RESEARCH
(148) UNIVERSITY OF WISCONSIN SYSTEM WI CENTER OF EDUCATION RESEARCH, 1025 WEST JOHNSON STREET, MADISON, WI 53706	39-1805963	GOVT	834,788	0	N/A	N/A	RESEARCH
(149) VANDERBILT UNIVERSITY MEDICAL CENTER 3322 WEST END AVE, NASHVILLE, TN 37204	35-2528741	501(C)(3)	36,712,569	0	N/A	N/A	CONTRIBUTION; RESEARCH; TRAINING; OTHER SPONSORED

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(150) VIRGINIA POLYTECHNIC INSTITUTE & STATE UNIVERSITY 800 WASHINGTON ST SW, SUITE 150, BLACKSBURG, VA 24061	54-6001805	GOVT	10,664	0	N/A	N/A	RESEARCH
(151) WAKE FOREST UNIVERSITY HEALTH SCIENCES MEDICAL CENTER BLVD, WINSTON SALEM, NC 27157	22-3849199	501(C)(3)	20,072	0	N/A	N/A	RESEARCH
(152) WASHINGTON UNIVERSITY SCHOOL OF MEDICINE, DEPARTMENT OF NEUROSCIENCE, ST. LOUIS, MO 63110	43-0653611	501(C)(3)	109,184	0	N/A	N/A	RESEARCH
(153) YALE UNIVERSITY 47 COLLEGE STREET / SUITE 203, P O BOX 208047, NEW HAVEN, CT 06520	06-0646973	501(C)(3)	262,412	0	N/A	N/A	RESEARCH
(154) NORTHSIDE BAPTIST CHURCH OF MAYFIELD INC. 611 W LOCHRIDGE ST, MAYFIELD, KY 42066	30-0579266	501(C)(3)	0	19,100	FMV	HOME GOODS, FOOD, ETC.	HOME GOODS, FOOD, ETC. FOR NORTHSIDE BAPTIST CHURCH OF MAYFIELD'S ASSISTANCE TO VICTIMS OF MAYFIELD, KY TORNADO RELIEF.

## Part IV

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	<p>SUBRECIPIENT GRANTS: VANDERBILT UNIVERSITY MAINTAINS A FORMAL POLICY DEFINING ITS PROCEDURES FOR MONITORING THE USE OF SPONSORED FUNDS BY SUBRECIPIENTS LOCATED OUTSIDE THE UNITED STATES WHO ARE PERFORMING A PORTION OF A SPONSORED PROJECT EXTERNALLY AWARDED TO VANDERBILT. THE POLICY PROVIDES GUIDANCE TO ENSURE THAT SUBRECIPIENTS CONDUCT THEIR PORTIONS OF THE SPONSORED PROJECTS IN COMPLIANCE WITH LAWS, REGULATIONS AND TERMS AND CONDITIONS OF AWARDS AND SUBAWARDS AND THAT REIMBURSED COSTS INCURRED BY SUBRECIPIENTS ARE ALLOWED. THE POLICY ADDRESSES THE ROLES AND RESPONSIBILITIES OF THE CENTRAL OFFICES AND ACADEMIC DEPARTMENTS OF THE UNIVERSITY AND DESCRIBES THE MONITORING PROCEDURES FOR EACH AREA. THE FULL TEXT OF VANDERBILT'S SUBRECIPIENT MONITORING GUIDELINES IS AVAILABLE ONLINE AT THE FOLLOWING WEB ADDRESS:</p> <p><a href="https://finance.vanderbilt.edu/procedures-forms/subrecipient_monitoring_guidelines.pdf">HTTPS://FINANCE.VANDERBILT.EDU/PROCEDURES-FORMS/SUBRECIPIENT_MONITORING_GUIDELINES.PDF</a></p> <p>FINANCIAL AID: ASSISTANCE OFFERED FROM INSTITUTIONAL FUNDS BY VANDERBILT TO OUR STUDENTS IS AWARDED ON THE BASIS OF MERIT AND/OR FINANCIAL NEED. SUCH ASSISTANCE HELPS STUDENTS AND THEIR FAMILIES SUPPORT THE COST OF ATTENDANCE WHICH INCLUDES TUITION, MANDATORY FEES, ROOM &amp; BOARD, BOOKS, OTHER COURSE MATERIALS/SUPPLIES, AND ALLOWANCES FOR PERSONAL/MISCELLANEOUS AND TRAVEL EXPENSES. MERIT-BASED AWARDS ARE COMPETITIVELY AWARDED IN RECOGNITION OF ACADEMIC ACHIEVEMENT, LEADERSHIP, AND COMMITMENT TO COMMUNITY SERVICE, CONTRIBUTIONS TO SOCIETY, AND OTHER FORMS OF ACCOMPLISHMENT. NEED-BASED ASSISTANCE IS AWARDED ON THE BASIS OF DOCUMENTED FINANCIAL NEED, RESULTING FROM A NEED ANALYSIS EVALUATION ACCOMPLISHED IN ACCORDANCE WITH RELEVANT AND APPLICABLE FEDERAL, STATE, AND/OR INSTITUTIONAL PROGRAMS, POLICIES, AND ELIGIBILITY REQUIREMENTS. THE UNITS RESPONSIBLE FOR ADMINISTERING STUDENT FINANCIAL AID AT VANDERBILT REGULARLY INITIATE SYSTEM-GENERATED REVIEWS, AS WELL AS OTHER CROSS-CHECKS ON AN AD HOC BASIS. RESULTS FROM THESE REVIEWS, ALONG WITH RECURRING MANAGEMENT REPORTS, ARE REGULARLY EVALUATED. SUBSEQUENTLY, FOLLOW-UP CORRECTIVE ACTIONS ARE TAKEN WHEN APPROPRIATE AND POTENTIALLY INCLUDE AWARD REVISIONS OR CANCELLATIONS. THESE PROVISIONS ARE DESIGNED TO HELP ENSURE THAT STUDENT ASSISTANCE FUNDS ARE AWARDED TO ELIGIBLE RECIPIENTS, IN ACCORDANCE WITH APPLICABLE FEDERAL, STATE, INSTITUTIONAL, AND OTHER PROGRAM LEGISLATION, AS WELL AS RELEVANT INTERNAL UNIVERSITY POLICIES AND OPERATIONAL GUIDELINES/CRITERIA.</p>
(1) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>AEROSPACE CORPORATION</p> <p>2310 E EL SEGUNDO BLVD, EL SEGUNDO, CA 90245</p>
(3) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>AMERICAN ACADEMY OF NURSING</p> <p>1000 VERMONT AVE NW , SUITE 910, WASHINGTON, DC 20005</p>
(5) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>AUGUSTA UNIVERSITY RESEARCH INSTITUTE, INC.</p> <p>1120 15TH ST, AUGUSTA, GA 30912</p>
(7) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>BAYLOR COLLEGE OF MEDICINE</p> <p>VECTOR DEVELOPMENT LAB, ONE BAYLOR PLAZA, HOUSTON, TX 77030</p>
(8) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>BEREA COLLEGE</p> <p>101 CHESTNUT ST, CPO 2214 LINCOLN HALL SUITE 220, BEREA, KY 40404</p>
(9) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>BIOMEDICAL ENGINEERING SOCIETY</p> <p>8201 CORPORATE DRIVE , SUITE 1125, LANDOVER, MD 20785</p>
(10) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	<p>BOSTON UNIVERSITY</p> <p>881 COMMONWEALTH AVENUE, BOSTON, MA 02215</p>
SCHEDULE I, PART III, COLUMN A - TYPE OF GRANT	STUDENT FINANCIAL ASSISTANCE - TUITION, ROOM & BOARD AND STUDENT HARDSHIP FUND
SCHEDULE I, PART III, COLUMN A - TYPE OF GRANT	COVID 19 EMERGENCY RELIEF FUND (EFR) TO STUDENTS

