

EXTENDED TO MAY 15, 2017

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.

▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**  
Open to Public  
Inspection**A** For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization**THE HOWARD UNIVERSITY**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

**2400 6TH STREET NW**

Room/suite

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

**WASHINGTON, DC 20059****F** Name and address of principal officer: **MICHAEL MASCH****SAME AS C ABOVE****D** Employer identification number**53-0204707****E** Telephone number**(202) 806-6100****G** Gross receipts \$ **1,239,643,573.****H(a)** Is this a group returnfor subordinates? ..... ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.HOWARD.EDU****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1867****M** State of legal domicile: **DC****Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>WE EDUCATE STUDENTS, DEVELOP PROFESSIONALS, CONDUCT RESEARCH, AND SERVE PATIENTS.</b>
	<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>33</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>31</b>
	<b>5</b>	Total number of individuals employed in calendar year 2015 (Part V, line 2a) ..... <b>7909</b>
	<b>6</b>	Total number of volunteers (estimate if necessary) ..... <b>309</b>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>9,992,000.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34 ..... <b>-1,157,513.</b>	
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h) ..... <b>224,317,000.</b>
	<b>9</b>	Program service revenue (Part VIII, line 2g) ..... <b>690,736,000.</b>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>41,814,000.</b>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>13,750,000.</b>
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>970,617,000.</b>
	<b>Expenses</b>	<b>13</b>
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b>
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>465,265,251.</b>
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>72,000.</b>
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>4,124,333.</b>
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ..... <b>429,788,531.</b>
<b>18</b>		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>1,011,947,000.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12 ..... <b>-41,330,000.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16) ..... <b>1,486,415,000.</b>
	<b>21</b>	Total liabilities (Part X, line 26) ..... <b>907,210,000.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20 ..... <b>579,205,000.</b>

**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>	Signature of officer	Date			
	<b>MICHAEL MASCH, CFO AND TREASURER</b> Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	<b>SHEILA EICHELBERGER</b>		<b>05/11/17</b>		<b>P00743897</b>
<b>Paid Preparer Use Only</b>	Firm's name ▶ <b>SB &amp; COMPANY, LLC</b>	Firm's EIN ▶ <b>25-1306171</b>			
	Firm's address ▶ <b>200 INTERNATIONAL CIRCLE, SUITE 5500 HUNT VALLEY, MD 21030</b>	Phone no. (410) <b>584-0060</b>			

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

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE HOWARD UNIVERSITY WAS ESTABLISHED BY AN ACT OF CONGRESS IN 1867. THE UNIVERSITY IS AN INSTITUTION THAT EDUCATES STUDENTS, DEVELOPS PROFESSIONALS, CONDUCTS RESEARCH, AND SERVES PATIENTS THROUGH 12 SCHOOLS OF HIGHER EDUCATION AND AN ACADEMIC MEDICAL CENTER.

**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 \$ 448,701,904. including grants of \$ 106,793,326. ) (Revenue \$ 313,266,000. )  
EDUCATION, GENERAL/OTHER - HOWARD UNIVERSITY IS A COMPREHENSIVE RESEARCH-ORIENTED HISTORICALLY BLACK PRIVATE UNIVERSITY PROVIDING AN EDUCATIONAL EXPERIENCE OF EXCEPTIONAL QUALITY TO STUDENTS OF HIGH ACADEMIC POTENTIAL WITH PARTICULAR EMPHASIS UPON THE PROVISION OF EDUCATIONAL OPPORTUNITIES TO ALL STUDENTS. HOWARD UNIVERSITY IS THE NATION'S TOP PRODUCER OF MINORITY LAWYERS, DENTISTS, PHYSICIANS AND AFRICAN AMERICAN PHDS IN THE SCIENCE AND TECHNOLOGY FIELDS. THE UNIVERSITY SERVES A COMMUNITY OF APPROXIMATELY 10,000 STUDENTS.

**4b** (Code: ) (Expenses \$ 233,537,348. including grants of \$ ) (Revenue \$ 280,969,000. )  
A PRIVATE, NONPROFIT INSTITUTION, HOWARD UNIVERSITY HOSPITAL IS THE NATION'S ONLY TEACHING HOSPITAL LOCATED ON THE CAMPUS OF A HISTORICALLY BLACK UNIVERSITY. IT OFFERS MEDICAL STUDENTS A SUPERIOR LEARNING ENVIRONMENT AND OPPORTUNITIES TO OBSERVE OR PARTICIPATE IN CLINICAL AND RESEARCH WORK WITH PROFESSIONALS THAT UNIQUELY ADDRESSES THE SPECIAL HEALTH CARE NEEDS OF MEDICALLY UNDERSERVED COMMUNITIES. HOWARD UNIVERSITY HOSPITAL ADMITS PATIENTS REGARDLESS OF THEIR ABILITY TO PAY.

**4c** (Code: ) (Expenses \$ 67,236,000. including grants of \$ ) (Revenue \$ 42,581,000. )  
THE UNIVERSITY OFFERS EDUCATIONAL SUPPORT THROUGH ITS AUXILIARY SERVICES FOR THE BENEFIT OF FACULTY, STAFF AND STUDENTS AND TO COMPLEMENT THE QUALITY OF THE ACADEMIC LIFE. AUXILIARY SERVICES INCLUDE STUDENT HOUSING, FOOD SERVICES, A BOOKSTORE, PARKING, TRANSPORTATION SERVICES AND A PUBLIC TELEVISION STATION.

**4d** Other program services (Describe in Schedule O.)

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

**4e** Total program service expenses **749,475,252.**

**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)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>2</b> X	
<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? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<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? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b>	X
<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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<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? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b>	X
<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? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b> X	
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b> X	
<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? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> X	
<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? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<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? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b> X	
<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? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<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? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<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)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b> X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> X	
<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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b> X	
<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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b>	X
<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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b> X	
<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? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b>	X
<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? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X

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

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	<b>20a</b> X	
<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> X	
<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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>21</b> X	
<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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b> X	
<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? <i>If "Yes," complete Schedule J</i> .....	<b>23</b> X	
<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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	<b>24a</b> X	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	X
<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>	X
<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>	X
<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? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<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? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b> X	
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<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? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	<b>34</b> X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b> X	
<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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>35b</b> X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	X
<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? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in 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> X	

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**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck 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> 1067		
<b>b</b> Enter the number of Forms W-2G included in 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>	X	
<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> 7909		
<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>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	<b>3b</b>	X	
<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>	X	
<b>b</b> If "Yes," enter the name of the foreign country: <b>NIGERIA, MALAWI, SOUTH AFRICA</b> 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>		X
<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>		X
<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>		X
<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 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>	X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	X	
<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>		X
<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>		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		X
<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 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 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 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 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 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 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>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>		

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**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 in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒ **X**

**Section A. Governing Body and Management**

	1a	1b	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year ..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	33			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent .....		31		
<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? .....			2	X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .....			3	X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....			4	X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? .....			5	X
<b>6</b> Did the organization have members or stockholders? .....			6	X
<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? .....			7a	X
<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? .....			7b	X
<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? .....			8a	X
<b>b</b> Each committee with authority to act on behalf of the governing body? .....			8b	X
<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 in Schedule O .....			9	X

**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? .....	10a	X
<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? .....	10b	
<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? .....	11a	X
<b>b</b> Describe in 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 .....	12a	X
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	12b	X
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done .....	12c	X
<b>13</b> Did the organization have a written whistleblower policy? .....	13	X
<b>14</b> Did the organization have a written document retention and destruction policy? .....	14	X
<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 .....	15a	X
<b>b</b> Other officers or key employees of the organization .....	15b	X
If "Yes" to line 15a or 15b, describe the process in 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? .....	16a	X
<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? .....	16b	X

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► **DC, NY**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 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 in Schedule O)

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

**20** State the name, address, and telephone number of the person who possesses the organization's books and records: ►  
**MICHAEL MASCH - 202-806-2411**  
**2244 10TH STREET NW, WASHINGTON, DC 20059**

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ 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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STACEY J. MOBLEY, ESQ. CHAIRMAN	1.00	X		X				0.	0.	0.
(2) MR. ROBERT L. LUMPKINS VICE CHAIR	1.00	X		X				0.	0.	0.
(3) MRS. BENAREE P. WILEY VICE CHAIR	1.00	X		X				0.	0.	0.
(4) MR. ADDISON BARRY RAND IMMEDIATE PAST CHAIRMAN	1.00	X		X				0.	0.	0.
(5) MS. DEBBIE K. ALLEN BOARD TRUSTEE	1.00	X						0.	0.	0.
(6) LARKIN ARNOLD, JR., ESQ. BOARD TRUSTEE	1.00	X						0.	0.	0.
(7) CHARLES M. BOYD, MD BOARD TRUSTEE	1.00	X						0.	0.	0.
(8) MR. CHRISTOPHER N. CROSS BOARD TRUSTEE	1.00	X						0.	0.	0.
(9) HAROLD P. FREEMAN, MD BOARD TRUSTEE	1.00	X						0.	0.	0.
(10) MR. GODFREY GILL BOARD TRUSTEE	1.00	X						0.	0.	0.
(11) MR. RICHARD GOODMAN BOARD TRUSTEE	1.00	X						0.	0.	0.
(12) MS. LESLIE D. HALE BOARD TRUSTEE	1.00	X						0.	0.	0.
(13) MS. AMY S. HILLIARD BOARD TRUSTEE	1.00	X						0.	0.	0.
(14) DR. DANETTE G. HOWARD BOARD TRUSTEE	1.00	X						0.	0.	0.
(15) THE HONORABLE ALPHONSO JACKSON BOARD TRUSTEE	1.00	X						0.	0.	0.
(16) MR. NORMAN K. JENKINS BOARD TRUSTEE	1.00	X						0.	0.	0.
(17) THE HONORABLE MARIE C. JOHNS BOARD TRUSTEE	1.00	X						0.	0.	0.

**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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MS. BRITTANY JOHNSON BOARD TRUSTEE	1.00	X						0.	0.	0.
(19) DR. MARIAN JOHNSON-THOMPSON BOARD TRUSTEE	1.00	X						0.	0.	0.
(20) MR. WILLIAM V. KEENE BOARD TRUSTEE	1.00	X						0.	0.	0.
(21) CHARISSE R. LILLIE, ESQ. BOARD TRUSTEE	1.00	X						0.	0.	0.
(22) MR. MARK A. L. MASON BOARD TRUSTEE	1.00	X						0.	0.	0.
(23) DR. LAURENCE C. MORSE BOARD TRUSTEE	1.00	X						0.	0.	0.
(24) MR. GERALD D. PROTHRO BOARD TRUSTEE	1.00	X						0.	0.	0.
(25) MS. PHYLCIA RASHAD BOARD TRUSTEE	1.00	X						0.	0.	0.
(26) THE HONORABLE M. KASIM REED BOARD TRUSTEE	1.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								7,020,881.	0.	633,138.
<b>d Total (add lines 1b and 1c)</b>								7,020,881.	0.	633,138.

**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

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- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

**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
THOMPSON FACILITIES SERVICES LLC, 1641 BUSINESS CENTER DR., SUITE 200, RESTON, VA	FACILITY MANAGEMENT SERVICES	30,954,157.
SODEXO INC. & ASSOCIATES, 9801 WASHINGTONIAN BLVD, GAITHERSBURG, MD 20878	FOOD SERVICES FOR STUDENTS	13,194,574.
TURNER CONSTRUCTION CORP 3865 WILSON BOULEVARD, ARLINGTON, VA 22203	CONSTRUCTION SERVICES	11,031,016.
PALADIN - HOWARD MANAGEMENT LLC, 2121 ROSECRANS AVENUE, SUITE 2320, EL SEGUNDO,	HOSPITAL MANAGEMENT SERVICES	5,003,854.
CERNER HEALTH SERVICES, INC 51 VALLEY STREAM PARKWAY, MALVERN, PA 19355	HEALTHCARE RELATED SERVICES	4,203,432.

**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

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SEE PART VII, SECTION A CONTINUATION SHEETS

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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 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			
(27) THE HON. RONALD A. ROSENFELD BOARD TRUSTEE	1.00	X						0.	0.	0.
(28) REED V. TUCKSON, MD BOARD TRUSTEE	1.00	X						0.	0.	0.
(29) THE HON. FRANKIE M. FREEMAN BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(30) MR. EARL G. GRAVES, SR. BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(31) DR. JOHN E. JACOB CHAIRMAN EMERITUS	1.00	X						0.	0.	0.
(32) VERNON E. JORDAN, JR., ESQ. BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(33) CHARLES MCDONALD, MD BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(34) THE HON. GABRIELLE K. MCDONALD BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(35) RICHARD D. PARSONS, ESQ. BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(36) MARTIN D. PAYSON, ESQ. BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(37) GENERAL COLIN L. POWELL, USA (RET) BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(38) MR. FRANK SAVAGE CHAIRMAN EMERITUS	1.00	X						0.	0.	0.
(39) WAYMAN F. SMITH III, ESQ. CHAIRMAN EMERITUS	1.00	X						0.	0.	0.
(40) THE HONORABLE L. DOUGLAS WILDER BOARD TRUSTEE EMERITI	1.00	X						0.	0.	0.
(41) DR. MOSES GARUBA FACULTY TRUSTEE	1.00	X						138,931.	0.	28,914.
(42) GEORGE LITTLETON FACULTY TRUSTEE	40.00	X						112,011.	0.	27,360.
(43) WAYNE A.I. FREDERICK, MD PRESIDENT	40.00	X		X				1,029,671.	0.	40,651.
(44) MR. MICHAEL MASCH CHIEF FINANCIAL OFFICER	40.00			X				201,923.	0.	24,862.
(45) FLORENCE PRIOLEAU, ESQ. GENERAL COUNSEL	40.00			X				287,584.	0.	30,252.
(46) DR. ANTHONY WUTOH PROVOST, CAO FROM 07/15	40.00			X				299,712.	0.	39,262.
Total to Part VII, Section A, line 1c										

**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 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			
(47) MS. LAURA JACK VP FOR DEVELOPMENT FROM 07/15	40.00			X				155,885.	0.	20,990.
(48) DR. CONSTANCE ELLISON VP FOR STUDENT AFFAIRS ENDED 02/16	40.00			X				185,000.	0.	24,006.
(49) MS. GRACIA HILLMAN VICE PRESIDENT OF EXTERNAL	40.00			X				235,000.	0.	27,318.
(50) MS. CAROLYN BOSTICK VP OF HUMAN RESOURCES	40.00			X				167,865.	0.	21,991.
(51) MR. KENNETH HOLMES VP FOR STUDEN AFFAIRS FROM 02/16	40.00			X				0.	0.	0.
(52) REBAT HALDER, MD CHAIR OF DERMATOLOGY	40.00				X			510,046.	0.	31,823.
(53) DAMIREZ FOSSETT, MD CHAIR OF NEUROSURGERY	40.00				X			510,800.	0.	40,294.
(54) EDWARD CORNWELL, MD SURGEON-IN-CHIEF	40.00				X			825,614.	0.	40,651.
(55) NAM NGUYEN, MD CHAIR OF RADIATION THERAPY	40.00				X			500,000.	0.	31,177.
(56) CHILEDUM AHAGHOTU, MD ASSISTANT PROFESSOR OF UROLOGY	40.00				X			485,700.	0.	41,775.
(57) DR. SIDNEY RIBEAU FORMER PRESIDENT	40.00					X		299,948.	0.	40,551.
(58) DR. MICHAEL WINSTON FORMER PROVOST ENDED 06/15	40.00					X		319,651.	0.	39,535.
(59) MS. NESTA BERNARD FORMER VP FOR DEVE RETIRED 08/15	40.00					X		320,540.	0.	26,053.
(60) DR. BARBARA GRIFFIN FORMER VP STUDENT AFFAIRS	40.00					X		185,000.	0.	32,916.
(61) ARTIS HAMPSHIRE-COWAN, ESQ. FORMER SENIOR VP AND SECRETARY	40.00					X		250,000.	0.	22,757.
Total to Part VII, Section A, line 1c								7,020,881.		633,138.

**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>1 a</b> Federated campaigns .....	<b>1a</b>						
	<b>b</b> Membership dues .....	<b>1b</b>						
	<b>c</b> Fundraising events .....	<b>1c</b>	434,038.					
	<b>d</b> Related organizations .....	<b>1d</b>						
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	221,821,000.					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	9,552,039.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....							
	<b>h Total.</b> Add lines 1a-1f .....				231,807,077.			
<b>Program Service Revenue</b>	<b>2 a</b> ACADEMIC SERVICES .....	<b>Business Code</b>	611710	313,266,000.	313,266,000.			
	<b>b</b> PATIENT SERVICES .....		624100	280,969,000.	280,969,000.			
	<b>c</b> AUXILIARY SERVICES .....		611710	52,481,000.	42,581,000.	9,900,000.		
	<b>d</b> .....							
	<b>e</b> .....							
	<b>f</b> All other program service revenue .....							
	<b>g Total.</b> Add lines 2a-2f .....				646,716,000.			
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			7,997,000.		92,000.	7,905,000.
<b>4</b> Income from investment of tax-exempt bond proceeds .....								
<b>5</b> Royalties .....								
<b>6 a</b> Gross rents .....		(i) Real	(ii) Personal					
		1,217,000.	25,000.					
<b>b</b> Less: rental expenses .....			2,965,000.					0.
<b>c</b> Rental income or (loss) .....			-1,748,000.					25,000.
<b>d</b> Net rental income or (loss) .....				-1,723,000.			-1,723,000.	
<b>7 a</b> Gross amount from sales of assets other than inventory .....		(i) Securities	(ii) Other					
		336,095,000.						
<b>b</b> Less: cost or other basis and sales expenses .....			320,140,000.					
<b>c</b> Gain or (loss) .....			15,955,000.					
<b>d</b> Net gain or (loss) .....				15,955,000.			15,955,000.	
<b>8 a</b> Gross income from fundraising events (not including \$ 434,038. of contributions reported on line 1c). See Part IV, line 18 .....		<b>a</b>	568,923.					
<b>b</b> Less: direct expenses .....		<b>b</b>	565,573.					
<b>c</b> Net income or (loss) from fundraising events .....								3,350.
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....		<b>a</b>						
<b>b</b> Less: direct expenses .....		<b>b</b>						
<b>c</b> Net income or (loss) from gaming activities .....								
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>							
<b>b</b> Less: cost of goods sold .....	<b>b</b>							
<b>c</b> Net income or (loss) from sales of inventory .....								
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
<b>11 a</b> OTHER REVENUE .....		900099	15,217,573.			15,217,573.		
<b>b</b> .....								
<b>c</b> .....								
<b>d</b> All other revenue .....								
<b>e Total.</b> Add lines 11a-11d .....				15,217,573.				
<b>12 Total revenue.</b> See instructions. ....				915,973,000.	636,816,000.	9,992,000.	37,357,923.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,359,283.	5,359,283.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	91,347,559.	91,347,559.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,086,484.	10,086,484.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	8,664,673.		8,259,002.	405,671.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	339,836,800.	306,029,087.	32,084,307.	1,723,406.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,523,785.	3,636,219.	864,416.	23,150.
9 Other employee benefits	42,462,430.	40,089,559.	2,284,282.	88,589.
10 Payroll taxes	23,126,047.	20,436,545.	2,413,958.	275,544.
11 Fees for services (non-employees):				
a Management	10,043,913.	4,974,044.	5,069,869.	
b Legal	1,500,042.	904,197.	595,845.	
c Accounting	4,787,623.	461,775.	4,325,848.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,419,000.		3,419,000.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	82,012,562.	61,994,373.	19,352,828.	665,361.
12 Advertising and promotion	1,259,956.	992,433.	267,523.	
13 Office expenses	59,719,477.	31,383,718.	28,335,759.	
14 Information technology	7,763,103.	1,916,575.	5,749,504.	97,024.
15 Royalties	4,150,811.	3,160,221.	869,316.	121,274.
16 Occupancy	25,583,512.	24,817,577.	632,228.	133,707.
17 Travel	7,806,920.	7,029,486.	694,238.	83,196.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,131,051.	3,402,536.	728,515.	
20 Interest	25,133,987.	21,939,400.	3,194,587.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	44,883,331.	40,549,673.	4,333,658.	0.
23 Insurance	21,969,055.	19,827,981.	2,141,074.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>BAD DEBT EXPENSE</b>	28,169,245.	20,057,420.	8,111,825.	
b <b>TRAINEE EXPENSE</b>	13,659,435.	13,636,228.	23,207.	
c <b>FEES (DUES, BANK)</b>	9,104,796.	6,895,722.	1,888,648.	320,426.
d <b>RESTRUCTURING</b>	6,254,000.		6,254,000.	
e All other expenses	10,351,120.	8,547,157.	1,616,978.	186,985.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	897,110,000.	749,475,252.	143,510,415.	4,124,333.
26 <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 ☐ 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 .....	22,522,000.	<b>1</b>	45,294,000.
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....	15,886,000.	<b>3</b>	15,475,000.
	<b>4</b> Accounts receivable, net .....	88,643,000.	<b>4</b>	197,179,000.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	12,732,000.	<b>7</b>	9,786,000.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	3,568,000.
	<b>9</b> Prepaid expenses and deferred charges .....	22,061,000.	<b>9</b>	10,387,000.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 1604199000.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1027746000.		
	<b>11</b> Investments - publicly traded securities .....	619,743,000.	<b>10c</b>	576,453,000.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	568,562,000.	<b>11</b>	556,657,000.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	106,531,000.	<b>12</b>	95,880,000.
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	29,735,000.	<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	1486415000.	<b>15</b>	59,772,000.	
<b>17</b> Accounts payable and accrued expenses .....	206,788,000.	<b>16</b>	1570451000.	
<b>18</b> Grants payable .....		<b>17</b>	167,090,000.	
<b>19</b> Deferred revenue .....	14,081,000.	<b>18</b>		
<b>20</b> Tax-exempt bond liabilities .....	292,853,000.	<b>19</b>	123,057,000.	
<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>20</b>	232,727,000.	
<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>21</b>		
<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>22</b>		
<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	132,459,000.	<b>23</b>	154,684,000.	
<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 .....	261,029,000.	<b>24</b>	88,710,000.	
<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	907,210,000.	<b>25</b>	284,068,000.	
<b>27</b> <b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>		<b>26</b>	1050336000.	
<b>28</b> Unrestricted net assets .....	200,180,000.	<b>27</b>	155,513,000.	
<b>29</b> Temporarily restricted net assets .....	250,919,000.	<b>28</b>	236,353,000.	
<b>30</b> Permanently restricted net assets .....	128,106,000.	<b>29</b>	128,249,000.	
<b>31</b> <b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
<b>32</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
<b>33</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>		
<b>34</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
<b>35</b> Total net assets or fund balances .....	579,205,000.	<b>33</b>	520,115,000.	
<b>36</b> Total liabilities and net assets/fund balances .....	1486415000.	<b>34</b>	1570451000.	

Form 990 (2015)

**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>	915,973,000.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	897,110,000.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	18,863,000.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	579,205,000.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-36,720,000.
<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 in Schedule O)	<b>9</b>	-41,233,000.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	520,115,000.

**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 in 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		<input checked="" type="checkbox"/>
<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	<input checked="" type="checkbox"/>	
<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 in Schedule O.	<input checked="" type="checkbox"/>	
<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? _____	<input checked="" type="checkbox"/>	
<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 in Schedule O and describe any steps taken to undergo such audits _____	<input checked="" type="checkbox"/>	

Form 990 (2015)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Name of the organization

THE HOWARD UNIVERSITY

Employer identification number

53-0204707

**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 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☒ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- 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 1-9 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		
<b>Total</b>						

**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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five 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 2015 (line 6, column (f) divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2014 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2015.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, 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 test - 2014.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
<input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2015.</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 - 2014.</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"/>		

Schedule A (Form 990 or 990-EZ) 2015



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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 in 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.)						

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

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

<b>15</b> Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2014 Schedule A, Part III, line 15 .....	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2014 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

**b 33 1/3% support tests - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ..... ☐

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

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of 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 Part VI 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 Part VI 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 (b) and (c) 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 Part VI 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 Part VI 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 11a or 11b in Part I, answer (b) and (c) 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 Part VI 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 Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b</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</b> <b>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 Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<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 Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<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 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 in (b) and (c) below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in (a) above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<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 Part VI 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 Part VI 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 Part VI 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 in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
<b>3</b>		

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

	Yes	No
<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 line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) 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 Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) 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? Provide details in Part VI.		
<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 Part VI 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. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2015

**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>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7</b> <b>Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2015 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
<b>1</b> Distributable amount for 2015 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015:			
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b> From 2013			
<b>e</b> From 2014			
<b>f</b> <b>Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<b>i</b> Carryover from 2010 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2015 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
<b>6</b> Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
<b>7</b> <b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b>			
<b>c</b> Excess from 2013			
<b>d</b> Excess from 2014			
<b>e</b> Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

## Part VI

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

(See instructions.)

**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.**▶ **Information about Schedule D (Form 990) and its instructions is at** [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**  
**Open to Public**  
**Inspection****Name of the organization**

THE HOWARD UNIVERSITY

**Employer identification number**

53-0204707

**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).

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

☐ Protection of natural habitat ☒ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a 1
b Total acreage restricted by conservation easements .....	2b 0.00
c Number of conservation easements on a certified historic structure included in (a) .....	2c 1
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d 1

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 ▶ 1

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☒ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 27

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 1,700.

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☒ Yes ☐ No

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

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

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

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

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

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

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

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

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

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

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

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

- a ☐ Public exhibition d ☐ Loan or exchange programs  
 b ☒ Scholarly research e ☐ Other \_\_\_\_\_  
 c ☒ Preservation for future generations

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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
1a Beginning of year balance	594,064,000.	595,307,000.	517,525,000.	464,305,000.	476,695,000.
b Contributions	10,557,000.	4,435,000.	5,004,000.	4,957,000.	5,294,000.
c Net investment earnings, gains, and losses	-13,320,000.	4,862,000.	85,244,000.	58,581,000.	-5,147,000.
d Grants or scholarships	14,274,000.	13,717,000.	13,096,000.	12,512,000.	12,779,000.
e Other expenditures for facilities and programs	-4,407,000.	-3,177,000.	-630,000.	-2,194,000.	-242,000.
f Administrative expenses					
g End of year balance	581,434,000.	594,064,000.	595,307,000.	517,525,000.	464,305,000.

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

- a Board designated or quasi-endowment ☒ 52.51 %  
 b Permanent endowment ☒ 15.25 %  
 c Temporarily restricted endowment ☒ 32.24 %

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

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

- (i) unrelated organizations  
 (ii) related organizations

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

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
1a Land		27,911,000.		27,911,000.
b Buildings		867,726,000.	486,979,000.	380,747,000.
c Leasehold improvements		29,970,000.	27,584,000.	2,386,000.
d Equipment		394,106,000.	320,108,000.	73,998,000.
e Other		284,486,000.	193,075,000.	91,411,000.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				576,453,000.

Schedule D (Form 990) 2015



**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) PRIVATE EQUITY AND		
(B) VENTURE CAPITAL	78,680,000.	END-OF-YEAR MARKET VALUE
(C) REAL ESTATE	17,113,000.	END-OF-YEAR MARKET VALUE
(D) HEDGE FUNDS-LEVEL 3	87,000.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	95,880,000.	

**Part VIII Investments - Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (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) UNDERFUNDED DEFINED BENEFIT PLANS	166,678,000.	
(3) RESERVE SELF-INSURED LIABILITIES	87,211,000.	
(4) REFUNDABLE ADVANCES UNDER US GOV'T	6,390,000.	
(5) ENVIRONMENTAL LIABILITIES	8,887,000.	
(6) DUE TO PROVIDENT	5,977,000.	
(7) UNCLAIMED PROPERTY	3,499,000.	
(8) STUDENT DEPOSITS AND REFUNDS	2,578,000.	
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	284,068,000.	

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

Schedule D (Form 990) 2015

**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>	712,410,000.
<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>	-36,720,000.
<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>	-41,233,000.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-77,953,000.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	790,363,000.
<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>	3,419,000.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	122,191,000.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	125,610,000.
<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>	915,973,000.

**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>	771,500,000.
<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>	3,531,000.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	3,531,000.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	767,969,000.
<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>	3,419,000.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	125,722,000.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	129,141,000.
<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>	897,110,000.

**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.

**PART II, LINE 9:**

THE ORGANIZATION DOES NOT REPORT ITS CONSERVATION EASEMENTS IN ITS FINANCIAL STATEMENTS.

**PART III, LINE 4:**

THE UNIVERSITY'S COLLECTIONS OF ART, HISTORICAL TREASURES, AND OTHER SIMILAR ASSETS INCLUDE A VARIETY OF ARTIFACTS AS WELL AS SCHOLARLY PAPERS AND ARCHIVES. THESE ITEMS ARE HOUSED IN VARIOUS FACILITIES AROUND CAMPUS AND THEIR PRESERVATION IS FOR THE BENEFIT OF FUTURE GENERATIONS.

**PART V, LINE 4:**

THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUND IS TO SUPPLY A

**Part XIII** Supplemental Information (continued)

SOURCE OF INCOME FOR OPERATIONS, SCHOLARSHIPS, PROFESSORSHIPS, STUDENT LOANS, AND OTHER PURPOSES IN ORDER TO ADVANCE THE ORGANIZATION'S MISSION AND TAX-EXEMPT PURPOSE.

## PART X, LINE 2:

HOWARD IS RECOGNIZED AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE (THE CODE) AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) WHEREBY ONLY UNRELATED BUSINESS INCOME, AS DEFINED BY SECTION 512(A)(1) OF THE CODE, IS SUBJECT TO FEDERAL INCOME TAX. ANY UNRELATED BUSINESS INCOME TAX GENERATED BY HOWARD IS RECORDED AS INCOME TAX USING THE LIABILITY METHOD UNDER WHICH DEFERRED TAX ASSETS AND LIABILITIES ARE DETERMINED BASED ON THE DIFFERENCES BETWEEN THE FINANCIAL ACCOUNTING AND TAX BASIS OF ASSETS AND LIABILITIES. DEFERRED TAX ASSETS OR LIABILITIES AT THE END OF EACH PERIOD ARE DETERMINED USING THE CURRENTLY ENACTED TAX RATE EXPECTED TO APPLY TO TAXABLE INCOME IN THE PERIOD THAT THE DEFERRED TAX ASSET OR LIABILITY IS EXPECTED TO BE REALIZED OR TO BE SETTLED. AS OF JUNE 30, 2016, 2015 AND 2014, HOWARD HAD NO NET UNRELATED BUSINESS INCOME AND THEREFORE HAD NO DEFERRED TAX ASSETS OR LIABILITIES. IN ADDITION, HOWARD ANALYZED ITS TAX POSITIONS FOR THE YEARS ENDED JUNE 30, 2016, 2015 AND 2014, AND DETERMINED THAT THERE WERE NO UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL IMPACT ON HOWARD'S CONSOLIDATED FINANCIAL STATEMENTS.

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

UNREALIZED CHANGE IN FUNDED STATUS OF DEFINED BENEFIT

PENSION PLAN -40,712,000.

UNREALIZED CHANGE IN OBLIGATION FOR POST-RETIREMENT BENEFIT

PLAN -19,244,000.

**Part XIII** Supplemental Information (continued)

## UNREALIZED CHANGE IN OBLIGATION FOR SUPPLEMENTAL RETIREMENT

BENEFIT PLAN	142,000.
GAIN ON DISPOSAL OF PROPERTY	18,581,000.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-41,233,000.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

CHARITY CARE	5,468,000.
SCHOLARSHIPS AND GRANTS	101,434,000.
RENTAL EXPENSE	-2,965,000.
BAD DEBT EXPENSE	18,820,000.
FUNDRAISING EVENT EXPENSES	-566,000.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	122,191,000.

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE	2,965,000.
FUNDRAISING EVENT EXPENSES	566,000.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	3,531,000.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

CHARITY CARE	5,468,000.
SCHOLARSHIPS AND GRANTS	101,434,000.
BAD DEBT EXPENSE	18,820,000.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	125,722,000.



**SCHEDULE E**  
**(Form 990 or 990-EZ)**

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.**

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

► **Information about Schedule E (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization

**THE HOWARD UNIVERSITY**

Employer identification number

**53-0204707**

**Part I**

- 1** Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....
- 2** Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....
- 3** Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.  
If you need more space, use Part II .....

**THE UNIVERSITY MAINTAINS A WELL-PUBLICIZED RACIALLY  
NONDISCRIMINATORY POLICY. THE POLICY IS AVAILABLE IN WRITTEN  
BROCHURES, AS WELL AS AVAILABLE VIA THE ORGANIZATION'S  
WEBSITE (WWW.HOWARD.EDU).**

- 4** Does the organization maintain the following?
- a** Records indicating the racial composition of the student body, faculty, and administrative staff? .....
- b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....
- c** Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....
- d** Copies of all material used by the organization or on its behalf to solicit contributions? .....
- If you answered "No" to any of the above, please explain. If you need more space, use Part II.

- 5** Does the organization discriminate by race in any way with respect to:
- a** Students' rights or privileges? .....
- b** Admissions policies? .....
- c** Employment of faculty or administrative staff? .....
- d** Scholarships or other financial assistance? .....
- e** Educational policies? .....
- f** Use of facilities? .....
- g** Athletic programs? .....
- h** Other extracurricular activities? .....
- If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

- 6a** Does the organization receive any financial aid or assistance from a governmental agency? .....
- 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.
- 7** Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II .....

	YES	NO
<b>1</b>	<b>X</b>	
<b>2</b>	<b>X</b>	
<b>3</b>	<b>X</b>	
<b>4a</b>	<b>X</b>	
<b>4b</b>	<b>X</b>	
<b>4c</b>	<b>X</b>	
<b>4d</b>	<b>X</b>	
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>5c</b>		<b>X</b>
<b>5d</b>		<b>X</b>
<b>5e</b>		<b>X</b>
<b>5f</b>		<b>X</b>
<b>5g</b>		<b>X</b>
<b>5h</b>		<b>X</b>
<b>6a</b>	<b>X</b>	
<b>6b</b>		<b>X</b>
<b>7</b>	<b>X</b>	

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

Schedule E (Form 990 or 990-EZ) (2015)

**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.

**LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:**

THE ORGANIZATION RECEIVES FINANCIAL ASSISTANCE FROM GOVERNMENTAL AGENCIES  
IN THE FORM OF SCHOLARSHIP AND GRANT FUNDS FOR STUDENTS' TUITION AND  
RELATED EXPENSES.

**SCHEDULE F  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**Open to Public  
Inspection

Name of the organization

THE HOWARD UNIVERSITY

Employer identification number

53-0204707

**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 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
SUB-SAHARAN AFRICA	17	77	PROGRAM SERVICES	MEDICAL AND EDUCATIONAL SERVICES	5,178,057.
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		4,832,127.
EUROPE (INCLUDING ICELAND & GREENLAND)			INVESTMENTS		3,996,682.
<b>3 a</b> Sub-total .....	17	77			14,006,866.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	17	77			14,006,866.

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

Schedule F (Form 990) 2015



**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 non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)

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

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

**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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS	CENTRAL AMERICA AND THE CARIBBEAN	132	3427062.	CHECK	0.		
SCHOLARSHIPS	EAST ASIA AND THE PACIFIC	14	321,298.	CHECK	0.		
SCHOLARSHIPS	EUROPE (INCLUDING ICELAND & GREENLAND)	6	88,952.	CHECK	0.		
SCHOLARSHIPS	MIDDLE EAST AND NORTH AFRICA	20	318,829.	CHECK	0.		
SCHOLARSHIPS	NORTH AMERICA	23	577,829.	CHECK	0.		
SCHOLARSHIPS	SOUTH AMERICA	8	254,936.	CHECK	0.		
SCHOLARSHIPS	SOUTH ASIA	90	2601106.	CHECK	0.		
SCHOLARSHIPS	SUB-SAHARAN AFRICA	109	2496553.	CHECK	0.		