**SCHEDULE J**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service

Name of the organization

VANDERBILT UNIVERSITY

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

Employer identification number

62-0476822

**Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence            |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)          |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

	Yes	No
<b>1b</b>	✓	
<b>2</b>	✓	
<b>3</b>		
<b>4a</b>	✓	
<b>4b</b>	✓	
<b>4c</b>		✓
<b>5a</b>		✓
<b>5b</b>		✓
<b>6a</b>		✓
<b>6b</b>		✓
<b>7</b>	✓	
<b>8</b>	✓	
<b>9</b>	✓	

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? . . . . . **4a**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? . . . . . **4b**
- c** Participate in or receive payment from an equity-based compensation arrangement? . . . . . **4c**

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.****5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . . . . **5a**
- b** Any related organization? . . . . . **5b**

If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . . . . **6a**
- b** Any related organization? . . . . . **6b**

If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III . . . . .**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .



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

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

**Note:** The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ANDERS W. HALL	(i)	871,704	1,982,146	19,419	1,529,904	31,192	4,434,365	312,540
1 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
JERRY STACKHOUSE	(i)	2,976,063	59,848	20,148	139,326	1,897	3,197,282	0
2 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
CLARK LEA	(i)	2,985,712	0	25,906	14,326	25,937	3,051,881	0
3 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
TIMOTHY C. CORBIN	(i)	1,316,102	938,260	10,628	163,873	18,196	2,447,059	647,705
4 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
DANIEL DIERMEIER	(i)	1,211,163	506,280	193,961	254,326	51,193	2,216,923	0
5 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
DEREK MASON	(i)	0	0	2,166,660	0	0	2,166,660	0
6 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
TRAVIS W. SHORE	(i)	375,989	968,338	20,129	615,051	42,680	2,022,187	0
7 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
BRETT C. SWEET	(i)	1,043,419	444,152	20,742	166,469	74,622	1,749,404	100,000
8 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
JOHN M. LUTZ	(i)	857,448	236,043	20,619	84,326	20,495	1,218,931	0
9 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
SUSAN WENTE	(i)	428,838	520,000	27,606	14,326	35,510	1,026,280	166,667
10 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
NICHOLAS S. ZEPOS	(i)	927,373	0	34,343	14,326	19,826	995,868	0
11 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
CANDICE S. LEE	(i)	693,323	189,313	837	47,659	17,332	948,464	0
12 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
LAWRENCE J. MARNETT	(i)	614,947	170,000	34,326	14,326	21,800	855,399	90,000
13 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
JOHN GEER	(i)	608,974	50,000	33,697	74,326	42,834	809,831	0
14 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
ERIC C. KOPSTAIN	(i)	534,752	165,000	20,742	49,326	15,184	785,004	0
15 SEE SCHEDULE O	(ii)	0	0	0	0	0	0	0
(SEE STATEMENT)	(i)							
16	(ii)							

**Part II****Officers, Directors, Trustees, Key Employees and Highest Compensated Employees** (continued)

(a) Name		(b) Breakdown of W-2 and/or 1099-MISC compensation			(c) Retirement and other deferred compensation	(d) Nontaxable benefits	(e) Total of columns (b)(i)-(d)	(f) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(16) RUBY SHELLAWAY SEE SCHEDULE O	(i)	558,062	138,650	19,415	14,326	36,710	767,163	0
	(ii)	0	0	0	0	0	0	0
(17) C. CYBELE RAVER SEE SCHEDULE O	(i)	352,253	200,000	9,286	123,076	5,135	689,750	0
	(ii)	0	0	0	0	0	0	0
(18) ANDRE L. CHURCHWELL SEE SCHEDULE O	(i)	609,491	0	0	0	0	609,491	0
	(ii)	0	0	0	0	0	0	0
(19) MALCOLM TURNER SEE SCHEDULE O	(i)	0	0	549,333	0	0	549,333	0
	(ii)	0	0	0	0	0	0	0
(20) STEVE ERTEL SEE SCHEDULE O	(i)	328,026	88,800	572	26,826	30,571	474,795	0
	(ii)	0	0	0	0	0	0	0
(21) NATHAN GREEN SEE SCHEDULE O	(i)	338,764	94,013	830	8,700	27,747	470,054	0
	(ii)	0	0	0	0	0	0	0