**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; do not 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; do not file with Form 990)* ..... ☐ Yes ☒ No

Schedule F (Form 990) 2015

**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.

**PART I, LINE 2:**

MONITORING USE OF GRANT FUNDS OUTSIDE THE UNITED STATES: HOWARD UNIVERSITY USES PROGRAM-SPECIFIC GUIDELINES TO MONITOR THE PROGRESS OF GRANT ACTIVITIES CONDUCTED OUTSIDE THE UNITED STATES. THE GUIDELINES OUTLINE THE SCOPE OF WORK, ESTABLISHED DEADLINES, AND THE CONTENT OF SPECIFIC REPORTS/DELIVERABLES IN A MANNER CONSISTENT WITH THE TERMS AND CONDITIONS OF THE FUNDING AGENCY AND GRANT AWARD. PRINCIPAL INVESTIGATORS PREPARE PROGRAMMATIC PROGRESS REPORTS (MONTHLY, QUARTERLY, ANNUALLY AS REQUIRED) THAT ASSESS PROGRAM ACTIVITIES, IDENTIFY PROBLEMS OR ISSUES AND MODIFY THE DESIGN OR IMPLEMENTATION OF THE PROJECT AS NECESSARY. THE GRANTS AND CONTRACTS ACCOUNTING OFFICE PREPARES MONTHLY FINANCIAL AND BILLING REPORTS FOR INTERNAL AND EXTERNAL REVIEW. THIS OVERSIGHT ENSURES ACCURACY AND COMPLIANCE IN FINANCIAL MANAGEMENT, PROPER MAINTENANCE OF GRANT MANAGEMENT DOCUMENTATION, AND THE ACHIEVEMENT OF PROGRAMMATIC DELIVERABLES AND MILESTONES.

Department of the Treasury  
Internal Revenue Service

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

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

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2015

**Open to Public Inspection**

Name of the organization

THE HOWARD UNIVERSITY

Employer identification number

53-0204707

## Part I

### Fundraising Activities.

**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.

- a** ☐ Mail solicitations
- b** ☐ Internet and email solicitations
- c** ☐ Phone solicitations
- d** ☐ In-person solicitations
- e** ☐ Solicitation of non-government grants
- f** ☐ Solicitation of government grants
- g** ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ **No**

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>Total</b>						

- 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	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		CHARTER DAY DINNER	COMMENCEMENT BALL			2
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts .....	918,830.	51,600.	32,531.	1,002,961.
	2	Less: Contributions .....	423,541.		10,497.	434,038.
	3	Gross income (line 1 minus line 2) .....	495,289.	51,600.	22,034.	568,923.
Direct Expenses	4	Cash prizes .....				
	5	Noncash prizes .....				
	6	Rent/facility costs .....			12,815.	12,815.
	7	Food and beverages .....	377,015.	38,250.		415,265.
	8	Entertainment .....	28,759.			28,759.
	9	Other direct expenses .....	89,515.	14,963.	4,256.	108,734.
	10	Direct expense summary. Add lines 4 through 9 in column (d) .....				565,573.
11	Net income summary. Subtract line 10 from line 3, column (d) .....				3,350.	

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

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

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

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

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

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

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

<b>Part IV</b>	<b>Supplemental Information</b> <i>(continued)</i>
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[illegible]



**SCHEDULE H  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Hospitals**

- **Complete if the organization answered "Yes" on Form 990, Part IV, question 20.**  
► **Attach to Form 990.**  
► **Information about Schedule H (Form 990) and its instructions is at** [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

THE HOWARD UNIVERSITY

Employer identification number

53-0204707

**Part I Financial Assistance and Certain Other Community Benefits at Cost**

	Yes	No
<b>1a</b> Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," was it a written policy?	<input checked="" type="checkbox"/>	
<b>2</b> If the organization had multiple hospital facilities, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year.		
<input type="checkbox"/> Applied uniformly to all hospital facilities		
<input type="checkbox"/> Applied uniformly to most hospital facilities		
<input type="checkbox"/> Generally tailored to individual hospital facilities		
<b>3</b> Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year.		
<b>a</b> Did the organization use Federal Poverty Guidelines (FPG) as a factor in determining eligibility for providing <i>free</i> care?	<input checked="" type="checkbox"/>	
If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care:		
<input type="checkbox"/> 100% <input checked="" type="checkbox"/> 150% <input type="checkbox"/> 200% <input type="checkbox"/> Other _____ %		
<b>b</b> Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care:	<input checked="" type="checkbox"/>	
<input type="checkbox"/> 200% <input type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input type="checkbox"/> 400% <input checked="" type="checkbox"/> Other <u>325</u> %		
<b>c</b> If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
<b>4</b> Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?		<input checked="" type="checkbox"/>
<b>5a</b> Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?		<input checked="" type="checkbox"/>
<b>c</b> If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care?		
<b>6a</b> Did the organization prepare a community benefit report during the tax year?	<input checked="" type="checkbox"/>	
<b>b</b> If "Yes," did the organization make it available to the public?	<input checked="" type="checkbox"/>	

Complete the following table using the worksheets provided in the Schedule H instructions. Do not submit these worksheets with the Schedule H.

**7 Financial Assistance and Certain Other Community Benefits at Cost**

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
<b>Financial Assistance and Means-Tested Government Programs</b>						
<b>a</b> Financial Assistance at cost (from Worksheet 1)			3209006.	0.	3209006.	.36%
<b>b</b> Medicaid (from Worksheet 3, column a)			123142041	114394232	8747809.	.98%
<b>c</b> Costs of other means-tested government programs (from Worksheet 3, column b)			8541848.	3839021.	4702827.	.52%
<b>d Total</b> Financial Assistance and Means-Tested Government Programs			134892895	118233253	16659642.	1.86%
<b>Other Benefits</b>						
<b>e</b> Community health improvement services and community benefit operations (from Worksheet 4)						
<b>f</b> Health professions education (from Worksheet 5)			46365876.	26061548.	20304328.	2.26%
<b>g</b> Subsidized health services (from Worksheet 6)			39194234.	27198117.	11996117.	1.34%
<b>h</b> Research (from Worksheet 7)			34178000.	34178000.		
<b>i</b> Cash and in-kind contributions for community benefit (from Worksheet 8)		20,129	718,288.		718,288.	.08%
<b>j Total.</b> Other Benefits		20,129	120456398	87437665.	33018733.	3.68%
<b>k Total.</b> Add lines 7d and 7j		20,129	255349293	205670918	49678375.	5.54%

**Part II Community Building Activities** Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing						
2 Economic development						
3 Community support			718,288.	718,288.		
4 Environmental improvements						
5 Leadership development and training for community members						
6 Coalition building						
7 Community health improvement advocacy						
8 Workforce development						
9 Other						
10 Total			718,288.	718,288.		

<b>Part III</b>	<b>Bad Debt, Medicare, &amp; Collection Practices</b>
-----------------	---

### Section A. Bad Debt Expense

Section A. Bad Debt Expense		Yes	No
1	Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15? .....	X	
2	Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount .....		
3	Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, for including this portion of bad debt as community benefit .....		
4	Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense or the page number on which this footnote is contained in the attached financial statements.		
Section B. Medicare			
5	Enter total revenue received from Medicare (including DSH and IME) .....		
6	Enter Medicare allowable costs of care relating to payments on line 5 .....		
7	Subtract line 6 from line 5. This is the surplus (or shortfall) .....		
8	Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used: <input checked="" type="checkbox"/> Cost accounting system <input type="checkbox"/> Cost to charge ratio <input type="checkbox"/> Other		
Section C. Collection Practices			
9a	Did the organization have a written debt collection policy during the tax year? .....	X	
9b	If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI .....	X	

<b>Part IV Management Companies and Joint Ventures</b> (owned 10% or more by officers, directors, trustees, key employees, and physicians - see instructions)			
---	--	--	--

[illegible]



**Part V Facility Information** (continued)**Section B. Facility Policies and Practices**

(Complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group HOWARD UNIVERSITY HOSPITALLine number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): 1

	Yes	No
<b>Community Health Needs Assessment</b>		
<b>1</b> Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year? .....	<b>1</b>	<b>X</b>
<b>2</b> Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C .....	<b>2</b>	<b>X</b>
<b>3</b> During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12 .....	<b>3</b>	<b>X</b>
If "Yes," indicate what the CHNA report describes (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
<b>b</b> <input checked="" type="checkbox"/> Demographics of the community		
<b>c</b> <input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
<b>d</b> <input checked="" type="checkbox"/> How data was obtained		
<b>e</b> <input checked="" type="checkbox"/> The significant health needs of the community		
<b>f</b> <input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
<b>g</b> <input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
<b>h</b> <input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
<b>i</b> <input checked="" type="checkbox"/> Information gaps that limit the hospital facility's ability to assess the community's health needs		
<b>j</b> <input checked="" type="checkbox"/> Other (describe in Section C)		
<b>4</b> Indicate the tax year the hospital facility last conducted a CHNA: 20 <u>15</u>		
<b>5</b> In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted .....	<b>5</b>	<b>X</b>
<b>6a</b> Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C .....	<b>6a</b>	<b>X</b>
<b>b</b> Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C .....	<b>6b</b>	<b>X</b>
<b>7</b> Did the hospital facility make its CHNA report widely available to the public? .....	<b>7</b>	<b>X</b>
If "Yes," indicate how the CHNA report was made widely available (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> Hospital facility's website (list url): <u>HTTP://HUHEALTHCARE.COM/COMMUNITY</u>		
<b>b</b> <input checked="" type="checkbox"/> Other website (list url): <u>HTTP://WWW.DCHEALTHMATTERS.ORG</u>		
<b>c</b> <input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
<b>d</b> <input type="checkbox"/> Other (describe in Section C)		
<b>8</b> Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11 .....	<b>8</b>	<b>X</b>
<b>9</b> Indicate the tax year the hospital facility last adopted an implementation strategy: 20 <u>13</u>		
<b>10</b> Is the hospital facility's most recently adopted implementation strategy posted on a website? .....	<b>10</b>	<b>X</b>
<b>a</b> If "Yes," (list url): <u>SEE PART V, PAGE 7</u>		
<b>b</b> If "No," is the hospital facility's most recently adopted implementation strategy attached to this return? .....	<b>10b</b>	<b>X</b>
<b>11</b> Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
<b>12a</b> Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)? .....	<b>12a</b>	<b>X</b>
<b>b</b> If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax? .....	<b>12b</b>	
<b>c</b> If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

**Part V Facility Information** (continued)**Financial Assistance Policy (FAP)**Name of hospital facility or letter of facility reporting group **HOWARD UNIVERSITY HOSPITAL**

	Yes	No
Did the hospital facility have in place during the tax year a written financial assistance policy that:		
<b>13</b> Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? .....	<b>13</b> X	
If "Yes," indicate the eligibility criteria explained in the FAP:		
<b>a</b> <input checked="" type="checkbox"/> Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of <u>150</u> % and FPG family income limit for eligibility for discounted care of <u>325</u> %		
<b>b</b> <input checked="" type="checkbox"/> Income level other than FPG (describe in Section C)		
<b>c</b> <input type="checkbox"/> Asset level		
<b>d</b> <input type="checkbox"/> Medical indigency		
<b>e</b> <input checked="" type="checkbox"/> Insurance status		
<b>f</b> <input type="checkbox"/> Underinsurance status		
<b>g</b> <input type="checkbox"/> Residency		
<b>h</b> <input checked="" type="checkbox"/> Other (describe in Section C)		
<b>14</b> Explained the basis for calculating amounts charged to patients? .....	<b>14</b> X	
<b>15</b> Explained the method for applying for financial assistance? .....	<b>15</b> X	
If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of his or her application		
<b>b</b> <input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of his or her application		
<b>c</b> <input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
<b>d</b> <input type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
<b>e</b> <input type="checkbox"/> Other (describe in Section C)		
<b>16</b> Included measures to publicize the policy within the community served by the hospital facility? .....	<b>16</b> X	
If "Yes," indicate how the hospital facility publicized the policy (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>SEE PART V, PAGE 7</u>		
<b>b</b> <input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>SEE PART V, PAGE 7</u>		
<b>c</b> <input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>SEE PART V, PAGE 7</u>		
<b>d</b> <input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
<b>e</b> <input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
<b>f</b> <input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
<b>g</b> <input checked="" type="checkbox"/> Notice of availability of the FAP was conspicuously displayed throughout the hospital facility		
<b>h</b> <input type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
<b>i</b> <input checked="" type="checkbox"/> Other (describe in Section C)		

**Billing and Collections**

<b>17</b> Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained all of the actions the hospital facility or other authorized party may take upon non-payment? .....	<b>17</b> X	
<b>18</b> Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP:		
<b>a</b> <input type="checkbox"/> Reporting to credit agency(ies)		
<b>b</b> <input type="checkbox"/> Selling an individual's debt to another party		
<b>c</b> <input type="checkbox"/> Actions that require a legal or judicial process		
<b>d</b> <input type="checkbox"/> Other similar actions (describe in Section C)		
<b>e</b> <input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		

Schedule H (Form 990) 2015

**Part V** Facility Information (continued)Name of hospital facility or letter of facility reporting group HOWARD UNIVERSITY HOSPITAL

	Yes	No
<b>19</b> Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? .....	<b>19</b>	<b>X</b>
If "Yes," check all actions in which the hospital facility or a third party engaged:		
<b>a</b> <input type="checkbox"/> Reporting to credit agency(ies)		
<b>b</b> <input type="checkbox"/> Selling an individual's debt to another party		
<b>c</b> <input type="checkbox"/> Actions that require a legal or judicial process		
<b>d</b> <input type="checkbox"/> Other similar actions (describe in Section C)		
<b>20</b> Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply):		
<b>a</b> <input checked="" type="checkbox"/> Notified individuals of the financial assistance policy on admission		
<b>b</b> <input checked="" type="checkbox"/> Notified individuals of the financial assistance policy prior to discharge		
<b>c</b> <input checked="" type="checkbox"/> Notified individuals of the financial assistance policy in communications with the individuals regarding the individuals' bills		
<b>d</b> <input checked="" type="checkbox"/> Documented its determination of whether individuals were eligible for financial assistance under the hospital facility's financial assistance policy		
<b>e</b> <input type="checkbox"/> Other (describe in Section C)		
<b>f</b> <input type="checkbox"/> None of these efforts were made		

**Policy Relating to Emergency Medical Care**

<b>21</b> Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? .....	<b>21</b>	<b>X</b>
If "No," indicate why:		
<b>a</b> <input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions		
<b>b</b> <input type="checkbox"/> The hospital facility's policy was not in writing		
<b>c</b> <input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C)		
<b>d</b> <input type="checkbox"/> Other (describe in Section C)		

**Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)**

<b>22</b> Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care.		
<b>a</b> <input type="checkbox"/> The hospital facility used its lowest negotiated commercial insurance rate when calculating the maximum amounts that can be charged		
<b>b</b> <input type="checkbox"/> The hospital facility used the average of its three lowest negotiated commercial insurance rates when calculating the maximum amounts that can be charged		
<b>c</b> <input checked="" type="checkbox"/> The hospital facility used the Medicare rates when calculating the maximum amounts that can be charged		
<b>d</b> <input checked="" type="checkbox"/> Other (describe in Section C)		
<b>23</b> During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? .....	<b>23</b>	<b>X</b>
If "Yes," explain in Section C.		
<b>24</b> During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? .....	<b>24</b>	<b>X</b>
If "Yes," explain in Section C.		

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**Part V** Facility Information *(continued)*

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 3J: IN 2016, THROUGH THE WORK OF THE DISTRICT OF COLUMBIA HEALTHY COMMUNITIES COLLABORATIVE (DCHCC), A COMPREHENSIVE CITYWIDE COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) WAS INITIATED. THE DCHCC REPRESENTS A UNIQUE COLLABORATION AMONG HOWARD UNIVERSITY HOSPITAL AND THREE AREA HOSPITALS (CHILDREN'S NATIONAL MEDICAL CENTER, PROVIDENCE HOSPITAL, AND SIBLEY MEMORIAL HOSPITAL) AND THREE FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs) (COMMUNITY OF HOPE, UNITY, AND BREAD FOR THE CITY). IN RESPONSE TO ITS COMMUNITY COMMITMENT, CURRENT ECONOMIC CHALLENGES, AND NEW FEDERAL GUIDELINES, DCHCC SET FORTH TO CONDUCT A CHNA THAT SUMMARIZES AND EVALUATES COMMUNITY HEALTH NEEDS WITH ATTENTION TO HEALTH STATUS, HEALTH SERVICE NEEDS, AND THE INPUT OF COMMUNITY STAKEHOLDERS. THE SCOPE OF THIS PROJECT ALSO INCLUDES SUPPORT FOR AN INNOVATIVE DATA-REPORTING WEBSITE AND TOOL THAT WILL ENGAGE MANY DIFFERENT STAKEHOLDERS COMMITTED TO IMPROVING HEALTH OUTCOMES IN THE DISTRICT OF COLUMBIA.

THE CHNA DOCUMENTS TRENDS IN HEALTH NEEDS AND HEALTH SERVICE USE AMONG DISTRICT CHILDREN AND ADULTS, WITH PARTICULAR ATTENTION PAID TO DIFFERENCES BY AGE, RACE/ETHNICITY, WARD AND HOSPITAL, WHERE RELEVANT. THE FINDINGS ARE OF INTEREST TO A RANGE OF DISTRICT STAKEHOLDERS INVESTED IN IMPROVING HEALTH AND HEALTH CARE IN THE CITY. THE REPORT MAY ALSO BE OF INTEREST TO HEALTH SERVICES RESEARCHERS OR HEALTH CARE PLANNERS INTERESTED IN CONDUCTING A COMMUNITY HEALTH NEEDS ASSESSMENT TO DRIVE LOCAL HEALTH DECISION-MAKING.

DCHCC ALSO SUPPORTS AN INNOVATIVE DATA-REPORTING WEBSITE AND TOOL THAT

**Part V** Facility Information *(continued)*

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2" "B, 3," etc.) and name of hospital facility.