## Part III

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

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL	<p>VANDERBILT EXCLUDES FIRST-CLASS AND CHARTER TRAVEL FROM TAXABLE INCOME WHEN A DOCUMENTED BUSINESS PURPOSE IS SERVED.</p> <p>FIRST-CLASS OR CHARTER TRAVEL - TRAVELERS SHOULD FLY VIA COMMERCIAL AIRLINE AND WORK TO OBTAIN THE LOWEST FARE POSSIBLE. BUSINESS CLASS OR FIRST CLASS SEATING MAY ONLY BE USED IF THE TRAVELER'S VICE CHANCELLOR PROVIDES APPROVAL IN WRITING IN ADVANCE. THIS APPROVAL IS ONLY PROVIDED FOR LIMITED CIRCUMSTANCES AS PROVIDED IN VANDERBILT'S TRAVEL AND BUSINESS EXPENSE POLICY. IN CASES WHERE IT IS NOT POSSIBLE TO FLY COMMERCIAL DUE TO SCHEDULING COMMITMENTS, AND THE TRAVEL IS OF THE HIGHEST IMPORTANCE, TRAVELERS MAY REQUEST THAT THE CHANCELLOR APPROVE A CHARTER FLIGHT. AFTER WEIGHING THE BENEFITS OF THE TRIP AGAINST THE COST OF THE CHARTER, THE CHANCELLOR MAY APPROVE A CHARTER FLIGHT. THE BOARD OF TRUST HAS APPROVED FIRST CLASS AND CHARTER TRAVEL FOR THE CHANCELLOR WHEN NECESSITATED BY HIS SCHEDULE.</p> <p>PER VANDERBILT'S ATHLETICS TRAVEL POLICY, THE VICE CHANCELLOR FOR UNIVERSITY AFFAIRS AND ATHLETICS CAN APPROVE NON-STUDENT TRAVEL ON TEAM CHARTER FLIGHTS, WHEN THERE ARE EXTRA SEATS, WITHOUT REQUIRING REIMBURSEMENT TO THE UNIVERSITY SINCE THE CHARTER FEE IS NOT DETERMINED BY THE NUMBER OF ACTUAL PASSENGERS.</p> <p>1 TRUSTEE, 1 OFFICER, 1 FORMER OFFICER, 3 HIGHEST COMPENSATED EMPLOYEES, AND 1 KEY EMPLOYEE WERE PROVIDED FIRST-CLASS OR CHARTER TRAVEL THAT WAS NOT INCLUDED IN TAXABLE COMPENSATION.</p> <p>1 OFFICER WAS PROVIDED FIRST-CLASS OR CHARTER TRAVEL THAT WAS INCLUDED IN TAXABLE COMPENSATION.</p>
SCHEDULE J, PART I, LINE 1A - TRAVEL FOR COMPANIONS	2 HIGHEST COMPENSATED EMPLOYEES WERE PROVIDED COMPANION TRAVEL THAT WAS NOT INCLUDED IN TAXABLE COMPENSATION BECAUSE A BUSINESS PURPOSE EXISTED FOR THE COMPANIONS' TRAVEL.
SCHEDULE J, PART I, LINE 1A - TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	3 OFFICERS AND 1 KEY EMPLOYEE WAS PROVIDED TAX INDEMNIFICATION AND GROSS-UP PAYMENTS THAT WERE INCLUDED IN TAXABLE COMPENSATION.
SCHEDULE J, PART I, LINE 1A - HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE	1 OFFICER AND 1 HIGHEST COMPENSATED EMPLOYEE WERE PROVIDED A HOUSING ALLOWANCE THAT WAS INCLUDED IN TAXABLE COMPENSATION.
SCHEDULE J, PART I, LINE 4A - SEVERANCE OR CHANGE-OF-CONTROL PAYMENT	<p>CERTAIN INDIVIDUALS LISTED IN FORM 990, SCHEDULE J, PART II RECEIVED A SEVERANCE PAYMENT IN CONNECTION TO THEIR TERMINATION OF STATUS AS AN OFFICER OR EMPLOYEE. 2 PAYOUTS WERE MADE UNDER A SEVERANCE AGREEMENT:</p> <p>DEREK MASON: \$2,166,660 MALCOLM TURNER: \$549,333</p>
SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	<p>CERTAIN INDIVIDUALS LISTED IN FORM 990. SCHEDULE J, PART II, PARTICIPATE IN NONQUALIFIED DEFERRED COMPENSATION PLANS. AMOUNTS CONTRIBUTED TO THE PLANS INCLUDE FIXED %S OF ANNUAL BONUS PAYMENTS, AND FIXED DOLLAR AMOUNTS. CONTRIBUTIONS TO THE PLAN VEST WHEN INDIVIDUALS COMPLETE THEIR CONTRACT TERM OR CONTINUE EMPLOYMENT TO A DESIGNATED DATE. CURRENT YEAR ACCRUALS OF COMPENSATION ASSOCIATED WITH THESE PLANS ARE INCLUDED IN THE AMOUNTS REPORTED FOR SUCH INDIVIDUALS IN SCHEDULE J, PART II, COLUMN (C). THE PAYOUT OF THESE AMOUNTS IN FUTURE YEARS WILL BE INCLUDED IN THE AMOUNTS REPORTED IN SCHEDULE J, PART II, COLUMN (B)(II), AND WILL ALSO BE REPORTED IN SCHEDULE J, PART II, COLUMN (F). FIVE PAYOUTS WERE MADE UNDER THESE PLANS TO PARTICIPATING INDIVIDUALS IN CALENDAR YEAR 2021.</p> <p>TIM CORBIN: \$645,260 ANDERS HALL: \$333,121 LAWRENCE MARNETT: \$100,000 BRETT SWEET: \$150,000 SUSAN WENTE: \$250,000</p>
SCHEDULE J, PART I, LINE 7 - NON-FIXED PAYMENTS	CERTAIN INDIVIDUALS LISTED IN SCHEDULE J, PART II RECEIVED VARIABLE INCENTIVE COMPENSATION BASED ON THE ACHIEVEMENT OF PRE-ESTABLISHED GOALS, WHERE JUDGEMENT WAS DETERMINED EITHER BY THE BOARD OF TRUST OR THE CHANCELLOR. INCENTIVE PAYMENTS ARE SHOWN IN SCHEDULE J, PART II, COLUMN B(II).
SCHEDULE J, PART I, LINE 8 - PAYMENTS ON CONTRACT THAT IS SUBJECT TO THE INITIAL CONTRACT EXCEPTION	CERTAIN INDIVIDUALS ARE, FROM TIME TO TIME, SERVING UNDER THE PROVISIONS OF THEIR INITIAL CONTRACT TO SERVE AS OFFICERS OF THE UNIVERSITY, WHICH PRINCIPALLY ESTABLISHES THEIR COMPENSATION, RESPONSIBILITIES AND DUTIES.
SCHEDULE J, PART II, COLUMN (B)(I) - BASE COMPENSATION - ANDRE CHURCHWELL	VANDERBILT REIMBURSED VUMC \$609,491 THROUGH AN EMPLOYEE SERVICES AGREEMENT FOR SERVICES PROVIDED TO VANDERBILT BY ANDRE CHURCHWELL, A VUMC EMPLOYEE WHO SERVES AS VANDERBILT'S CHIEF DIVERSITY OFFICER AND VICE CHANCELLOR FOR EQUITY, DIVERSITY AND INCLUSION.