WILL ENGAGE MANY DIFFERENT STAKEHOLDERS COMMITTED TO IMPROVING HEALTH OUTCOMES IN THE DISTRICT OF COLUMBIA. THE CHNA AND COMMUNITY HEALTH IMPROVEMENT PLAN HAS BEEN PUBLISHED ON THIS WEB PORTAL. THE COMMUNITY HEALTH NEEDS ASSESSMENT ALSO INCLUDES ILLUSTRATIVE MAPS/FIGURES OF ASSETS AND VULNERABILITIES RELATED TO SPECIFIC HEALTH METRICS, INCLUDING BUT NOT LIMITED TO MAJOR OUTLET FAST FOOD LOCATIONS PER WARD OF THE DISTRICT, HOSPITALS AND PRIMARY CARE CENTERS IN THE DISTRICT, MEDICALLY UNDERSERVED AREAS IN THE DISTRICT, AND LOCATIONS OF PRIMARY CARE AND MENTAL HEALTH PROFESSIONALS SHORTAGE AREAS IN THE DISTRICT. PROVIDING THIS INFORMATION WILL ASSIST IN OVERALL DATA ANALYSIS, PROGRAM PLANNING AND INFORMED DECISION-MAKING ON IMPORTANT HEALTH-RELATED ISSUES AFFECTING THE RESIDENTS OF WASHINGTON, DC.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 5: IN CONDUCTING THE MOST RECENT CHNA, INPUT WAS RECEIVED VIA FOUR FOCUS GROUPS CONDUCTED WITH KEY STAKEHOLDERS WHO ARE ADVOCATES OR PROVIDERS OF HEALTH AND SOCIAL SERVICES. TWO OF THE GROUPS FOCUSED ON HEALTH AND HEALTH SERVICE ISSUES. THE OTHER TWO GROUPS FOCUSED ON SOCIAL DETERMINANTS AND RELATED SOCIAL SERVICE ISSUES THAT IMPACT HEALTH. THERE WERE A TOTAL OF 30 FOCUS GROUP PARTICIPANTS INCLUDING HOSPITAL PATIENT ADVOCATES, CASE MANAGERS, DEPARTMENT OF HEALTH OFFICIALS, AND COMMUNITY-BASED HEALTH AND SOCIAL SERVICE STAKEHOLDERS. STAKEHOLDERS WERE QUERIED ABOUT A NUMBER OF MAJOR ISSUES, INCLUDING WHAT THEY VIEWED AS PRIORITY HEALTH AND SOCIAL SERVICES NEEDS FOR THE CITY IN GENERAL, THE PARTICULAR NEEDS THAT WERE RELEVANT TO THE POPULATIONS THEY SERVE, AND THEIR SPECIFIC RECOMMENDATIONS FOR CONCRETE STEPS THAT COULD BE



**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

IMPLEMENTED TO IMPROVE OVERALL HEALTH AND SOCIAL SERVICES FOR RESIDENTS.

THE FOCUS GROUP GUIDE IS ON FILE WITH THE RAND CORPORATION AND AVAILABLE  
UPON REQUEST.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 6A: IN THE 2016 CHNA, WE ENGAGED WITH 300+  
COMMUNITY STAKEHOLDERS ACROSS A DIVERSE CROSS SECTION OF DC SPANNING  
HEALTH AND NON-HEALTH DISCIPLINES. USING STRUCTURED DATA COLLECTION TOOLS,  
WE PROBED STAKEHOLDERS ABOUT THEIR PERSPECTIVES ON HEALTH AND WELL-BEING  
IN DC, THE FACILITATORS AND INHIBITORS TO LEADING HEALTHY LIVES, AND THEIR  
RECOMMENDATIONS.

ADDITIONALLY, WE HOSTED FIVE FOCUS GROUPS WITH STAFF FROM 60 DIFFERENT  
COMMUNITY-BASED ORGANIZATIONS AND SOCIAL SERVICE AGENCIES. WE ALSO  
CONDUCTED TWO PUBLIC TOWN HALL MEETINGS THAT EACH DREW ABOUT 80  
PARTICIPANTS. DC RESIDENTS, COMMUNITY REPRESENTATIVES, AND HEALTH CARE  
PROVIDERS COMPLETED 113 ONLINE SURVEYS.

THE QUALITATIVE ANALYSIS REVEALED NINE PRESSING COMMUNITY HEALTH NEEDS:  
CARE COORDINATION, FOOD INSECURITY, PLACE-BASED CARE, MENTAL HEALTH,  
HEALTH LITERACY, HEALTHY BEHAVIORS, HEALTH DATA DISSEMINATION, COMMUNITY  
VIOLENCE, AND CULTURAL COMPETENCY.

HOWARD UNIVERSITY HOSPITAL:

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2" "B, 3," etc.) and name of hospital facility.

PART V, SECTION B, LINE 6B: THE FACILITY'S CHNA WAS CONDUCTED WITH THREE  
FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs) (COMMUNITY OF HOPE, UNITY HEALTH  
CARE AND BREAD FOR THE CITY).

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 11: THE DCHCC ACCEPTED THE SIX TOP HEALTH ISSUES-  
SEXUAL HEALTH, MENTAL HEALTH AND SUBSTANCE ABUSE, OBESITY/OVERWEIGHT,  
ASTHMA, ACCESS TO CARE, AND STRESS-RELATED CONDITIONS - THAT EMERGED  
THROUGH ANALYSES OF QUANTITATIVE DATA SOURCES (INCLUDING THE BEHAVIORAL  
RISK FACTOR SURVEY, YOUTH BEHAVIORAL RISK SURVEY, HOSPITAL DISCHARGE DATA,  
AMERICAN COMMUNITY SURVEY, AND US CENSUS DATA) AND QUALITATIVE DATA (INPUT  
FROM COMMUNITY REPRESENTATIVES OBTAINED DURING STAKEHOLDER FOCUS GROUPS).  
MEMBERS OF THE DCHCC DELIBERATED AND DECIDED ACCESS TO CARE AND  
STRESS-RELATED CONDITIONS SHOULD NOT BE ADDRESSED AS INDEPENDENT PRIORITY  
ISSUES AS THEY ARE SYSTEMIC ISSUES THAT IMPACT ALL OF THE OTHER PRIORITY  
HEALTH AREAS. THUS, THE IMPLEMENTATION STRATEGY (COMMUNITY HEALTH  
IMPROVEMENT PLAN) ADDRESSES THE REMAINING FOUR PRIORITY ISSUES: SEXUAL  
HEALTH, MENTAL HEALTH AND SUBSTANCE ABUSE, OBESITY/OVERWEIGHT, AND ASTHMA.  
HUH ADOPTED THE DCHCC PRIORITY ISSUES AND ADDED CANCER.

IN PREPARATION FOR DEVELOPING THE IMPLEMENTATION STRATEGY, HUH CONDUCTED A  
SERIES OF INTERNAL MEETINGS WITH EXPERTS TO ASSESS ITS CAPACITY TO ADDRESS  
AND PRIORITIZE THE IDENTIFIED HEALTH AREAS BASED ON ORGANIZATIONAL  
STRATEGY. WITH THE ORGANIZATIONAL CAPACITY IDENTIFIED AND SANCTIONED, HUH  
RECONVENED AS PART OF THE DCHCC PROCESS TO DEVELOP THE IMPLEMENTATION  
STRATEGY (COMMUNITY HEALTH IMPROVEMENT PLAN) AS FOLLOWS: CONDUCTED GAP AND

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

STRENGTH, WEAKNESSES, OPPORTUNITIES, AND THREATS (SWOT) ANALYSES (FOR EACH HEALTH PRIORITY); PRIORITIZATION OF ISSUES (TO RANK THE HEALTH ISSUES); CREATION OF ACTION PLAN; AND MONITORING OF THE ACTION PLAN.

DCHCC, WITH INPUT FROM COMMUNITY STAKEHOLDERS, DEVELOPED A COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP) TO RESPOND TO THE FINDINGS OF THE NEEDS ASSESSMENT. DCHCC CONDUCTED A COMMUNITY FORUM THAT PROVIDED AN OPPORTUNITY FOR HEALTH PROFESSIONALS, PUBLIC AND ELECTED OFFICIALS, NON-PROFIT ORGANIZATIONS, ACADEMIA, BUSINESSES, PARENTS AND FAMILIES, AND INDIVIDUAL CITIZEN-ADVOCATES TO REVIEW THE FINDINGS FROM THE ASSESSMENT. FORUM PARTICIPANTS THEN ASSISTED WITH DEVELOPING AND SUPPORTING A CITYWIDE COMMUNITY HEALTH IMPROVEMENT PLAN THAT RESPONDS TO THE FINDINGS OF THE ASSESSMENT.

EACH DCHCC MEMBER ORGANIZATION RECEIVED APPROVAL OF THE IMPLEMENTATION STRATEGY (COMMUNITY HEALTH IMPROVEMENT PLAN) BY THEIR BOARD OF DIRECTORS/TRUSTEES. HUH RECEIVED APPROVAL BY ITS BOARD ON SEPTEMBER 26, 2013.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 13B: IF THE PATIENT IS ABOVE THE FPG, THE HOSPITAL ASSESSES THE ABILITY TO PAY AND SET UP A PAYMENT PLAN.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 13H: THE HOSPITAL ALSO REVIEWS OTHER DOCUMENTS

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

SUCH AS CREDIT CARD REPORTS, PAYSTUBS, AND LIVING EXPENSE REPORTS, ETC AS  
CRITERIA TO DETERMINE ELIGIBILITY FOR FREE OR DISCOUNTED CARE.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 16I: HUH PROVIDES NOTIFICATION ON THE PATIENT'S  
BILLING STATEMENT THAT FINANCIAL ASSISTANCE IS AVAILABLE FOR THOSE WHO  
QUALIFY. A TOLL-FREE NUMBER IS PROVIDED FOR PATIENTS TO CALL FOR  
ADDITIONAL INFORMATION.

IN ADDITION TO THE FINANCIAL COUNSELORS AND PATIENT ACCOUNTS CUSTOMER  
SERVICE REPRESENTATIVES, THE HOSPITAL'S ELIGIBILITY VENDOR COMPLETES  
PATIENT FINANCIAL ASSISTANCE INTERVIEWS WITH UNINSURED PATIENTS TO ASSIST  
WITH THE COMPLETION OF THE HUH FINANCIAL ASSISTANCE APPLICATION IF THE  
PATIENT IS DETERMINED INELIGIBLE FOR FEDERAL/DISTRICT MEDICAL PROGRAMS.

HOWARD UNIVERSITY HOSPITAL:

PART V, SECTION B, LINE 22D: PATIENTS WHO ARE ELIGIBLE FOR THE HUH  
FINANCIAL ASSISTANCE PROGRAM RECEIVE A DISCOUNT TO THE TOTAL AMOUNT DUE.  
THE DISCOUNT IS BASED ON INCOME, HOUSEHOLD SIZE AND PERCENTAGE OF THE  
FEDERAL POVERTY GUIDELINE AMOUNT. UNINSURED PATIENTS WHO ARE NOT ELIGIBLE  
AND WANT TO RECEIVE CARE UNDER A CONTRACTUAL ARRANGEMENT ARE OFFERED THE  
DC MEDICAID RATE.

FORM 990, SCHEDULE H, PART V, SECTION B, LINE 10A

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16i, 18d, 19d, 20e, 21c, 21d, 22d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

THE HOSPITAL FACILITY'S MOST RECENTLY ADOPTED IMPLEMENTATION STRATEGY

POSTED ON A WEBSITE:

[HTTP://ASSETS.THEHCN.NET/CONTENT/SITES/WASHINGTONDC/](http://ASSETS.THEHCN.NET/CONTENT/SITES/WASHINGTONDC/)

CHIP\_FY\_2014-2016.PDF

FORM 990, SCHEDULE H, PART V, SECTION B, LINE 16A, LINE 16B AND LINE 16C

THE FAP WAS WIDELY AVAILABLE ON A WEBSITE:

[HTTP://HUHEALTHCARE.COM/HEALTHCARE/HOSPITAL/PATIENTS-AND-VISITORS/PATIENT-FINANCIAL-SERVICES/FINANCIAL-ASSISTANCE-POLICY](http://HUHEALTHCARE.COM/HEALTHCARE/HOSPITAL/PATIENTS-AND-VISITORS/PATIENT-FINANCIAL-SERVICES/FINANCIAL-ASSISTANCE-POLICY)

THE FAP APPLICATION FORM WAS WIDELY AVAILABLE ON A WEBSITE:

[HTTP://HUHEALTHCARE.COM/HEALTHCARE/HOSPITAL/PATIENTS-AND-VISITORS/PATIENT-FINANCIAL-SERVICES/FINANCIAL-ASSISTANCE-APPLICATION](http://HUHEALTHCARE.COM/HEALTHCARE/HOSPITAL/PATIENTS-AND-VISITORS/PATIENT-FINANCIAL-SERVICES/FINANCIAL-ASSISTANCE-APPLICATION)

A PLAIN LANGUAGE SUMMARY OF THE AFP WAS WIDELY AVAILABLE ON A WEBSITE:

[HTTP://HUHEALTHCARE.COM/HEALTHCARE/HOSPITAL/PATIENTS-AND-VISITORS/PATIENT-FINANCIAL-SERVICES/FINANCIAL-ASSISTANCE](http://HUHEALTHCARE.COM/HEALTHCARE/HOSPITAL/PATIENTS-AND-VISITORS/PATIENT-FINANCIAL-SERVICES/FINANCIAL-ASSISTANCE)



**Part VI** Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

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**PART I, LINE 6A:**

HOWARD UNIVERSITY HOSPITAL (HUH) IS PART OF HOWARD UNIVERSITY. SERVICE TO THE NATION HAS BEEN, AND CONTINUES TO BE, ONE OF THE PRIMARY MISSIONS OF HOWARD UNIVERSITY. A COMMUNITY BENEFIT REPORT IS PREPARED ANNUALLY BY THE OFFICE OF UNIVERSITY RESEARCH AND PLANNING AND THE HOWARD UNIVERSITY COMMUNITY ASSOCIATION, WHICH ILLUSTRATES A FRACTION OF THE MANY CIVIC AND COMMUNITY ACTIVITIES IN WHICH THE HOWARD UNIVERSITY FACULTY, STAFF, STUDENTS, ALUMNI AND RETIREES ARE ENGAGED. HOWARD UNIVERSITY OFFERS OVER 100 PROGRAMS, SERVICES AND ACTIVITIES THAT ARE AVAILABLE TO THE PUBLIC. THESE INCLUDE: HEALTH EDUCATION, SCREENING AND CLINICAL SERVICES, ACTIVITIES WITH THE DISTRICT OF COLUMBIA PUBLIC SCHOOLS, BORDER BABIES PROGRAM AND A TOBACCO CONTROL PROGRAM, AMONG OTHERS. THE COMMUNITY BENEFIT REPORT IS AVAILABLE ON THE UNIVERSITY'S WEBSITE.

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**PART I, LINE 7:**

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**PART I, 7A: CHARITY CARE AT COST - FREE OR DISCOUNTED HEALTH CARE**

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**SERVICES PROVIDED TO PERSONS WHO MEET THE ORGANIZATION'S CRITERIA FOR**

**Part VI** Supplemental Information (Continuation)

FINANCIAL ASSISTANCE AND ARE THEREFORE DEEMED UNABLE TO PAY FOR ALL OR A PORTION OF SUCH SERVICES.

PART I, 7B: MEDICAID - WHEN MEDICAID, A STATE HEALTH CARE PROGRAM FOR QUALIFYING LOW-INCOME RESIDENTS, DOES NOT REIMBURSE HUH FOR THE FULL COST OF HEALTH CARE SERVICES PROVIDED TO PATIENTS, HUH THEN "ABSORBS" THESE COSTS AT A FINANCIAL LOSS.

PART I, 7C: COSTS - OTHER MEANS-TESTED GOVERNMENT PROGRAMS - GOVERNMENT PROGRAMS FOR WHICH ELIGIBILITY FOR BENEFITS OR COVERAGE IS DETERMINED BY THE RECIPIENT'S INCOME OR ASSET LEVEL.

PART I, 7E: COMMUNITY HEALTH IMPROVEMENT SERVICES - ACTIVITIES AND SERVICES FOR WHICH NO PATIENT BILL EXISTS. THESE SERVICES ARE NOT EXPECTED TO BE FINANCIALLY SELF SUPPORTING, ALTHOUGH SOME MAY BE SUPPORTED BY OUTSIDE GRANTS OR FUNDING. SOME EXAMPLES INCLUDE FREE CLINIC SERVICES, PROGRAMS DIRECTED AT IMPROVING WOMEN'S HEALTH, FREE OR LOW COST PRESCRIPTION MEDICATIONS, AND RURAL AND URBAN OUTREACH PROGRAMS.

COMMUNITY BENEFIT OPERATIONS - COSTS ASSOCIATED WITH DEDICATED STAFF, COMMUNITY HEALTH NEEDS AND/OR ASSESSMENTS, AND OTHER COSTS ASSOCIATED WITH COMMUNITY BENEFIT STRATEGY AND OPERATIONS.

PART I, LN 7F:

HEALTH PROFESSIONS EDUCATION - PROGRAMS THAT RESULT IN A DEGREE, CERTIFICATE, OR TRAINING THAT IS NECESSARY TO BE LICENSED TO PRACTICE AS A HEALTH PROFESSIONAL, AS REQUIRED BY STATE LAW; OR CONTINUING EDUCATION THAT IS NECESSARY TO RETAIN STATE LICENSE OR CERTIFICATION BY A BOARD IN



**Part VI** Supplemental Information (Continuation)

THE INDIVIDUAL'S HEALTH PROFESSION SPECIALTY.

PART I, LINE 7G:

CLINICAL SERVICES THAT ARE PROVIDED, DESPITE A FINANCIAL LOSS TO THE ORGANIZATION. THE FINANCIAL LOSS IS MEASURED AFTER REMOVING LOSSES, MEASURED BY COST, ASSOCIATED WITH BAD DEBT, CHARITY CARE, MEDICAID AND OTHER MEANS-TESTED GOVERNMENT PROGRAMS. DESPITE THE FINANCIAL LOSS, THE SERVICE IS PROVIDED BECAUSE IT MEETS AN IDENTIFIED COMMUNITY NEED, SUCH AS PROVIDING NEEDED ACCESS TO CARE FOR LOW-INCOME INDIVIDUALS; IF THE SERVICE WERE NO LONGER OFFERED, ACCESS TO HEALTH SERVICES WOULD BE IMPAIRED; OR, PROVIDING THE SERVICE WOULD BECOME THE RESPONSIBILITY OF GOVERNMENT OR ANOTHER TAX-EXEMPT ORGANIZATION.