**SCHEDULE L  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Transactions With Interested Persons**▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**  
▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021****Open To Public  
Inspection**

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) (SEE STATEMENT)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
<b>Total</b>						▶ \$	495,931					

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

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) (SEE STATEMENT)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Cat. No. 50056A

Schedule L (Form 990) 2021

## Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) (SEE STATEMENT)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V**      **Supplemental Information.**

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

[illegible]

**Part II****Loans to and/or From Interested Persons** (continued)

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(10) C. CYBELE RAVER	CURRENT OFFICER	HOUSING LOAN		✓	500,000	495,931		✓		✓	✓	

**Part III****Grants and Assistance Benefiting Interested Persons** (continued)

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		\$112,273	TUITION ASSISTANCE	TUITION BENEFITS TO ASSIST INDIVIDUALS TO FUND EDUCATION COSTS.
(2)		\$77,773	MERIT-BASED SCHOLARSHIPS	SCHOLARSHIPS TO ASSIST INDIVIDUALS TO FUND EDUCATION COSTS



**Part IV****Business Transactions Involving Interested Persons** (continued)

(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) ANDREW LEE	FAMILY MEMBER OF CURRENT OFFICER CANDICE LEE	\$47,643	EMPLOYMENT AT VANDERBILT		✓
(2) MARISA C. SMITH	FAMILY MEMBER OF CURRENT OFFICER ANDRE CHURCHWELL	\$52,824	EMPLOYMENT AT VANDERBILT		✓

**SCHEDULE M  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Noncash Contributions**

OMB No. 1545-0047

**2021****Open to Public  
Inspection**

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

Name of the organization

VANDERBILT UNIVERSITY

Employer identification number

62-0476822

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .	✓		75,007	MARKET VALUE
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .	✓	1	39,784	NONE
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	✓	241	21,821,324	MARKET VALUE
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .	✓	6	6	MARKET VALUE
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .	✓	1	1	MARKET VALUE
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( DONOR PAID EXPENSES ) . . . . .	✓	10	11,932	MARKET VALUE
26 Other ▶ ( MISCELLANEOUS ) . . . . .	✓	3	2,101	MARKET VALUE
27 Other ▶ ( SOFTWARE ) . . . . .	✓	1	3,728,196	MARKET VALUE
28 Other ▶ ( MISCELLANEOUS EQUIPMENT ) . . . . .	✓	2	30,601	NONE
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement . . . . .			29	0
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . . .				Yes No 30a ✓
b If "Yes," describe the arrangement in Part II.				
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? . . . . .				31 ✓
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .				32a ✓
b If "Yes," describe in Part II.				
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.				

## Part II

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

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	VANDERBILT REPORTS THE NUMBER OF CONTRIBUTIONS RECEIVED THROUGHOUT THE YEAR FOR EACH TYPE OF PROPERTY LISTED.
SCHEDULE M, PART I, LINE 32B - THIRD PARTIES USED TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS	VANDERBILT HAS UTILIZED THE ASSISTANCE OF PROFESSIONAL REAL ESTATE AGENTS TO SELL THE CHARITABLE CONTRIBUTIONS OF REAL ESTATE PROPERTY AND BROKERS TO SELL PUBLICLY TRADED SECURITIES RECEIVED BY VANDERBILT AS A GIFT.

<b>SCHEDULE O (Form 990)</b>  Department of Treasury Internal Revenue Service	<b>Supplemental Information to Form 990 or 990-EZ</b> Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	OMB No. 1545-0047  <div style="font-size: 2em; font-weight: bold;">2021</div>
	▶ Attach to Form 990 or 990-EZ. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.	<div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>Open to Public Inspection</b> </div>
Name of the Organization <b>VANDERBILT UNIVERSITY</b>		Employer Identification Number <b>62-0476822</b>

Return Reference - Identifier	Explanation
FORM 990, PART I, LINE 1 - DESCRIPTION OF ORGANIZATION MISSION	VANDERBILT IS A CENTER FOR SCHOLARLY RESEARCH, INFORMED AND CREATIVE TEACHING, AND SERVICE TO THE COMMUNITY AND SOCIETY AT LARGE. VANDERBILT WILL UPHOLD THE HIGHEST STANDARDS AND BE A LEADER IN THE QUEST FOR NEW KNOWLEDGE THROUGH SCHOLARSHIP, DISSEMINATION OF KNOWLEDGE THROUGH TEACHING AND OUTREACH, AND CREATIVE EXPERIMENTATION OF IDEAS AND CONCEPTS. IN PURSUIT OF THESE GOALS, VANDERBILT VALUES MOST HIGHLY THE INTELLECTUAL FREEDOM THAT SUPPORTS OPEN INQUIRY AND EQUALITY, COMPASSION AND EXCELLENCE IN ALL ENDEAVORS.
FORM 990, PART III, LINE 1 - DESCRIPTION OF ORGANIZATION MISSION	SEE DISCLOSURE ABOVE.
FORM 990, PART III, LINE 4A - EDUCATION	<p>VANDERBILT IS AMONG A UNIQUE SET OF INDEPENDENT UNIVERSITIES THAT OFFERS BOTH A HIGH-QUALITY UNDERGRADUATE PROGRAM AND A FULL RANGE OF TOP-RANKED GRADUATE AND PROFESSIONAL DEGREE PROGRAMS. ITS WORLD-CLASS FACULTY CONSISTS OF MORE THAN 2,400 FULL-TIME MEMBERS, AND THE DIVERSE STUDENT BODY IS MORE THAN 12,000 STRONG ACROSS 10 SCHOOLS AND COLLEGES.</p> <p>VANDERBILT'S TEN SCHOOLS AND COLLEGES INCLUDE: COLLEGE OF ARTS AND SCIENCE, BLAIR SCHOOL OF MUSIC, DIVINITY SCHOOL, SCHOOL OF ENGINEERING, GRADUATE SCHOOL, LAW SCHOOL, SCHOOL OF MEDICINE, SCHOOL OF NURSING, OWEN GRADUATE SCHOOL OF MANAGEMENT, AND PEABODY COLLEGE (OF EDUCATION AND HUMAN DEVELOPMENT). VANDERBILT HAS APPROXIMATELY 7,100 UNDERGRADUATE STUDENTS, 6,500 GRADUATE AND PROFESSIONAL STUDENTS, AND AN 8:1 STUDENT-TO-FACULTY RATIO.</p> <p>VANDERBILT RANKED 13TH AMONG THE NATION'S BEST UNIVERSITIES IN AN ANNUAL SURVEY CONDUCTED BY U.S. NEWS &amp; WORLD REPORT.</p> <p>VANDERBILT'S PEABODY COLLEGE OF EDUCATION AND HUMAN DEVELOPMENT WAS NAMED THE NO. 5 GRADUATE SCHOOL OF EDUCATION IN THE NATION AND NO. 1 RANKING FOR SPECIAL EDUCATION BY U.S. NEWS &amp; WORLD REPORT. VANDERBILT'S SCHOOL OF NURSING RANKED 8TH AMONG THE NATION'S TOP GRADUATE NURSING SCHOOLS. THE DOCTOR OF NURSING PRACTICE PROGRAM WAS RANKED 7TH, AND ITS MASTER'S ADULT-GERONTOLOGY, ACUTE CARE NURSE PRACTITIONER PROGRAM ROSE TO A NO. 1 RANKING. VANDERBILT'S GRADUATE PROGRAMS IN THE COLLEGE OF ARTS AND SCIENCE HAD HIGH RANKING THAT INCLUDED THE DEGREE IN PSYCHOLOGICAL SCIENCES WAS RANKED NO.12. VANDERBILT ONLINE EDUCATION DOCTORATE IN ORGANIZATIONAL LEADERSHIP RANKED NO. 1 BY FORTUNE.</p> <p>VANDERBILT'S SCHOOL OF MEDICINE RANKED 13TH FOR RESEARCH SCHOOLS OF MEDICINE IN THE NATION, THE LAW SCHOOL RANKED 17TH, THE VANDERBILT SCHOOL OF ENGINEERING RANKED 40TH, AND THE OWEN GRADUATE SCHOOL OF MANAGEMENT RANKED 25TH FOR GRADUATE BUSINESS SCHOOLS.</p> <p>FOR MORE INFORMATION REGARDING EDUCATION AT VANDERBILT, VISIT <a href="http://www.vanderbilt.edu">HTTP://WWW.VANDERBILT.EDU</a>.</p>
FORM 990, PART III, LINE 4B - ACADEMIC AND SCIENTIFIC RESEARCH	<p>VANDERBILT IS AN INTERNATIONALLY RECOGNIZED RESEARCH UNIVERSITY. A MAJORITY OF VANDERBILT'S RESEARCH FUNDING IS RECEIVED FROM THE FEDERAL GOVERNMENT. FUNDING IS ALSO RECEIVED FROM FOUNDATIONS, ASSOCIATIONS, CORPORATIONS, AND OTHER SOURCES. VANDERBILT'S RESEARCHERS ARE AT THE FOREFRONT OF POSING INNOVATIVE SOLUTIONS TO SOME OF THE MOST CHALLENGING QUESTIONS FACING THE WORLD TODAY.</p> <p>FOR MORE INFORMATION REGARDING RESEARCH AT VANDERBILT, VISIT <a href="http://research.vanderbilt.edu">HTTP://RESEARCH.VANDERBILT.EDU</a></p>
FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES	CA, CI, CH, CO, IV, HR, EZ, DA, EG, GM, GH, GR, HK, HU, IC, IN, ID, IS, JA, KE, KS, MI, MY, MP, MX, MO, WA, NZ, NI, NO, PE, RP, PL, PO, RS, SN, SI, SF, CE, WZ, SW, SZ, TW, TZ, TH, TS, TU, UG, UK, VM, ZA, ZI
FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	JOHN R. INGRAM AND MARK WILF - BUSINESS RELATIONSHIP JOHN R. INGRAM AND ADOLPHO BIRCH - BUSINESS RELATIONSHIP STEVE ERTEL, ERIC KOPSTAIN, AND BRETT SWEET - BUSINESS RELATIONSHIP CANDICE LEE AND BRETT SWEET - BUSINESS RELATIONSHIP ANDERS HALL AND RUBY SHELLAWAY - BUSINESS RELATIONSHIP
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE FORM 990 IS PREPARED BY VANDERBILT UNIVERSITY AND PROVIDED TO PRICEWATERHOUSECOOPERS, VANDERBILT UNIVERSITY'S INDEPENDENT ACCOUNTING FIRM FOR REVIEW. AFTER REVIEW BY PRICEWATERHOUSECOOPERS, VANDERBILT UNIVERSITY PROVIDES A DRAFT COPY OF THE FORM 990 AND ALL REQUIRED SCHEDULES FOR REVIEW TO ALL GENERAL OFFICERS, WHICH INCLUDES THE CHANCELLOR AND CHIEF FINANCIAL OFFICER. ONCE THIS REVIEW PROCESS IS COMPLETE, ALL TRUSTEES ARE PROVIDED ELECTRONIC ACCESS TO THE DRAFT FORM 990 AND ALL REQUIRED SCHEDULES FOR REVIEW. THE FINAL FORM 990 AND ALL REQUIRED SCHEDULES ARE MADE AVAILABLE TO THE FULL BOARD OF TRUST FOR REVIEW VIA BOARDBOOKS PRIOR TO THE FILING OF THE RETURN.