THIS AMOUNT INCLUDES SUBSIDIZED HEALTH SERVICES PROVIDED AS A PART OF THE HOSPITAL'S EMERGENCY DEPARTMENT, NEONATAL INTENSIVE CARE UNIT AND INPATIENT PSYCHIATRIC UNIT, WHICH ALSO INCLUDES SUBSIDIZED SUBSTANCE ABUSE TREATMENT PROGRAMS.

PART I LINE 7H: ANY STUDY OR INVESTIGATION OF WHICH THE GOAL IS TO GENERATE GENERALIZED KNOWLEDGE MADE AVAILABLE TO THE PUBLIC, SUCH AS KNOWLEDGE ABOUT:

1. UNDERLYING BIOLOGICAL MECHANISMS OF HEALTH AND DISEASE, NATURAL PROCESSES OR PRINCIPLES AFFECTING HEALTH OR ILLNESS;

2. EVALUATION OF SAFETY AND EFFICACY OF INTERVENTIONS FOR DISEASE SUCH AS CLINICAL TRIALS AND STUDIES OF THERAPEUTIC PROTOCOLS;

**Part VI** Supplemental Information (Continuation)

3. LABORATORY-BASED STUDIES; EPIDEMIOLOGY, HEALTH OUTCOMES AND EFFECTIVENESS.

4. BEHAVIORAL OR SOCIOLOGICAL STUDIES RELATED TO HEALTH AND DELIVERY OF CARE, OR PREVENTION STUDIES RELATED TO CHANGES IN THE HEALTH CARE DELIVERY SYSTEM; AND

5. COMMUNICATION OF FINDINGS AND OBSERVATIONS (INCLUDING PUBLICATION IN A MEDICAL JOURNAL)

THIS CATEGORY ONLY INCLUDES RESEARCH INTERNALLY FUNDED OR RESEARCH FUNDED BY A TAX-EXEMPT OR GOVERNMENT ENTITY.

PART I LINE 7I: CASH CONTRIBUTIONS MADE TO ENTITIES AND COMMUNITY GROUPS THAT SHARE THE ORGANIZATION'S GOALS AND MISSION. IN-KIND CONTRIBUTIONS INCLUDE THE COST OF HOURS DONATED BY STAFF TO THE COMMUNITY WHILE ON THE ORGANIZATION'S PAYROLL, INDIRECT COST OF SPACE DONATED TO TAX-EXEMPT COMMUNITY GROUPS (SUCH AS FOR MEETINGS), AND THE FINANCIAL VALUE OF DONATED FOOD, EQUIPMENT, AND SUPPLIES.

PART II, COMMUNITY BUILDING ACTIVITIES:

COMMUNITY BUILDING ACTIVITIES - HOWARD UNIVERSITY PARTICIPATES IN SEVERAL HOUSING & URBAN DEVELOPMENT (HUD) PROGRAMS WHOSE MISSION IS TO CREATE STRONG, SUSTAINABLE, INCLUSIVE COMMUNITIES AND QUALITY, AFFORDABLE HOMES FOR ALL. HUD IS WORKING TO STRENGTHEN THE HOUSING MARKET TO BOLSTER THE ECONOMY AND PROTECT CONSUMERS; MEET THE NEED FOR QUALITY, AFFORDABLE RENTAL HOMES; UTILIZE HOUSING AS A PLATFORM FOR IMPROVING QUALITY OF LIFE; AND BUILD INCLUSIVE AND SUSTAINABLE COMMUNITIES FREE FROM DISCRIMINATION.

**Part VI** Supplemental Information (Continuation)

AFFORDABLE HOUSING AND ECONOMIC STABILITY ARE INTRINSICALLY LINKED TO THE PREVENTION OF HEALTH PROBLEMS ASSOCIATED WITH POVERTY, HOMELESSNESS AND OTHER ENVIRONMENTAL CHALLENGES.

## PART III, LINE 4:

THE COST-TO-CHARGE RATIO WAS APPLIED TO THE BAD DEBT AMOUNT TO REPORT AT COST. THE UNIVERSITY'S FINANCIAL STATEMENTS PROVIDE AS FOLLOWS: THE TOTAL OF CHARGES FORGONE FOR SERVICES AND SUPPLIES FURNISHED UNDER THE HOSPITAL'S CHARITY CARE POLICY AND THE DC ALLIANCE PROGRAM WERE \$5,468,000. 12,276,000, AND \$8,241,000 FOR THE FISCAL YEARS ENDED JUNE 30, 2016, 2015 AND 2014, RESPECTIVELY. TOTAL UNCOMPENSATED CARE, WHICH INCLUDES BAD DEBT WRITE-OFFS AS WELL AS CHARITY CARE, FOR THE FISCAL YEARS ENDED JUNE 30, 2016, 2015 AND 2014, WAS \$24,288,000, \$49,215,000 AND \$35,170,000, RESPECTIVELY.

## PART III, LINE 8:

MEDICARE IS AN ENTITLEMENT PROGRAM IN WHICH THE HOSPITAL DOES NOT HAVE THE ABILITY TO NEGOTIATE PAYMENT RATES. THEREFORE, ANY SHORTFALL FOR SERVICES PROVIDED SHOULD BE CONSIDERED A CONTRIBUTION TO THE COMMUNITY.

## PART III, LINE 9B:

HUH WILL FORGO EXTRAORDINARY COLLECTION ACTIONS AGAINST PATIENTS UNTIL MAKING REASONABLE EFFORTS TO DETERMINE WHETHER THE PATIENT IS ELIGIBLE FOR ASSISTANCE UNDER HUH'S FINANCIAL ASSISTANCE POLICY.

HOWARD UNIVERSITY HOSPITAL'S PATIENT ACCOUNTS DEPARTMENT WILL IDENTIFY ALL ACCOUNTS TO BE PLACED IN COLLECTIONS USING THE FOLLOWING CRITERIA:

**Part VI** Supplemental Information (Continuation)

1. NO ACCOUNTS WILL BE SENT FOR COLLECTION UNTIL IT HAS BEEN DETERMINED THAT THE PATIENT IS NOT ELIGIBLE FOR FINANCIAL ASSISTANCE UNDER HUH'S FINANCIAL ASSISTANCE POLICY.

PART VI, LINE 2:

## NEEDS ASSESSMENT

IN ORDER TO COMPLY WITH THE PATIENT PROTECTION AND AFFORDABLE CARE ACT, HUH COMPLETED THE COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) AS A MEMBER OF THE DC HEALTHY COMMUNITIES COLLABORATIVE (DCHCC). AS REQUIRED, THE 2013 AND 2016 CHNA ARE UTILIZED TO IDENTIFY THE NEEDS THAT ARE THE MOST SIGNIFICANT TO THE COMMUNITY. APPROXIMATELY 75 - 80% OF ALL COMMUNITY OUTREACH INITIATIVES THAT ARE OFFERED BY THE HOSPITAL ARE THE RESULT OF A DIRECT REQUEST OF AN INDIVIDUAL WITHIN THE COMMUNITY OR A COMMUNITY ORGANIZATION. HUH IS OFTEN CONTACTED TO PARTNER WITH OR PARTICIPATE IN MANY OF THE PROGRAMS THAT ARE INCLUDED AS A PART OF THIS SCHEDULE.

PART VI, LINE 3:

## PATIENT EDUCATION OF ELIGIBILITY FOR ASSISTANCE

HUH IS A PRIVATE, NON-PROFIT HOSPITAL WITH A COMMITMENT TO PROVIDE, WITHIN THE LIMITS OF THE RESOURCES OF THE INSTITUTION, CHARITABLE MEDICAL CARE FOR:

- UNINSURED PATIENTS WHO DO NOT HAVE THE ABILITY TO PAY FOR MEDICAL SERVICES AT THE TIME SERVICES ARE RENDERED.

- INSURED PATIENTS WHOSE COVERAGE IS INADEQUATE TO COVER A CATASTROPHIC SITUATION.

- EMERGENCY PATIENTS WHOSE FINANCIAL ABILITY TO PAY COULD NOT BE DETERMINED PRIOR TO DELIVERING SERVICES.

**Part VI** Supplemental Information (Continuation)

- PATIENTS WHOSE INCOME IS SUFFICIENT TO PAY FOR BASIC LIVING COSTS BUT NOT MEDICAL CARE, AND ALSO THOSE PERSONS WITH GENERALLY ADEQUATE INCOMES WHO ARE SUDDENLY FACED WITH CATASTROPHICALLY LARGE MEDICAL BILLS.

- PATIENTS WHO DEMONSTRATE ABILITY TO PAY PART BUT NOT ALL OF THEIR LIABILITY.

HUH WILL PROVIDE ANNUALLY NO LESS THAN 3% OF ITS TOTAL OPERATING EXPENSES IN UNCOMPENSATED CARE MEASURED COST. THE COST OF PROVIDING UNCOMPENSATED CARE SHALL BE DETERMINED BY APPLYING ANNUAL FAMILY INCOME AND MAINTENANCE NEED LEVEL CALCULATED AGAINST AN EXPECTED PAYOR PAYMENT. DC MEDICAID FEE SCHEDULE WILL BE UTILIZED AS THE EXPECTED PAYOR PAYMENT IN CASES WHERE APPLICANT IS UNINSURED.

THIS OPPORTUNITY IS MADE AVAILABLE TO ALL INDIVIDUALS HAVING RECEIVED HEALTH CARE SERVICES WITHIN HUH.

ALL HUH EMPLOYEES IN BUSINESS OPERATIONS (I.E. PATIENT ACCESS, BILLING, CREDIT AND COLLECTIONS, CASH PROCESSING AND CUSTOMER SERVICE) ARE FULLY VERSED IN THE HUH'S UNCOMPENSATED CARE POLICY AND ITS APPLICATION IN ORDER TO DIRECT PATIENT INQUIRIES TO APPROPRIATE FACILITY REPRESENTATIVES.

HUH FINANCIAL COUNSELORS AND PATIENT ACCOUNTS CUSTOMER SERVICE OFFICES ARE RESPONSIBLE FOR DETERMINING A PATIENT'S ELIGIBILITY FOR DISCOUNTED DEBT OR CHARITY ALLOCATION THROUGH THE UNCOMPENSATED CARE/CHARITY CARE POLICY AND ARE RESPONSIBLE FOR NOTIFYING PATIENTS IN WRITING OF THEIR ELIGIBILITY FOR FINANCIAL ASSISTANCE. FINANCIAL COUNSELING IS PROVIDED TO PATIENTS ABOUT THEIR PAYMENT OBLIGATIONS AND HOSPITAL BILLS. INFORMATION ON HOSPITAL-BASED FINANCIAL SUPPORT POLICIES AND EXTERNAL PROGRAMS THAT

**Part VI** Supplemental Information (Continuation)

PROVIDE COVERAGE FOR SERVICES ARE MADE AVAILABLE TO PATIENTS DURING THE PRE-REGISTRATION AND REGISTRATION PROCESSES AND/OR THROUGH COMMUNICATIONS WITH PATIENTS SEEKING FINANCIAL ASSISTANCE.

IN THE EVENT THAT A PATIENT DOES NOT QUALIFY FOR MEDICAL ASSISTANCE UNDER STATE, DISTRICT OR FEDERAL PROGRAMS, A "PATIENT REQUEST FOR UNCOMPENSATED CARE" APPLICATION WILL BE PROVIDED TO THE PATIENT FOR COMPLETION AND SUBMISSION TO THE FINANCIAL COUNSELOR'S OFFICE IN ACCORDANCE WITH THE HOSPITAL'S UNCOMPENSATED CARE/CHARITY CARE POLICY.

HOWARD UNIVERSITY HOSPITAL IS COMMITTED TO PROVIDING, WITHIN THE LIMITS OF ITS RESOURCES, FINANCIAL ASSISTANCE FOR MEDICALLY NECESSARY SERVICES FOR PATIENTS WHO LACK THE MEANS TO PAY FOR SUCH SERVICES. HOWARD UNIVERSITY HOSPITAL WILL PROVIDE ANNUALLY NO LESS THAN 3% OF ITS TOTAL OPERATING EXPENSES TO FINANCIAL ASSISTANCE PROGRAMS BY MEASURED COST. THE BASIS FOR FINANCIAL ASSISTANCE WILL BE DETERMINED THROUGH A PATIENT'S SELF REPORTING WITH SUPPORTING DOCUMENTATION/ATTESTATION IN ACCORDANCE WITH THE FINANCIAL ASSISTANCE PROGRAM.

PART VI, LINE 4:

## COMMUNITY INFORMATION

HUH IS LOCATED IN WASHINGTON, DC AND IS A NOT-FOR-PROFIT ACUTE CARE HOSPITAL. THE HOSPITAL PROVIDES INPATIENT, OUTPATIENT, AND EMERGENCY HEALTH SERVICES FOR THE RESIDENTS OF THE DISTRICT OF COLUMBIA AND SURROUNDING STATES. THE HOSPITAL'S PATIENT POPULATION IS OVERWHELMINGLY REPRESENTED BY MEDICAID, DC ALLIANCE (PROVIDES MEDICAL ASSISTANCE TO NEEDY DISTRICT RESIDENTS WHO ARE NOT ELIGIBLE FOR FEDERALLY-FINANCED MEDICAID BENEFITS) AND MEDICARE PATIENTS, AS WELL AS INDIGENT AND UNINSURED

**Part VI** Supplemental Information (Continuation)

PATIENTS.

HUH IS A LEVEL ONE (1) TRAUMA CENTER, OFFERING COMPREHENSIVE HEALTH CARE FACILITIES IN WASHINGTON, DC. HUH SERVES THE WASHINGTON, DC POPULATION OF APPROXIMATELY 660,000 PEOPLE. HUH IS A DISPROPORTIONATE SHARE HOSPITAL AND IN FY 2016 OUR GENERAL ADMITTANCE PAYOR MIX FOR MEDICARE AND MEDICAID WAS 25% AND 58%, RESPECTIVELY.

HOWARD IS AMONG THE TOP PRODUCERS OF BLACK MEDICAL STUDENTS. THE MISSION OF HOWARD UNIVERSITY HOSPITAL IS THE PROVISION OF EXCELLENCE, SERVICE, EDUCATION AND RESEARCH IN AN ENVIRONMENT OF SAFETY. IN FURTHERANCE OF ITS COMMITMENT TO EDUCATION, THE HOSPITAL MAINTAINS AN ENVIRONMENT THAT SUPPORTS THE TRAINING OF POSTGRADUATE TRAINEES, MEDICAL, DENTAL, NURSING AND OTHER STUDENTS BY HEALTH CARE PRACTITIONERS.

BETWEEN 2001 AND 2005, THE DISTRICT OF COLUMBIA RANKED SIXTH HIGHEST IN THE NATION FOR CANCER DEATHS, THIRD HIGHEST IN THE NATION FOR COLORECTAL CANCER DEATHS, AND FIRST IN THE NATION FOR DEATHS DUE TO PROSTATE, CERVICAL, AND BREAST CANCERS. HUH'S CANCER CENTER WAS ESTABLISHED IN ORDER TO SERVE MINORITIES AND UNDERSERVED POPULATIONS AND TO ADDRESS HEALTH DISPARITIES. THUS, THE MISSION OF THE CANCER CENTER IS TO REDUCE THE BURDEN OF CANCER THROUGH RESEARCH, EDUCATION, AND SERVICE, WITH EMPHASIS ON THE UNIQUE ETHNIC AND CULTURAL ASPECTS OF MINORITY AND UNDERSERVED POPULATIONS. THE CANCER CENTER, UNDER A GRANT FROM THE DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH AND THE DC CANCER CONSORTIUM, OFFERS FREE COLON CANCER SCREENING TO DISTRICT OF COLUMBIA RESIDENTS BETWEEN THE AGES OF 50 AND 64 AT HOWARD UNIVERSITY HOSPITAL.

**Part VI** Supplemental Information (Continuation)

HOWARD UNIVERSITY'S CENTER FOR SICKLE CELL DISEASE (SCD) WAS FOUNDED BY THE LATE DR. ROLAND B. SCOTT IN 1971 TO ADDRESS THE NEEDS OF PATIENTS AND FAMILIES IN THE WASHINGTON METROPOLITAN AREA AFFECTED BY SCD. THE CENTER IS COMMITTED TO A SIX-FOLD GOAL THAT INCLUDES COMPREHENSIVE MEDICAL CARE, RESEARCH, TESTING, EDUCATION, COUNSELING, AND COMMUNITY OUTREACH.

HOWARD UNIVERSITY CENTER FOR WELLNESS AND WEIGHT LOSS SURGERY, ACCREDITED AS A CENTER FOR EXCELLENCE BY THE BARIATRIC SURGERY CENTER NETWORK (BSCN) ACCREDITATION PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS (ACS) PROVIDES A WELLNESS AND WEIGHT LOSS PROGRAM CUSTOMIZED TO FIT PATIENTS' NEEDS. THE CENTER OFFERS BOTH SURGICAL AND MEDICAL WEIGHT LOSS SOLUTIONS AND THE PROPER TOOLS AND EMOTIONAL SUPPORT TO TRANSFORM A PATIENT'S HEALTH AND LIFE.

IN ADDITION, APPROXIMATELY 19% OF DC RESIDENTS ARE LIVING WITH DISABILITIES AND AT LEAST 3% OF DISTRICT RESIDENTS HAVE HIV OR AIDS, A TOTAL THAT FAR SURPASSES THE 1% THRESHOLD THAT CONSTITUTES A "GENERALIZED AND SEVERE" EPIDEMIC. HUH OPERATES A COMMUNITY ADVISORY BOARD (CAB) AS A PART OF ITS HIV/AIDS PROGRAMS AND IS ALWAYS INTERESTED IN RECRUITING NEW MEMBERS WHO HAVE AN INTEREST IN HIV AND HIV RESEARCH, AND THE IMPACT OF THIS DISEASE IN WASHINGTON, DC AND ACROSS THE WORLD.