Return Reference - Identifier	Explanation
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	<p>UNDER THE VANDERBILT UNIVERSITY CONFLICT OF INTEREST AND COMMITMENT POLICY (THE "POLICY"), ALL BOARD OF TRUST MEMBERS, SENIOR EXECUTIVES, AND FACULTY, AND MOST STAFF ARE REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST IN ACCORDANCE WITH THE POLICY. VANDERBILT UNIVERSITY REQUIRES THAT FOR ANY FACULTY OR STAFF MEMBER DISCLOSING A POTENTIAL CONFLICT OF INTEREST, THE CONFLICT BE REVIEWED BY THE INDIVIDUAL'S DEAN OR THE DEAN'S DESIGNEE (FOR FACULTY) OR SUPERVISOR (FOR STAFF), AS WELL AS BY THE CONFLICT OF INTEREST AND COMMITMENT MANAGEMENT OFFICE, AND THE REPORTED CONFLICT BE MANAGED, REDUCED, OR ELIMINATED. THE RESPONSIBLE REVIEWER IS REQUIRED TO RESPOND THAT ANY RECOMMENDED MANAGEMENT PLAN HAS BEEN IMPLEMENTED OR THAT THE REPORTED CONFLICT NO LONGER EXISTS. FOR THOSE CONFLICTS IN WHICH VANDERBILT MAY HAVE AN INSTITUTIONAL INTEREST, THOSE IN WHICH HUMAN SUBJECT RESEARCH IS PERFORMED, OR THOSE DEEMED UNMANAGEABLE, THE UNIVERSITY CONFLICTS COMMITTEE REVIEWS AND DETERMINES APPROPRIATE ACTIONS.</p> <p>THE UNIVERSITY CONFLICTS COMMITTEE MEMBERS ARE APPOINTED BY THE CHANCELLOR AND ARE MADE UP OF REPRESENTATIVES FROM RELEVANT AREAS ACROSS THE UNIVERSITY INCLUDING FACULTY, AUDIT, RESEARCH, LEGAL, ADMINISTRATIVE, AND COMPLIANCE. AT LEAST ONE REPRESENTATIVE ON THE COMMITTEE IS A PERSON FROM OUTSIDE THE UNIVERSITY COMMUNITY. THE UNIVERSITY'S GENERAL COUNSEL SERVES AS THE CHAIR OF THE COMMITTEE. THE COMMITTEE REPORTS BI-ANNUALLY TO THE AUDIT COMMITTEE OF THE BOARD OF TRUST THE MATTERS BROUGHT BEFORE THE COMMITTEE AND THE RESULTING ACTIONS.</p> <p>BOARD OF TRUST MEMBERS AND SENIOR EXECUTIVES OF THE UNIVERSITY ALSO MUST COMPLETE ANNUAL CONFLICT OF INTEREST DISCLOSURES AND MANAGEMENT PLANS ARE DEVELOPED TO MANAGE, REDUCE, OR ELIMINATE ANY POTENTIAL CONFLICTS OF INTEREST. THOSE WITH DISCLOSED POTENTIAL CONFLICT OF INTEREST ARE PRESENTED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUST, ALONG WITH THEIR RESPECTIVE MANAGEMENT ACTION PLANS, WHERE APPLICABLE. MANAGEMENT PLANS MAY INCLUDE RESTRICTIONS ON MEMBERS SUCH AS RECUSING THEMSELVES DURING DELIBERATIONS AND DECISIONS IN WHICH A POTENTIAL CONFLICT MAY EXIST, WITH THE MINUTES OF THE MEETING REFLECTING THEIR RECUSAL. EMERITUS TRUSTEES ARE EXEMPT FROM THE DISCLOSURE REQUIREMENTS.</p> <p>ADDITIONALLY, ALL BOARD OF TRUST MEMBERS, SENIOR EXECUTIVES, AND FACULTY, AND MOST STAFF ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS AS THEY ARISE THROUGHOUT THE YEAR IN ACCORDANCE WITH THE POLICY. THE SAME PROCESSES NOTED ABOVE OCCUR FOR THESE DISCLOSURES.</p>
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	<p>TO ENSURE THAT VANDERBILT IS PAYING REASONABLE TOTAL COMPENSATION, IS NOT VIOLATING THE PRIVATE INUREMENT PROHIBITION, WHICH REQUIRES THAT NONE OF THE ORGANIZATION'S INCOME OR ASSETS UNREASONABLY BENEFIT ANY OF ITS TRUSTEES, OFFICERS, OR KEY EMPLOYEES, AND IS IN COMPLIANCE WITH INTERMEDIATE SANCTIONS PROVISIONS WITH RESPECT TO THE GENERAL OFFICERS, VANDERBILT'S BOARD OF TRUST HAS DESIGNATED A COMPENSATION COMMITTEE MADE UP OF OUTSIDE, INDEPENDENT, BOARD MEMBERS TO REVIEW AND APPROVE TOTAL COMPENSATION ANNUALLY FOR THE VICE CHANCELLORS, AND REVIEW AND APPROVE TOTAL COMPENSATION ANNUALLY FOR THE CHANCELLOR FOR RECOMMENDATION TO THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUST. THE COMMITTEE UTILIZES APPROPRIATE, NATIONALLY-RECOGNIZED CONSULTING FIRMS TO CONDUCT MARKET COMPENSATION ANALYSES, PROVIDE EXPERT INFORMATION, AND ISSUE REASONABLENESS OPINIONS REGARDING COMPARATIVE COMPENSATION NORMS, AND TO ENSURE COMPLIANCE WITH ALL INTERNAL REVENUE SERVICE RULES CONCERNING EXECUTIVE COMPENSATION, INCLUDING THE INTERNAL REVENUE CODE PROVISION RELATED TO INTERMEDIATE SANCTIONS, DEFERRED COMPENSATION, AND PRIVATE INUREMENT. THE COMPENSATION COMMITTEE REVIEWS THE EXECUTIVE COMPENSATION PHILOSOPHY AND AFFIRMS THAT IT IS IN LINE WITH THE BOARD'S EXPECTATIONS. THE COMPENSATION OF THE GENERAL OFFICERS IS DISCLOSED IN THE ANNUAL FORM 990, WHICH IS AVAILABLE TO THE PUBLIC IN ACCORDANCE WITH REGULATIONS SECTION 301.6104(D)-1 THROUGH 3. EACH YEAR, THE TOTAL COMPENSATION REVIEW AND RECOMMENDATIONS ARE RECORDED IN THE MINUTES OF THE COMPENSATION COMMITTEE MEETINGS. THE APPROVAL OF THE RECOMMENDATIONS FOR THE CHANCELLOR IS FURTHER RECORDED IN THE MINUTES OF THE EXECUTIVE COMMITTEE MEETINGS. THE FULL BOARD IS INFORMED ANNUALLY OF THE TOTAL COMPENSATION OF THE GENERAL OFFICERS DURING EXECUTIVE SESSION.</p>
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	VANDERBILT USES THE SAME PROCEDURES AS DESCRIBED IN RESPONSE TO PART VI, LINE 15A.
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	<p>VANDERBILT UNIVERSITY MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC THROUGH ITS BOARD OF TRUST WEBSITE LOCATED AT: <a href="http://www.vanderbilt.edu/boardoftrust">HTTP://WWW.VANDERBILT.EDU/BOARDOFTRUST</a>.</p> <p>VANDERBILT UNIVERSITY MAKES ITS CONFLICT-OF-INTEREST POLICY AVAILABLE TO THE PUBLIC THROUGH ITS COMPLIANCE PROGRAM WEBSITE LOCATED AT: <a href="https://www.vanderbilt.edu/generalcounsel/conflictinterest/">HTTPS://WWW.VANDERBILT.EDU/GENERALCOUNSEL/CONFLICTOFINTEREST/</a></p> <p>VANDERBILT UNIVERSITY MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH ITS WEBSITE LOCATED AT: <a href="https://finance.vanderbilt.edu/accounting/report/">HTTPS://FINANCE.VANDERBILT.EDU/ACCOUNTING/REPORT/</a></p>