PART VI, LINE 5:

HUH IS A PRIVATE, NONPROFIT INSTITUTION AND ONE OF THE NATION'S ONLY TEACHING HOSPITALS LOCATED ON THE CAMPUS OF A HISTORICALLY BLACK UNIVERSITY. IT OFFERS MEDICAL STUDENTS A SUPERIOR LEARNING ENVIRONMENT AND OPPORTUNITIES TO OBSERVE OR PARTICIPATE IN CLINICAL AND RESEARCH WORK WITH PROFESSIONALS. HUH WAS ESTABLISHED ON THE BASIS OF BEING ABLE TO PROVIDE



**Part VI** Supplemental Information (Continuation)

HEALTH CARE SERVICES TO THE UNDERSERVED BY PROVIDING A REFUGE WHERE  
EX-SLAVES RECEIVED THE MEDICAL CARE THEY WERE DENIED ELSEWHERE. IN THIS  
REGARD, HOWARD UNIVERSITY AND HUH HAVE OFFERED THE FOLLOWING PROGRAMS  
DURING THE YEAR:

HOWARD UNIVERSITY COLLEGE OF MEDICINE - PROVIDES STUDENTS OF HIGH  
ACADEMIC POTENTIAL WITH A MEDICAL EDUCATION OF EXCEPTIONAL QUALITY AND  
PREPARES PHYSICIANS AND OTHER HEALTH CARE PROFESSIONALS TO SERVE THE  
UNDERSERVED. THE EMPHASIS IS ON DEVELOPING SKILLS AND HABITS OF LIFE-LONG  
LEARNING AND PRODUCING WORLD LEADERS IN MEDICINE. THE COLLEGE LIVING  
ALUMNI, MORE THAN 4,000, ARE A TESTIMONY THAT AN EXCELLENT MEDICAL  
EDUCATION CAN BE OBTAINED AT HOWARD UNIVERSITY. ALTHOUGH OPPORTUNITIES FOR  
MINORITY STUDENTS HAVE INCREASED AT OTHER MEDICAL SCHOOLS, THE COLLEGE  
UNIQUELY ADDRESSES THE SPECIAL HEALTH CARE NEEDS OF MEDICALLY UNDERSERVED  
COMMUNITIES AND CONTINUES TO PRODUCE A SIGNIFICANT NUMBER OF THE NATION'S  
MINORITY PHYSICIANS.

THE COLLEGE IS A PART OF HOWARD UNIVERSITY, A COMPREHENSIVE RESEARCH  
UNIVERSITY. WHILE THE UNIVERSITY COMMUNITY HAS TRADITIONALLY BEEN  
PREDOMINANTLY BLACK, HOWARD UNIVERSITY HAS BEEN AN INTERRACIAL AND  
COSMOPOLITAN INSTITUTION THROUGHOUT ITS HISTORY, WITH STUDENTS, FACULTY  
AND STAFF OF ALL RACES AND FROM MANY FOREIGN NATIONS. ALL MUST MEET THE  
HIGH STANDARDS OF EXCELLENCE OF HOWARD UNIVERSITY, WHICH HAS THE LARGEST  
CONCENTRATION OF BLACK FACULTY AND STUDENT SCHOLARS IN THE COUNTRY. IN  
ADDITION TO THE COLLEGE OF MEDICINE, THE HOWARD UNIVERSITY HEALTH SCIENCES  
CENTER INCLUDES THE HOWARD UNIVERSITY HOSPITAL; THE COLLEGE OF DENTISTRY;  
THE COLLEGE OF PHARMACY, NURSING AND ALLIED HEALTH SCIENCES; THE LOUIS  
STOKES HEALTH SCIENCES LIBRARY; AND THE STUDENT HEALTH CENTER.

**Part VI** Supplemental Information (Continuation)

COMMUNITY DENTISTRY PROGRAM - THIS DENTAL OUTREACH PROGRAM PROVIDES HEALTH EDUCATION AND DENTAL SCREENING FOR 6- TO 12-YEAR-OLD HOMELESS CHILDREN IN SHELTERS; HEALTH SCREENINGS AND DENTAL CARE FOR YOUNG CHILDREN IN HEAD START PROGRAMS AND THEIR PARENTS; TRAINING FOR NURSING HOME CAREGIVERS IN THE CARE OF THE DENTAL NEEDS OF ELDERS AND ASSESSMENTS OF DENTAL PROSTHESES; AND DENTAL SCREENINGS FOR MENTALLY ILL AND HANDICAPPED PATIENTS.

HIGH SCHOOL ENRICHMENT PROGRAM - THIS 6-WEEK PROGRAM IS INTENDED FOR HIGH SCHOOL STUDENTS WITH A STRONG INTEREST IN THE HEALTH PROFESSIONS. PARTICIPANTS WILL OBTAIN INSTRUCTION IN SCIENCE, MATH, RESEARCH, WRITING, AND COLLEGE PREPARATION SKILLS. RISING SENIORS WILL RESIDE ON CAMPUS AND RECEIVE STIPENDS, PROVIDED FUNDS ARE AVAILABLE.

MULTIDISCIPLINARY CENTER FOR GERONTOLOGY - THE CENTER SEEKS TO IMPROVE THE QUALITY OF LIFE FOR MINORITY SENIORS THROUGH RESEARCH, TRAINING AND EDUCATIONAL PROGRAMS FOR FACULTY, STUDENTS AND COMMUNITY RESIDENTS. ESTABLISHED IN 1994 WITH A \$1 MILLION GRANT FROM THE US ADMINISTRATION ON AGING, THE CENTER IS CURRENTLY FUNDED PRIMARILY BY EXTERNAL GRANTS. THE CENTER HAS CONTINUED TO DEVELOP AND PRODUCE POSITIVE OUTCOMES AND RESULTS IN THE FIELD OF GERONTOLOGY.

SPEECH AND HEARING CLINIC - THE SPEECH AND HEARING CLINIC PROVIDES COMPREHENSIVE RESEARCH-ORIENTED CLINICAL SERVICES TO INDIVIDUALS WHO REQUIRE SPEECH, LANGUAGE AND HEARING EVALUATIONS AND/OR TREATMENT.

BOARDER BABIES - THE PROGRAM PROVIDES SUPPORT FOR BABIES AND CHILDREN FROM

**Part VI** Supplemental Information (Continuation)

BIRTH TO 12 YEARS OLD, WHO HAVE BEEN ABANDONED AT HOWARD UNIVERSITY HOSPITAL, WERE ABUSED OR NEGLECTED AND ARE NOW IN FOSTER CARE OR ARE LIVING WITH GRANDPARENTS OR OTHER RELATIVES.

GRAND ROUNDS FOR COMMUNITY PHYSICIANS - GRAND ROUNDS FOR COMMUNITY PHYSICIANS IS OPEN TO COMMUNITY PHYSICIANS AT NO CHARGE, AND AFFORDS THEM THE OPPORTUNITY TO EARN CATEGORY 1 CREDITS REQUIRED FOR RE-LICENSURE. THE PROGRAM FOCUS IS ON IMPROVING PATIENT CARE AND OUTCOMES.

HEALTH FAIRS - HEALTH FAIRS PROVIDE THE PUBLIC WITH HEALTH CARE INFORMATION AND SCREENING SERVICES IN A VARIETY OF VENUES. HOWARD UNIVERSITY HOSPITAL HAS CO-SPONSORED SUCH FAIRS WITH COMMUNITY ORGANIZATIONS AND CHURCHES.

TOBACCO CONTROL PROGRAM - THE MISSION OF THE TOBACCO CONTROL PROGRAM IS TO EDUCATE THE COMMUNITY ABOUT THE DANGERS OF TOBACCO PRODUCTS. INFORMATION, SUPPORT, AND ASSISTANCE ARE PROVIDED TO SMOKERS WHO ARE TRYING TO QUIT. THE PROGRAM ALSO SUPPORTS INITIATIVES TO PREVENT YOUTH SMOKING AND ADVOCACY CAMPAIGNS TO REDUCE TOBACCO USE AND EXPOSURE.

PART VI, LINE 7, LIST OF STATES RECEIVING COMMUNITY BENEFIT REPORT:

DC

**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.**

▶ **Information about Schedule I (Form 990) and its instructions is at** [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

**THE HOWARD UNIVERSITY**

**Employer identification number**

**53-0204707**

**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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ALABAMA A&M UNIVERSITY 4900 MERIDIAN STREET NORMAL, AL 35762	63-6001097	501 (C) (3)	58,874.	0.			SUPPORT RESEARCH & EDUCATION
AMERICAN INSTITUTES FOR RESEARCH 1000 THOMAS JEFFERSON STREET, NW NEW YORK, NY 10087-8126	25-0965219		6,423.	0.			SUPPORT RESEARCH & EDUCATION
ANACOSTIA ECONOMIC DEVELOPMENT CORP - 1800 MARTIN LUTHER KING JR. AVE SE - WASHINGTON, DC 20020	52-0897780	501 (C) (3)	110,000.	0.			SUPPORT RESEARCH & EDUCATION
ANNEMARIE MINGO 496 LANTERN WOOD DRIVE SCOTTTDALE, GA 30079	59-4569540		2,083.	0.			SUPPORT RESEARCH & EDUCATION
BOWIE STATE UNIVERSITY 14000 JERICHO PARK ROAD BOWIE, MD 20715-9465	52-6002033	501 (C) (3)	52,808.	0.			SUPPORT RESEARCH & EDUCATION
BREATHE DC 1310 SOUTHERN AVE SE WASHINGTON, DC 20011	27-3628781		7,500.	0.			SUPPORT RESEARCH & EDUCATION

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... **15.**

**3** Enter total number of other organizations listed in the line 1 table ..... **47.**

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

**Schedule I (Form 990) (2015)**

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH, PA 15213	25-0969449	501 (C) (3)	115,085.	0.			SUPPORT RESEARCH & EDUCATION
CHILDREN'S RESEARCH INSTITUTE CHILDREN'S MEDICAL CENTER 111 MICHIGAN AVENUE NW - WASHINGTON, DC 20010	52-1654453	501 (C) (3)	272,465.	0.			SUPPORT RESEARCH & EDUCATION
COLLEGE OF WILLIAM AND MARY PO BOX 399 WILLIAMSBURG, VA 23187	54-6001718		29,982.	0.			SUPPORT RESEARCH & EDUCATION
COMMUNITY OUTREACH ASSOCIATES INC 527 U STREET NW WASHINGTON, DC 20001	37-1579080		41,221.	0.			SUPPORT RESEARCH & EDUCATION
CORNELL UNIVERSITY 750 CASCADILLA STREET ITHACA, NY 14851	15-0532082	501 (C) (3)	151,632.	0.			SUPPORT RESEARCH & EDUCATION
CULTURALLY RESPONSIVE EVALUATION STRATEGIES & TECHNOLOGIES 14900 WILLOW HILL LN - CHESTERFIELD, VA 23832	27-1066296		43,405.	0.			SUPPORT RESEARCH & EDUCATION
CYNTHIA D ROBBINS 4600 CONNECTICUT AVE NW WASHINGTON, DC 20003	12-4545267		60,000.	0.			SUPPORT RESEARCH & EDUCATION
EAST CAROLINA UNIVERSITY GRANTS AND CONTRACTS, 2200 S CHARLES BLVD - GREENVILLE, NC 27858	56-6000403		10,506.	0.			SUPPORT RESEARCH & EDUCATION
ECONOMIC POLICY INSTITUTE 1333 H STREET, NW WASHINGTON, DC 20005-4707	52-1368964	501 (C) (3)	4,583.	0.			SUPPORT RESEARCH & EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
FAMILY AND MEDICAL COUNSELING SERIVCE - 2041 MARTIN LUTHER KING JR AVE SE - WASHINGTON, DC 20020	52-1073362		10,000.	0.			SUPPORT RESEARCH & EDUCATION
FAMU CONTROLLER'S OFFICE - RM 201 FHAC TALLAHASSEE, FL 32397	59-0977085		105,466.	0.			SUPPORT RESEARCH & EDUCATION
GALLAUDET UNIVERSITY 800 FLORIDA AVENUE, NE WASHINGTON, DC 20002	53-0197507	501 (C) (3)	71,122.	0.			SUPPORT RESEARCH & EDUCATION
GEORGETOWN UNIVERSITY MEDICAL CENTER, 3970 RESERVOIR ROAD NW - WASHINGTON, DC 20057-1159	53-0196603	501 (C) (3)	72,673.	0.			SUPPORT RESEARCH & EDUCATION
HAMPTON UNIVERSITY CAREER COUNSELING & PLANNING CENTER 114 WIGMAN BUILDING - HAMPTON, VA 23668	54-0505990	501 (C) (3)	201,312.	0.			SUPPORT RESEARCH & EDUCATION
HENRY WELLS III 9221 STAHELIN DETROIT, MI 48228	37-7722584		2,083.	0.			SUPPORT RESEARCH & EDUCATION
IBH HEALTH CONSULTING 4708 NE 45TH STREET SEATTLE, WA 98105	47-1404074		12,019.	0.			SUPPORT RESEARCH & EDUCATION
INDIANA UNIVERSITY P O BOX 66248 INDIANAPOLIS, IN 46266-6248	35-6001673		35,633.	0.			SUPPORT RESEARCH & EDUCATION
INSTITUTE FOR CLINICAL RESEARCH INC - PO BOX 29545 - WASHINGTON, DC 20017	52-1336656		29,112.	0.			SUPPORT RESEARCH & EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
JACKSON STATE UNIVERSITY P O BOX 17250 JACKSON, MS 39217	64-6000507		247,984.	0.			SUPPORT RESEARCH & EDUCATION
JOHNS HOPKINS UNIVERSITY JOHNS HOPKINS UNIVERSITY CENTRAL LO CHICAGO, IL 60693	52-0595110	501 (C) (3)	781,251.	0.			SUPPORT RESEARCH & EDUCATION
KESSLYN A BRADE STENNIS 10517 GENTIAN CT UPPER MARLBORO, MD 20772	22-8964807		12,500.	0.			SUPPORT RESEARCH & EDUCATION
MARCIVE INC P O BOX 47508 SAN ANTONIO, TX 78265	74-2186432		10,900.	0.			SUPPORT RESEARCH & EDUCATION
MEDSTAR HEALTH RESEARCH INSTITUTE 6525 BELCREST ROAD HYATTSVILLE, MD 20782	52-6056274		37,015.	0.			SUPPORT RESEARCH & EDUCATION
MORGAN STATE UNIVERSITY 1700 E COLD SPRING LANE BALTIMORE, MD 21251	54-6002808		133,907.	0.			SUPPORT RESEARCH & EDUCATION
NORFOLK STATE UNIVERSITY 700 PARK AVENUE NORFOLK, VA 23504	54-6002808		93,249.	0.			SUPPORT RESEARCH & EDUCATION
NORTH CAROLINA A&T STATE UNIVERSITY - 1601 E MARKET STREET - GREENSBORO, NC 27411	56-6000007		79,468.	0.			SUPPORT RESEARCH & EDUCATION
OPTIMOS LLC 3130 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042	54-1691709		74,775.	0.			SUPPORT RESEARCH & EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
PENN STATE UNIVERSITY PRESS 820 NORTH UNIVERSITY PRESS UNIVERSITY PARK, PA 16802	24-6000376		44,508.	0.			SUPPORT RESEARCH & EDUCATION
POLYVEA INC 3905 BYRD ROAD KINGSTON, MD 20895	45-4652027		136,739.	0.			SUPPORT RESEARCH & EDUCATION
PRAIRIE VIEW A M UNIVERSITY 400 HARVEY MITCHELL PKWY SOUTH COLLEGE STATION, TX 77845	74-6001078		108,675.	0.			SUPPORT RESEARCH & EDUCATION
PRECISION SYSTEMS INCORPORATED 2713 NEWLANDS STREET NW WASHINGTON, DC 20015	52-1902336		156,569.	0.			SUPPORT RESEARCH & EDUCATION
PRINCE GEORGES COMMUNITY COLLEGE 301 LARGO ROAD LARGO, MD 20774-2199	23-7011243		29,181.	0.			SUPPORT RESEARCH & EDUCATION
RODOLFO PEREZ- ALAMINO POSTAL CODE 4000 TUDUMAN - SAN MIGUEL DE TUCUMAN, TUCUMAN, ARGENTINA	17-1644659		5,253.	0.			SUPPORT RESEARCH & EDUCATION
SAM SCHWARTZ ENGINEERING D.P.C. 322 EIGHTH AVE NEW YORK, NY 10001	46-1885050		15,000.	0.			SUPPORT RESEARCH & EDUCATION
SARAH F FARMER 7086 CREEKSONG DRIVE DOUGLASVILLE, GA 30134	17-1644659		6,250.	0.			SUPPORT RESEARCH & EDUCATION
SHARMON L THORNTON 1101 S ARLINGTON RIDGE ROAD ARLINGTON, VA 22202-1925	30-1489762		75,455.	0.			SUPPORT RESEARCH & EDUCATION

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
SMARTSTART EVALUATION AND RESEARCH 4482 BARRANCA PARKWAY IRVINE, CA 92604	14-2007437		12,870.	0.			SUPPORT RESEARCH & EDUCATION
SOUTHERN UNIVERSITY COMPTROLLERS OFFICE BATON ROUGE, LA 70813	72-6000817		127,726.	0.			SUPPORT RESEARCH & EDUCATION
TENNESSEE STATE UNIVERSITY 3500 JOHN A MERRITT BOULEVARD NASHVILLE, TN 37209	23-7105693		72,675.	0.			SUPPORT RESEARCH & EDUCATION
THE OHIO STATE UNIVERSITY OFFICE OF SPONSORED PROGRAMS, 1960 KENNY ROAD - COLUMBUS, OH 43219	31-3025986		33,895.	0.			SUPPORT RESEARCH & EDUCATION
THE RESEARCH FOUNDATION OF SUNY PRESS - UNIVERSITY AT ALBANY 685 BALDY HALL - BUFFALO, NY 14260	14-1368361	501 (C) (3)	128,508.	0.			SUPPORT RESEARCH & EDUCATION
THE UNIVERSITY OF AKRON 302 BUCHTEL COMMON AKRON, OH 44325	34-6002924		60,708.	0.			SUPPORT RESEARCH & EDUCATION
TRUSTEE OF DARTMOUTH COLLEGE UNIVERSITY PRESS OF NEW ENGLAND LEBANON, NH 03766	02-0222111	501 (C) (3)	47,433.	0.			SUPPORT RESEARCH & EDUCATION
TUSKEGEE UNIVERSITY COLLEGE OF AGRICULTURE, ENVIRONMENTAL & NATURAL SCIENCES - TUSKEGEE, AL 3608	62-0288878	501 (C) (3)	49,191.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF FLORIDA CHEMICAL ENGINEERING EDUCATION, UNIVERSITY OF FLORIDA - GAINESVILLE, FL 3261	52-6002033		186,432.	0.			SUPPORT RESEARCH & EDUCATION

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF HAWAII HAMILTON LIBRARY ROOM 101 HONOLULU, HI 96822	99-6000354		64,683.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF MARYLAND 1000 HILLTOP CIRCLE BALTIMORE, MD 21250	52-6002033	501 (C) (3)	398,551.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF NEVADA LAS VEGAS 4505 SOUTH MARYLAND PKWY LAS VEGAS, NV 89154	88-6000024		300.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF PUERTO RICO AT MAYAGUEZ - RESEARCH AND DEV CENTER P O BOX 9001 - MAYAGUEZ, PR 00681-9001	74-6000813		241,665.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF SOUTHERN CALIFORNIA NORRIS MEDICAL LIBRARY LOS ANGELES, CA 90089-1052	95-1642394		37,758.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF TEXAS AT ELPASO 500 WEST UNIVERSITY AVE EL PASO, TX 79968-0697	74-6000813		121,152.	0.			SUPPORT RESEARCH & EDUCATION
UNIVERSITY OF THE DISTRICT OF COLUMBIA - 4200 CONNECTICUT AVE NW - WASHINGTON, DC 20008	53-6001131		106,479.	0.			SUPPORT RESEARCH & EDUCATION
VIRGINIA POLYTECHNIC INSTITUTE AND STATE - 300 TURNER STREET SUITE 4200 - BLACKSBURG, VA 24061-0001	54-6001805		16,122.	0.			SUPPORT RESEARCH & EDUCATION
VIRGINIA STATE UNIVERSITY GRANTS AND CONTRACTS PETERSBURG, VA 23806	54-6001811		51,514.	0.			SUPPORT RESEARCH & EDUCATION

Schedule I (Form 990)



**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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	5102	91,347,559.	0.		

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

PART I, LINE 2:

MONITORING USE OF GRANT FUNDS TO ORGANIZATIONS IN THE UNITED STATES:

THE OFFICE OF FINANCIAL AID DETERMINES STUDENT ELIGIBILITY AND MAKES AWARDS

FOR NEED BASED SCHOLARSHIPS. ACADEMIC DEPARTMENTS DETERMINE ELIGIBILITY AND

AWARDS ACADEMIC MERIT BASED SCHOLARSHIPS WITH ASSISTANCE FROM THE OFFICE OF

FINANCIAL AID. BOTH OFFICES PERFORM POST AWARD MONITORING TO DETERMINE

CONTINUED ELIGIBILITY.

THE RESEARCH AND ADMINISTRATIVE SERVICES OFFICE (RAS) PERFORMS

**Part IV** Supplemental Information

SUB-RECIPIENT MONITORING IN ACCORDANCE WITH UNIVERSITY POLICY. RAS AND  
PRINCIPAL INVESTIGATORS MONITOR STATEMENT OF WORK COMPLETION, PROGRESS  
REPORTS, DELIVERABLES, CHANGE TO SCOPE AND BUDGETS. THEY ALSO REVIEW AND  
APPROVE SUB-RECIPIENT INVOICES.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

Open to Public  
Inspection

Name of the organization

THE HOWARD UNIVERSITY

Employer identification number

53-0204707

**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 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 checked="" type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)            |

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

**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 in line 1a? .....

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input 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? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- 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? .....
- b** Any related organization? .....
- If "Yes" to 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? .....
- b** Any related organization? .....
- 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 non-fixed 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

Yes No

<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>	X	
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2015

**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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DR. MOSES GARUBA FACULTY TRUSTEE	(i)	138,931.	0.	0.	10,062.	18,852.	167,845.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) WAYNE A.I. FREDERICK, MD PRESIDENT	(i)	850,000.	90,000.	89,671.	20,800.	19,851.	1,070,322.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MR. MICHAEL MASCH CHIEF FINANCIAL OFFICER	(i)	201,923.	0.	0.	12,115.	12,747.	226,785.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) FLORENCE PRIOLEAU, ESQ. GENERAL COUNSEL	(i)	287,584.	0.	0.	21,200.	9,052.	317,836.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DR. ANTHONY WUTOH PROVOST, CAO FROM 07/15	(i)	299,712.	0.	0.	20,577.	18,685.	338,974.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MS. LAURA JACK VP FOR DEVELOPMENT FROM 07/15	(i)	155,885.	0.	0.	12,471.	8,519.	176,875.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DR. CONSTANCE ELLISON VP FOR STUDENT AFFAIRS ENDED 02/16	(i)	185,000.	0.	0.	14,800.	9,206.	209,006.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MS. GRACIA HILLMAN VICE PRESIDENT OF EXTERNAL	(i)	235,000.	0.	0.	18,800.	8,518.	262,318.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MS. CAROLYN BOSTICK VP OF HUMAN RESOURCES	(i)	167,865.	0.	0.	9,923.	12,068.	189,856.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) REBAT HALDER, MD CHAIR OF DERMATOLOGY	(i)	437,959.	20,000.	52,087.	21,200.	10,623.	541,869.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) DAMIREZ FOSSETT, MD CHAIR OF NEUROSURGERY	(i)	510,800.	0.	0.	21,200.	19,094.	551,094.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) EDWARD CORNWELL, MD SURGEON-IN-CHIEF	(i)	825,614.	0.	0.	20,800.	19,851.	866,265.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) NAM NGUYEN, MD CHAIR OF RADIATION THERAPY	(i)	500,000.	0.	0.	21,200.	9,977.	531,177.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) CHILEDUM AHAGHOTU, MD ASSISTANT PROFESSOR OF UROLOGY	(i)	485,700.	0.	0.	21,200.	20,575.	527,475.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) DR. SIDNEY RIBEAU FORMER PRESIDENT	(i)	274,775.	0.	25,173.	21,200.	19,351.	340,499.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) DR. MICHAEL WINSTON FORMER PROVOST ENDED 06/15	(i)	319,651.	0.	0.	21,200.	18,335.	359,186.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

**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 are not listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) MS. NESTA BERNARD	(i)	195,540.	0.	125,000.	12,710.	13,343.	346,593.	0.
FORMER VP FOR DEVE RETIRED 08/15	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) DR. BARBARA GRIFFIN	(i)	185,000.	0.	0.	14,800.	18,116.	217,916.	0.
FORMER VP STUDENT AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) ARTIS HAMPSHIRE-COWAN, ESQ.	(i)	250,000.	0.	0.	20,000.	2,757.	272,757.	0.
FORMER SENIOR VP AND SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**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.

**PART I, LINE 1A:****QUESTIONS REGARDING COMPENSATION:****TRAVEL FOR COMPANIONS:**

THE UNIVERSITY REIMBURSES REASONABLE AND NECESSARY TRAVEL EXPENSES WHEN THE  
PRESIDENT'S SPOUSE'S PRESENCE IS IN THE BEST INTEREST OF THE UNIVERSITY ON  
BUSINESS RELATED TRIPS IN ACCORDANCE WITH PRESIDENT'S EMPLOYMENT AGREEMENT.

**TAX INDEMNIFICATION AND GROSS-UP PAYMENTS:**

THE UNIVERSITY PROVIDED A GROSS-UP PAYMENT TO THE PRESIDENT FOR PAYMENT OF  
A HOUSING ALLOWANCE FOR USE OF HIS PERSONAL RESIDENCE TO CONDUCT  
SIGNIFICANT UNIVERSITY RELATED BUSINESS.

**HOUSING ALLOWANCES OR RESIDENCE FOR PERSONAL USE:**

THE UNIVERSITY PROVIDES A HOUSING ALLOWANCE PAYMENT TO THE PRESIDENT FOR  
SIGNIFICANT USE OF HIS PERSONAL RESIDENCE FOR OFFICIAL UNIVERSITY RELATED  
BUSINESS TO DEFRAY COSTS RELATED TO THE UPKEEP, UTILIZATION AND MAINTENANCE  
OF HIS PERSONAL RESIDENCE. ALLOWANCE PAYMENT WAS INCLUDED IN THE  
PRESIDENT'S W-2 AS COMPENSATION AND IS REPORTED IN SCHEDULE J PART II AS

**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.

**OTHER REPORTABLE COMPENSATION.****HEALTH OR SOCIAL CLUB DUES:**

THE UNIVERSITY PAID OR REIMBURSED THE PRESIDENT FOR THE DUES AND NORMAL PERIODIC ASSESSMENTS INCURRED FOR MEMBERSHIP FOR TWO CLUBS. THE USE OF THE MEMBERSHIP IN BOTH BUSINESS CLUBS IS LIMITED TO UNIVERSITY BUSINESS AND NOT REPORTED AS TAXABLE INCOME.

**PERSONAL SERVICES:**

AN AUTOMOBILE (ALONG WITH DRIVER) ARE PROVIDED TO THE PRESIDENT BY THE UNIVERSITY AS NEEDED FOR UNIVERSITY-RELATED BUSINESS. THESE SERVICES ARE FOR BUSINESS PURPOSES ONLY, AND AS SUCH, HAVE NOT BEEN REPORTED AS TAXABLE INCOME.

**SCHEDULE J, PART I, LINE 4A****SEVERANCE OR CHANGE OF CONTROL PAYMENTS:**

DURING THE YEAR ENDED JUNE 30, 2016, THE FOLLOWING INDIVIDUAL LISTED IN PART VII RECEIVED SEVERANCE PAYMENTS IN ACCORDANCE WITH THE PROVISIONS OF HER EMPLOYMENT AGREEMENT:

**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.

NESTA BERNARD      \$125,000

## SCHEDULE J, PART I, LINE 4B

## SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN:

THE UNIVERSITY FUNDS A NON-QUALIFIED DEFERRED COMPENSATION PLAN FOR THE  
PRESIDENT IN THE AMOUNT OF \$75,000 ANNUALLY PLUS SIX PERCENT INTEREST.  
AMOUNT FUNDED PLUS INTEREST FOR THE YEAR ENDED JUNE 30, 2016 TOTALED  
\$79,500.

## PART I, LINE 7:

HOWARD UNIVERSITY OFFERED A FACULTY PHASED RETIREMENT PROGRAM (PRP) IN FY  
2012 TO TENURED FACULTY WITH A MINIMUM FIVE YEARS OF CREDITED SERVICE AND  
70 OR MORE COMBINED YEARS OF AGE AND SERVICE. THE UNIVERSITY CALCULATED THE  
RETIREMENT INCENTIVE PAYMENT BASED ON TWO WEEKS FOR EVERY YEAR OF SERVICE  
CAPPED AT 52 WEEKS USING THE HIGHEST ANNUAL PAY RATE WITHIN THE THREE YEARS  
PRIOR TO THE RETIREMENT DATE. PARTICIPANTS COULD ELECT TO BE PAID IN FULL  
OR PROPORTIONATELY OVER A MAXIMUM FIVE YEAR PHASE OUT PERIOD. THERE WERE  
174 FACULTY THAT ELECTED TO PARTICIPATE IN THIS PROGRAM.

**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.

ONE FACULTY MEMBER IN THIS SECTION RECEIVED PRP PAYMENTS AND AMOUNTS ARE  
REPORTED IN SCHEDULE J-PART II AS OTHER REPORTABLE COMPENSATION AS FOLLOWS:

REBAT HALDER, MD \$52,087

ALSO, THE UNIVERSITY PAID UNUSED VACATION LEAVE IN ACCORDANCE WITH THE  
ANNUAL LEAVE POLICY TO THE FORMER PRESIDENT WHO TRANSITIONED TO FACULTY  
STATUS IN APRIL 2015. THE AMOUNTS ARE REPORTED ON SCHEDULE J-PART II AS  
OTHER COMPENSATION AS FOLLOWS:

SIDNEY RIBEAU \$25,173

CURRENT AND FORMER OFFICERS

DURING CALENDAR YEAR 2015 AND FISCAL YEAR 2016, FORMER OFFICER MICHAEL  
WINSTON TENURE AS PROVOST ENDED JUNE 30, 2015. ANTHONY WUTOH COMMENCED HIS  
TENURE AS PROVOST ON JULY 1, 2015. NESTA BERNARD RETIRED AS VICE PRESIDENT  
FOR DEVELOPMENT EFFECTIVE AUGUST 18, 2015. LAURA JACK COMMENCED HER TENURE  
AS INTERIM VICE PRESIDENT FOR DEVELOPMENT ON JULY 1, 2015. CONSTANCE

**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.

ELLISON ENDED HER POSITION AS VICE PRESIDENT FOR STUDENT AFFAIRS ON  
FEBRUARY 28, 2016. KENNETH HOLMES STARTED HIS TENURE AS VICE PRESIDENT FOR  
STUDENT AFFAIRS ON FEBRUARY 9, 2016. THESE INDIVIDUALS SERVED THE  
UNIVERSITY FOR ONLY A PORTION OF THE YEAR AND THEREFORE ARE LISTED AS  
OFFICER.

**Supplemental Information on Tax-Exempt Bonds**

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

▶ **Attach to Form 990.** ▶ **Information about Schedule K (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization

**THE HOWARD UNIVERSITY**

**Employer identification number**  
**53-0204707**

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A DISTRICT OF COLUMBIA	53-6001131	NONE	08/26/10	10400000.	SEE PART VI		X		X		X
B DISTRICT OF COLUMBIA	53-6001131	25483VDK7	04/27/11	220245253.	SEE PART VI		X		X		X
C											
D											

**Part II Proceeds**

	A		B		C		D	
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue				169,163,175.				
4 Gross proceeds in reserve funds				9,738,259.				
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows				43,301,030.				
7 Issuance costs from proceeds		196,236.		3,650,654.				
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds		10,400,800.		97,405,836.				
11 Other spent proceeds								
12 Other unspent proceeds				5,023,164.				
13 Year of substantial completion								
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	X			X				
15 Were the bonds issued as part of an advance refunding issue?		X		X				
16 Has the final allocation of proceeds been made?	X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

**Part III Private Business Use**

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

**Part III Private Business Use** (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X	X					
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? .....			X					
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X	X					
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? .....			X					
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		%	1.30	%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%	1.30	%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		X		X				
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		X		X				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....		X		X				

**Part IV Arbitrage**

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

**Part IV Arbitrage** (Continued)

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

**Part V Procedures To Undertake Corrective Action**

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

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).**SCHEDULE K, PART I, BOND ISSUES**

(A) ISSUER NAME: DISTRICT OF COLUMBIA

DESCRIPTION OF PURPOSE: FINANCE AND REFINANCE THE COST OF INSTALLING, REPAIRING, AND REPLACING ENERGY EFFICIENT ELECTRICAL AND MECHANICAL SYSTEMS IN MULTIPLE BUILDINGS LOCATED ON THE MAIN CAMPUS, EAST CAMPUS AND WEST CAMPUS.

(B) ISSUER NAME: DISTRICT OF COLUMBIA

DESCRIPTION OF PURPOSE: REFUND SERIES 1998, SERIES 2006 A AND SERIES 2006 B OUTSTANDING DEBT; FINANCE A NEW INTERDISCIPLINARY RESEARCH BUILDING, RENOVATE AND MODERNIZE CLASSROOMS, UPGRADE LABORATORIES, REPLACE ROOFS, UPGRADE BUILDING SAFETY AND ACCESS, HEATING, AIR CONDITION AND SPRINKLER SYSTEMS, AND OTHER RENOVATION PROJECTS.

**SCHEDULE K, PART IV, ARBITRAGE, LINE 2C**

(A) ISSUER NAME: DISTRICT OF COLUMBIA

DATE THE REBATE COMPUTATION WAS PERFORMED: JUNE 16, 2016

(B) ISSUER NAME: DISTRICT OF COLUMBIA

DATE THE REBATE COMPUTATION WAS PERFORMED: JUNE 16, 2016



**SCHEDULE L**  
**(Form 990 or 990-EZ)**

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.**  
▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2015**

**Open To Public  
Inspection**

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THE HOWARD UNIVERSITY

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53-0204707

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

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

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

- 2 Enter the amount of tax incurred by 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

Total ..... ▶ \$

**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
		18,000.	MERIT SCHOLAR	EDUCATION

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

Schedule L (Form 990 or 990-EZ) 2015

SEE PART V FOR CONTINUATIONS

## Part IV

**(a) Name of interested person**

(c) Amount of transaction

**(d) Description of transaction**

(e) Sharing of organization's revenues?	
---	--

Yes	No
-----	----

## Part V

SCH L, PART III, GRANTS OR ASSISTANCE BENEFITTING INTERESTED PERSONS:

(C) AMOUNT OF GRANT \$ 18,000.