Return Reference - Identifier	Explanation	
FORM 990, PART VII, SECTION A, LINE 1A, COLUMN (A) - CONTINUATION OF TITLES	- ANDERS W. HALL - VICE CHANCELLOR FOR INVESTMENTS AND CHIEF INVESTMENT OFFICER	
	- JERRY STACKHOUSE - HEAD MEN'S BASKETBALL COACH	
	- CLARK LEA - HEAD FOOTBALL COACH	
	- TIMOTHY C. CORBIN - HEAD BASEBALL COACH	
	- DANIEL DIERMEIER - CHANCELLOR	
	- DEREK MASON - FORMER HEAD FOOTBALL COACH	
	- TRAVIS W. SHORE - MANAGING DIRECTOR, INVESTMENTS	
	- BRETT C. SWEET - VICE CHANCELLOR FOR FINANCE, INFORMATION TECHNOLOGY AND CHIEF FINANCIAL OFFICER	
	- JOHN M. LUTZ - VICE CHANCELLOR FOR DEVELOPMENT AND ALUMNI RELATIONS	
	- SUSAN WENTE - FORMER PROVOST AND VICE CHANCELLOR FOR ACADEMIC AFFAIRS	
	- NICHOLAS S. ZEPPPOS - FORMER CHANCELLOR, CURRENT LAW PROFESSOR	
	- CANDICE S. LEE - VICE CHANCELLOR FOR ATHLETICS AND UNIVERSITY AFFAIRS AND ATHLETIC DIRECTOR	
	- LAWRENCE J. MARNETT - DEAN OF BASIC SCIENCES	
	- JOHN GEER - DEAN OF COLLEGE OF ARTS AND SCIENCE	
	- ERIC C. KOPSTAIN - VICE CHANCELLOR FOR ADMINISTRATION	
	- RUBY SHELLAWAY - VICE CHANCELLOR, GENERAL COUNSEL, AND UNIVERSITY SECRETARY	
	- C. CYBELE RAVER - PROVOST AND VICE CHANCELLOR FOR ACADEMIC AFFAIRS	
	- ANDRE L. CHURCHWELL - CHIEF DIVERSITY OFFICER AND VICE CHANCELLOR FOR EQUITY, DIVERSITY, AND INCLUSION	
	- MALCOLM TURNER - FORMER VICE CHANCELLOR FOR ATHLETICS AND UNIVERSITY AFFAIRS AND ATHLETICS DIRECTOR	
	- STEVE ERTEL - VICE CHANCELLOR FOR COMMUNICATIONS	
	- NATHAN GREEN - VICE CHANCELLOR FOR GOVERNMENT AND COMMUNITY RELATIONS	
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	(a) Description	(b) Amount
	CHANGE IN MINORITY INTEREST	- 11,747,664
	DECONSOLIDATED DISTRIBUTION	250,000

**SCHEDULE R  
(Form 990)**Department of the Treasury  
Internal Revenue ServiceName of the organization  
**VANDERBILT UNIVERSITY****Related Organizations and Unrelated Partnerships**

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

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021****Open to Public  
Inspection**Employer identification number  
**62-0476822****Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) DORE CAPITAL, LLC (26-4337602) 2100 WEST END AVE., SUITE 1000, NASHVILLE, TN 37203	INVESTMENT	DE	0	0	VU
(2) DORE CAPITAL REAL ESTATE, LLC (26-4581498) 2100 WEST END AVE., SUITE 1000, NASHVILLE, TN 37203	INVESTMENT	DE	0	0	VU
(3) STAR V PARTNERS, LLC 2100 WEST END AVE., SUITE 1000, NASHVILLE, TN 37203	INVESTMENT	TN	204,825,302	2,216,023,303	VU
(4) WEST TRACE, LLC (83-4051968) 2201 W END AVE, STE. 421, NASHVILLE, TN 37240-0001	HOSPITALITY OPERATIONS	TN	15,980,351	81,386,350	VU
(5) ROYAL TREE, LLC (84-3564256) 110 21ST AVENUE SOUTH, STE 900, NASHVILLE, TN 37203	HOLDING COMPANY	DE	0	34,778,887	VU
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) VANDERBILT STUDENT COMMUNICATIONS, INC. (23-7030713) 2301 VANDERBILT PLACE, NASHVILLE, TN 37235	SUPPORT ORG	TN	501(C)(3)	12 TYPE I	VU	✓	
(2) INGRAM CHARITABLE FUND, INC. (58-1916504) 4400 HARDING ROAD, 9TH FLOOR, NASHVILLE, TN 37203	SUPPORT ORG	TN	501(C)(3)	12 TYPE III-O	N/A		✓
(3)							
(4)							
(5)							
(6)							
(7)							



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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) (SEE STATEMENT)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) (SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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
<b>1</b> 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?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<input checked="" type="checkbox"/>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>f</b> Dividends from related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>g</b> Sale of assets to related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>h</b> Purchase of assets from related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>i</b> Exchange of assets with related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		<input checked="" type="checkbox"/>
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<input checked="" type="checkbox"/>	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<input checked="" type="checkbox"/>	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<input checked="" type="checkbox"/>	
<b>2</b> If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
ALTOS HYBRID 2 V, LLC	B	11,179,682	FMV
(1) ALTOS HYBRID 2 V, LLC	S	1,143,038	FMV
(2) COMMODORE SCOTTISH PATRON II, LP	S	259,532	FMV
(3) DORE CAPITAL, LP	S	12,210,000	FMV
(4) VALAR CO-INVEST 7 LP	B	15,000,000	FMV
(5) (SEE STATEMENT)			
(6)			

**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 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) .....													
(2) .....													
(3) .....													
(4) .....													
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(12) .....													
(13) .....													
(14) .....													
(15) .....													
(16) .....													

**Part III****Identification of Related Organizations Taxable as a Partnership** (continued)

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income related, unrelated, excluded from tax under sections 512-514	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) DORE CAPITAL, L.P. (26-4337679) 2100 WEST END., STE. 1000, NASHVILLE, TN 37203	INVESTMENT	DE	VU	EXCLUDED	10,786,746	25,034,213	✓			✓		60%
(2) DORE CAPITAL REAL ESTATE, L.P. (26-4581574) 2100 WEST END., STE. 1000, NASHVILLE, TN 37203	INVESTMENT	DE	VU	EXCLUDED	2,022,858	25,883,296	✓			✓		60%
(3) ALTOS HYBRID 2 V, LLC (82-2083773) 2882 SAND HILL ROAD, SUITE 100, MENLO PARK, CA 94025	INVESTMENT	DE	VU	EXCLUDED	1,419,390	22,320,848		✓			✓	100%
(4) VALAR CO-INVEST 7 LP (84-1990189) 915 BROADWAY, SUITE 1900, NEW YORK, NY 10010	INVESTMENT	DE	VU	EXCLUDED	0	5,629,160		✓			✓	100%
(5) VALAR CO-INVEST 9 LP (85-0669361) 915 BROADWAY, SUITE 1900, NEW YORK, NY 10010	INVESTMENT	DE	VU	EXCLUDED	0	3,992,085		✓			✓	100%
(6) PERISCOPE IBH HOLDINGS LLC (82-5263601) ONE NORTH WACKER DRIVE, SUITE 4050, CHICAGO, IL 60606	INVESTMENT	DE	VU	EXCLUDED	0	2,751,796		✓			✓	55.49%
(7) KAIROS CONTINUITY CC1, LLC (85-4253992) 31 BOND ST., FLOOR 6, NEW YORK, NY 10012	INVESTMENT	DE	VU	EXCLUDED	36,201	3,031,651		✓			✓	50.04%
(8) KAIROS CONTINUITY ALLOY1, LP (87-1658670) 31 BOND ST., FLOOR 6, NEW YORK, NY 10012	INVESTMENT	DE	VU	EXCLUDED	13,342	1,120,312		✓			✓	55.84%
(9) KAIROS CONTINUITY RH2, LP (87-3534251) 31 BOND ST., FLOOR 6, NEW YORK, NY 10012	INVESTMENT	DE	VU	EXCLUDED	0	3,028,863		✓			✓	57.97%
(10) KAIROS CONTINUITY CC2, LP (87-2347899) 31 BOND ST., FLOOR 6, NEW YORK, NY 10012	INVESTMENT	DE	VU	EXCLUDED	14,015	5,606,904		✓			✓	66.12%
(11) KAIROS CONTINUITY LS1, LP (87-1503746) 31 BOND ST., FLOOR 6, NEW YORK, NY 10012	INVESTMENT	DE	VU	EXCLUDED	0	2,560,774		✓			✓	72.14%

**Part IV****Identification of Related Organizations Taxable as a Corporation or Trust** (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) COMMODORE SCOTTISH PATRON II, LP 50 LOTHIAN ROAD, FESTIVAL SQUARE, EDINBURGH, SCOTLAND, AE	INVESTMENT	UNITED ARAB EMIRATES	VU	C CORPORATION	(314,999)	4,457,858	100%	✓	
(2) ELLISTON PARTNERS PO BOX 309, UGLAND HOUSE, GRAND CAYMAN, KY1-1104, CJ	INVESTMENT	CAYMAN ISLANDS	VU	C CORPORATION	0	0	100%	✓	
(3) EMERGENT PRO ALIA FUND, SUB FUND EMERGENT AFRICAN LAND FUND (98-0600835) 20, BOULEVARD EMMANUEL SERVAIS, LU	INVESTMENT	LUXEMBOURG	VU	C CORPORATION	0	0	79.6%	✓	
(4) PACIFIC HARBOR SPECIAL HOLDINGS, LTD. PO BOX 957, OFFSHORE INCORPORATIONS CENTRE, ROAD TOWN, TORTOLA, VI	INVESTMENT	BRITISH VIRGIN ISLANDS	VU	C CORPORATION	0	0	100%	✓	
(5) VANDERBILT LEGENDS CLUB, INC. (62-1429615) 1500 LEGENDS CLUB LANE, FRANKLIN, TN 37069	GOLF CLUB	TN	VU	C CORPORATION	9,828,057	26,511,620	100%	✓	
(6) CHARITABLE REMAINDER TRUSTS (111)	CHARITABLE TRUST	TN	VU	TRUST	N/A	N/A	N/A	✓	
(7) PERPETUAL TRUSTS (9)	CHARITABLE TRUST	TN	VU	TRUST	N/A	N/A	N/A	✓	
(8) CHARITABLE LEAD TRUSTS (2)	CHARITABLE TRUST	TN	VU	TRUST	N/A	N/A	N/A	✓	

**Part V****Transactions with Related Organizations** (continued)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount Involved	(d) Method of determining amount involved
(6) KAIROS CONTINUITY ALLOY1, LP (ALLOY HEALTH SERIES SEED CO-INV)	B	2,183,506	FMV
(7) KAIROS CONTINUITY RH2, LP (RHINO SPV CO-INVESTMENT)	B	3,030,457	FMV
(8) KAIROS CONTINUITY CC2, LP (CERA CARE CONVERTIBLE NOTE COINV)	B	5,560,000	FMV
(9) KAIROS CONTINUITY LS1, LP (LITTLE SPOON SERIES B CO-INV)	B	2,568,286	FMV
(10) VANDERBILT LEGENDS CLUB, INC.	A	418,130	FMV
(11) VANDERBILT LEGENDS CLUB, INC.	D	4,439,304	FMV
(12) VANDERBILT LEGENDS CLUB, INC.	F	250,000	FMV
(13) VANDERBILT LEGENDS CLUB, INC.	P	115,638	FMV
(14) VANDERBILT STUDENT COMMUNICATIONS, INC.	R	570,379	FMV
(15) VANDERBILT STUDENT COMMUNICATIONS, INC.	O	479,315	FMV
(16) VANDERBILT STUDENT COMMUNICATIONS, INC.	Q	300,741	FMV
(17) CHARITABLE LEAD TRUST (1)	C	97,195	FMV
(18) CHARITABLE LEAD TRUST (1)	S	263,874	FMV
(19) CHARITABLE REMAINDER TRUST (1)	C	56,848	FMV
(20) CHARITABLE REMAINDER TRUST (10)	S	9,968,794	FMV
(21) PERPETUAL TRUSTS (5)	S	1,119,986	FMV

## Part VII

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

Return Reference - Identifier	Explanation
SCHEDULE R, PART V, LINE 2(C) -	THE AMOUNTS REPORTED ARE DERIVED FROM THE BOOKS AND RECORDS OF VANDERBILT, WHICH ARE MAINTAINED ON AN ACCRUAL BASIS IN ACCORDANCE WITH U.S. GENERALLY ACCEPTED ACCOUNTING PRINCIPLES. VALUATION OF THE AMOUNTS REPORTED IN SCHEDULE R, PART V, COLUMN C IS CONSISTENT WITH THE VALUATION REFLECTED IN THE UNIVERSITY'S CONSOLIDATED AUDITED FINANCIAL STATEMENTS.