(D) TYPE OF ASSISTANCE: MERIT SCHOLARSHIP

(E) PURPOSE OF ASSISTANCE: EDUCATION

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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FORM 990, PART VI, SECTION B, LINE 11:

REVIEW OF THE FORM 990 BY GOVERNING BOARD: A MEETING OF THE AUDIT AND LEGAL COMMITTEES (A&LC) OF THE BOARD OF TRUSTEES IS HELD TO PRESENT AND REVIEW A DRAFT OF THE FULL FORM 990, INCLUDING ALL APPLICABLE SCHEDULES. EACH A&LC COMMITTEE MEMBER IS PROVIDED A COPY OF THE RETURN PRIOR TO THE MEETING. AT THE MEETING THEY ARE ALLOWED TO ASK QUESTIONS REGARDING THE FORM 990. CHANGES ARE DOCUMENTED AND THE FORM 990 IS UPDATED. A FINAL DRAFT OF THE FULL FORM 990 IS PROVIDED ELECTRONICALLY TO EACH MEMBER OF THE FULL BOARD FOR REVIEW. ONCE THE BOARD HAS HAD TIME TO REVIEW AND COMMENT ON THE FORM 990, IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

COMPLIANCE WITH CONFLICT OF INTEREST POLICY: ANNUAL DISCLOSURE IS REQUIRED OF EACH OFFICER, DIRECTOR, TRUSTEE AND KEY EMPLOYEE. EACH PERSON COMPLETES AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE. ONCE THE CONFLICT OF INTEREST QUESTIONNAIRES ARE COMPLETED, THEY ARE REVIEWED BY THE CHIEF COMPLIANCE OFFICER/OFFICE OF THE GENERAL COUNSEL. IF AN ACTUAL CONFLICT OF INTEREST IS DETERMINED TO EXIST, THAT PERSON IS EXCLUDED FROM ANY DISCUSSIONS CONCERNING THE CONFLICTING ISSUE AND IS NOT PERMITTED TO VOTE ON ANY DECISIONS REGARDING THE CONFLICTING ISSUE.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION OF THE CEO, EXECUTIVE DIRECTOR, OR OTHER TOP MANAGEMENT OFFICIAL: THE PROCESS FOR DETERMINING THE COMPENSATION OF THE ORGANIZATION'S PRESIDENT INCLUDED A REVIEW AND APPROVAL BY THE BOARD OF TRUSTEES, WHICH CONSISTED OF ONLY INDEPENDENT PERSONS. THE BOARD OF

Name of the organization

THE HOWARD UNIVERSITY

Employer identification number

53-0204707

TRUSTEES USED A CUSTOMIZED SURVEY OF HOWARD UNIVERSITY'S BENCHMARK INSTITUTIONS CREATED BY PRM CONSULTING TO DETERMINE THE COMPENSATION. THE BOARD OF TRUSTEES CONDUCTS AN ANNUAL PERFORMANCE REVIEW OF THE PRESIDENT AND ADJUST COMPENSATION BASED ON ACHIEVEMENT OF AGREED UPON GOALS AND OBJECTIVES. THE PROCESS WAS DOCUMENTED IN THE BOARD MEETING MINUTES.

FORM 990, PART VI, SECTION C, LINE 19:

PUBLIC DISCLOSURE OF GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

UNREALIZED CHANGE IN FUNDED STATUS OF DEFINED BENEFIT

PENSION PLAN -40,712,000.

UNREALIZED CHANGE IN OBLIGATION FOR POST RETIREMENT BENEFIT

PLAN -19,244,000.

UNREALIZED CHANGE IN OBLIGATION FOR SUPPLEMENTAL RETIREMENT

BENEFIT PLAN 142,000.

GAIN ON DISPOSAL OF PROPERTY 18,581,000.

TOTAL TO FORM 990, PART XI, LINE 9 -41,233,000.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

FORM 990, PART X, LINE 8

INVENTORIES USED AS PART OF THE HOSPITAL'S OPERATIONS WERE PREVIOUSLY

Name of the organization

THE HOWARD UNIVERSITY

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53-0204707

REPORTED AS OTHER ASSETS ON LINE 15 OF PART X. FOR THE CURRENT YEAR

THIS HAS BEEN DISAGGREGATED AND REPORTED ON LINE 8, INVENTORIES FOR

SALE OR USE.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization

**THE HOWARD UNIVERSITY**

Employer identification number

**53-0204707**

**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

**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
WASHINGTON RESEARCH LIBRARY CONSORTIUM - 52-1559828, 901 COMMERCE DRIVE, UPPER MARLBORO, MD 20774	LIBRARY SERVICES	DISTRICT OF COLUMBIA	501(C)(3)	LINE 11B, II	N/A		X
HOWARD UNIVERSITY GLOBAL INITIATIVE - NIGERIA, 2400 6TH STREET NW, WASHINGTON, DC 20059	EDUCATION	NIGERIA			HOWARD UNIVERSITY		X
HOWARD UNIVERSITY INTERNATIONAL 2400 6TH STREET NW WASHINGTON, DC 20059	EDUCATION	DISTRICT OF COLUMBIA	501(C)(3)		HOWARD UNIVERSITY		X

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

Schedule R (Form 990) 2015

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

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

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

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

**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 (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	<b>1a</b>	X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	X
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	X
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	X
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	X
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	X
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	X
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	X
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	X
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	X
<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
(1) WASHINGTON RESEARCH LIBRARY CONSORTIUM HOWARD UNIVERSITY GLOBAL INITIATIVE -	M	764,355.	CASH
(2) NIGERIA	R	4,745,095.	CASH
(3)			
(4)			
(5)			
(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.

[illegible]

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



1867

**HOWARD**  

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**UNIVERSITY**

**The Howard University**

Consolidated Financial Statements

For Fiscal Years Ended June 30, 2016, 2015, and 2014

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799 9<sup>th</sup> Street NW  
Suite 710  
Washington, DC 20001

## Independent Auditor's Report

Board of Trustees  
The Howard University  
Washington, DC

We have audited the accompanying consolidated financial statements of The Howard University, which comprise the consolidated statements of financial position as of June 30, 2016, 2015 and 2014, and the related consolidated statements of activities and cash flows for the years then ended, and the related notes to the consolidated financial statements.

### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### *Auditor's Responsibility*

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### *Opinion*

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of The Howard University as of June 30, 2016, 2015 and 2014, and the changes in its net assets and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### *Report on Summarized Comparative Information*

We have previously audited The Howard University's 2015 and 2014 consolidated financial statements, and we expressed unmodified opinions on those consolidated financial statements in our reports dated December 10, 2015 and December 23, 2014, respectively. In our opinion, the summarized comparative information presented herein as of and for the years ended June 30, 2015 and 2014 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

*BDO USA, LLP*

November 23, 2016

**Office of the Senior Vice President  
Chief Financial Officer and Treasurer**

**Report of Treasurer on Financial Statements**

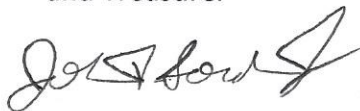
The administration of The Howard University is responsible for the preparation, accuracy, integrity and objectivity of the financial statements contained herein. Such financial statements have been prepared in conformity with accounting principles generally accepted in the United States of America and, accordingly, include certain amounts that represent our best estimates and judgments. Actual amounts could differ from those estimates.

These financial statements have been prepared under my supervision. Based on my knowledge, these financial statements present fairly, in all material respects, the financial position, changes in net assets and cash flows of The Howard University for the periods presented herein.

Furthermore, I hereby certify that The Howard University, as Borrower under separate agreements with certain banks and lending institutions, is in compliance with the respective financial covenants as of June 30, 2016, as described in Note 18 of the accompanying financial statements.



Michael J. Masch  
Senior Vice President, Chief Financial Officer  
and Treasurer



John D. Gordon, Jr. MS, CPA, CGMA  
Controller and Chief Accounting Officer

November 23, 2016

<b>Statements of Financial Position</b> <b>As of June 30, 2016, 2015 and 2014</b> <i>(in thousands)</i>			
	2016	2015	2014
<b>Current assets:</b>			
Cash and cash equivalents	\$ 45,294	\$ 22,522	\$ 14,820
Operating investments	34,433	36,333	40,095
Deposits with trustees	348	137	971
Receivables, net	145,783	63,532	72,907
Operating leases	1,895	1,746	900
Inventories, prepaids and other current assets	11,904	10,701	11,748
Restricted Investments	37,820	45,911	42,118
<b>Total current assets</b>	<b>277,477</b>	<b>180,882</b>	<b>183,559</b>
<b>Long term assets:</b>			
Deposits with trustees	14,303	14,120	12,882
Receivables, net	76,657	53,729	53,826
Operating leases	12,596	14,491	16,237
Inventories, prepaids and other noncurrent assets	27,654	16,398	17,457
Unexpended bond proceeds	5,027	10,440	46,325
Restricted investments	3,152	2,190	2,122
Endowment investments	577,132	590,659	591,902
Long-lived assets	576,453	619,743	625,602
<b>Total long term assets</b>	<b>1,292,974</b>	<b>1,321,770</b>	<b>1,366,353</b>
<b>Total assets</b>	<b>\$ 1,570,451</b>	<b>\$ 1,502,652</b>	<b>\$ 1,549,912</b>
<b>Current liabilities:</b>			
Accounts payable and accrued expenses	\$ 99,482	\$ 143,350	\$ 122,955
Deferred revenue	107,391	14,081	10,000
Deferred rent payable	1,895	\$ 1,746	900
Other liabilities	8,522	11,309	11,010
Accrued post retirement benefits	4,505	4,293	5,471
Reserves for self-insured liabilities	6,918	11,543	6,440
Notes payable	-	98,971	23,948
Financing lease obligations	6,570	8,754	9,571
Bonds payable	1,602	1,838	406
<b>Total current liabilities</b>	<b>236,885</b>	<b>295,885</b>	<b>190,701</b>
<b>Long term liabilities:</b>			
Deferred revenue	1,175	-	-
Deferred rent payable	12,596	14,491	16,237
Other liabilities	15,267	18,216	19,165
Accrued post retirement benefits	63,103	59,145	65,831
Underfunded defined benefit pension plan	166,678	130,128	106,629
Reserves for self-insured liabilities	80,293	83,005	80,191
Notes payable	-	-	46,499
Financing lease obligations	18,475	24,734	34,554
Bonds payable	449,474	291,016	292,788
Refundable advances under Federal Student Loan Program	6,390	6,827	6,369
<b>Total long term liabilities</b>	<b>813,451</b>	<b>627,562</b>	<b>668,263</b>
<b>Total liabilities</b>	<b>1,050,336</b>	<b>923,447</b>	<b>858,964</b>
<b>Net Assets:</b>			
Unrestricted	155,513	200,180	308,222
Temporarily restricted	236,353	250,919	256,783
Permanently restricted	128,249	128,106	125,943
<b>Total net assets</b>	<b>520,115</b>	<b>579,205</b>	<b>690,948</b>
<b>Total liabilities and net assets</b>	<b>\$ 1,570,451</b>	<b>\$ 1,502,652</b>	<b>\$ 1,549,912</b>

The accompanying notes are an integral part of these consolidated financial statements.



Statements of Activities For The Fiscal Year Ended June 30, 2016 (with summarized comparative information for the fiscal years ended June 30, 2015 and 2014) (in thousands)				2016	2015	2014
Operating	Unrestricted	Temporarily Restricted	Permanently Restricted			
<b>Revenues and reclassifications:</b>						
Academic services:						
Tuition and fees, net	\$ 155,453	\$ -	\$ -	\$ 155,453	\$ 154,068	\$ 164,722
Grants and contracts	56,379	-	-	56,379	64,450	57,048
Auxiliary services	52,481	-	-	52,481	53,998	64,937
Clinical services:						
Patient service - Hospital	228,075	-	-	228,075	230,915	209,752
Patient service - Faculty medical practice	27,012	-	-	27,012	25,401	33,802
Patient service - Dental clinic	1,594	-	-	1,594	2,450	2,202
Public support:						
Federal appropriation	218,416	3,405	-	221,821	212,035	222,751
Contributions	4,156	(433)	6,832	10,555	12,442	12,298
Endowment transfer	6,581	7,217	476	14,274	13,718	13,096
Operating investment income (loss)	(1,015)	-	-	(1,015)	966	7,053
Other income	17,529	1,827	(2,909)	16,447	16,505	16,459
<b>Total revenues</b>	<b>766,661</b>	<b>12,016</b>	<b>4,399</b>	<b>783,076</b>	<b>786,948</b>	<b>804,120</b>
Net assets released from restrictions	14,296	(14,296)	-	-	-	-
<b>Total revenues and reclassifications</b>	<b>780,957</b>	<b>(2,280)</b>	<b>4,399</b>	<b>783,076</b>	<b>786,948</b>	<b>804,120</b>
<b>Expenses:</b>						
Program services:						
Instruction	193,405	-	-	193,405	207,796	215,022
Research	40,136	-	-	40,136	42,375	35,609
Public service	11,221	-	-	11,221	12,500	10,492
Academic support	38,700	-	-	38,700	41,768	47,173
Student services	30,605	-	-	30,605	29,862	27,754
Patient care	245,368	-	-	245,368	276,988	299,372
<b>Total program services</b>	<b>559,435</b>	<b>-</b>	<b>-</b>	<b>559,435</b>	<b>611,289</b>	<b>635,422</b>
Supporting services:						
Institutional support	144,968	-	-	144,968	163,103	144,070
Auxiliary enterprises	67,053	-	-	67,053	67,756	69,244
<b>Total supporting services</b>	<b>212,021</b>	<b>-</b>	<b>-</b>	<b>212,021</b>	<b>230,859</b>	<b>213,314</b>
<b>Total operating expenses</b>	<b>771,456</b>	<b>-</b>	<b>-</b>	<b>771,456</b>	<b>842,148</b>	<b>848,736</b>
<b>Operating revenues over (under) operating expenses</b>	<b>9,501</b>	<b>(2,280)</b>	<b>4,399</b>	<b>11,620</b>	<b>(55,200)</b>	<b>(44,616)</b>
<b>Non-operating</b>						
Investment income/(loss) in excess of amount designated for operations	(6,983)	(4,085)	(4,103)	(15,171)	5,134	85,027
Endowment transfer	(5,920)	(8,201)	(153)	(14,274)	(13,718)	(13,096)
Restructuring costs	(44)	-	-	(44)	(10,502)	(3,433)
Change in funded status of defined benefit pension plan	(40,712)	-	-	(40,712)	(31,973)	19,283
Change in obligation for post-retirement benefit plan	(19,244)	-	-	(19,244)	(5,530)	(15,003)
Change in funded status of supplemental retirement plan	142	-	-	142	-	-
Gain on property/land sale	18,581	-	-	18,581	-	1,675
Other items, net	12	-	-	12	46	-
<b>(Decrease) Increase in non-operating activities</b>	<b>(54,168)</b>	<b>(12,286)</b>	<b>(4,256)</b>	<b>(70,710)</b>	<b>(56,543)</b>	<b>74,453</b>
<b>Change in net assets</b>	<b>(44,667)</b>	<b>(14,566)</b>	<b>143</b>	<b>(59,090)</b>	<b>(111,743)</b>	<b>29,837</b>
<b>Net assets, beginning of year</b>	<b>200,180</b>	<b>250,919</b>	<b>128,106</b>	<b>579,205</b>	<b>690,948</b>	<b>661,111</b>
<b>Net assets, end of year</b>	<b>\$ 155,513</b>	<b>\$ 236,353</b>	<b>\$ 128,249</b>	<b>\$ 520,115</b>	<b>\$ 579,205</b>	<b>\$ 690,948</b>

The accompanying notes are an integral part of these consolidated financial statements.

<b>Consolidated Statements of Cash Flows</b> <b>For Fiscal Years Ended June 30, 2016, 2015 and 2014</b> <i>(in thousands)</i>			
	<b>2016</b>	<b>2015</b>	<b>2014</b>
<b>Cash flows from operating activities</b>			
Change in net assets	\$ (59,090)	\$ (111,743)	\$ 29,837
Adjustments to reconcile change in net assets to net cash and cash equivalents (used in)/provided by operating activities:			
Depreciation	44,883	51,596	55,900
Bond discount amortization	221	235	206
Net realized gain on sale of investment	(15,955)	(29,417)	(39,553)
Unrealized loss (gain) on investments	36,720	32,910	(37,855)
Increase (decrease) in pension/post retirement liability	40,720	15,635	(17,376)
(Gain) loss on sale/disposal of long-lived assets	(18,581)	133	-
Change in receivables (excluding notes)	(98,208)	4,254	3,490
Change in inventory, prepaid expenses and other assets	(12,459)	2,106	769
Change in deposits with trustees	(394)	(404)	3,772
Change in accounts payable and accrued expenses and other	(43,837)	20,395	14,878
Change in allowance for doubtful receivables	(6,885)	6,136	10,070
Change in deferred revenue	94,485	4,081	309
Change in reserve for self-insured liabilities	(7,338)	7,918	(3,768)
Change in other liabilities	(2,141)	(650)	(4,393)
Change in refundable advances under Federal Student Loan Program	(437)	458	(115)
<b>Net cash and cash equivalents (used in)/provided by operating activities</b>	<b>(48,296)</b>	<b>3,643</b>	<b>16,171</b>
<b>Cash flows from investing activities</b>			
Proceeds from sale of investments	397,929	343,516	373,782
Purchases of investments	(396,138)	(346,287)	(384,598)
Return on unexpended bond proceeds	5,413	35,885	25,345
Proceeds from property/land sale	23,035	-	1,709
Purchases and renovations of long-lived assets	(8,946)	(45,870)	(63,212)
Restricted contributions	(6,832)	(1,548)	(1,162)
<b>Net cash and cash equivalents provided by/(used in) investing activities</b>	<b>14,461</b>	<b>(14,304)</b>	<b>(48,136)</b>
<b>Cash flows from financing activities</b>			
Proceeds from notes payable	88,000	30,000	100,000
Payment on notes payable	(186,971)	(1,476)	(76,052)
Proceeds from bonds payable	160,000	-	-
Payment on bonds payable	(1,998)	(576)	(508)
Financing leases, net	(9,170)	(10,637)	(10,148)
Student loans issued	(726)	(1,218)	(3,821)
Student loans collected	640	722	1,357
Proceeds from restricted contributions	6,832	1,548	1,162
<b>Net cash and cash equivalents provided by financing activities</b>	<b>56,607</b>	<b>18,363</b>	<b>11,990</b>
Net increase (decrease) in cash and cash equivalents	22,772	7,702	(19,975)
Cash and cash equivalents at beginning of year	22,522	14,820	34,795
<b>Cash and cash equivalents at end of period</b>	<b>\$ 45,294</b>	<b>\$ 22,522</b>	<b>\$ 14,820</b>
<b>Supplemental cash flow information:</b>			
Cash paid for interest	\$ 25,525	\$ 24,513	\$ 23,111
<b>Supplemental non-cash investing activities:</b>			
Acquisition of equipment under capital leases, net	727	-	6,918
Stock distributions	344	-	-
<b>Supplemental non-cash financing activities:</b>			
Donated securities	-	215	2,254

The accompanying notes are an integral part of these consolidated financial statements.

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<b>Note 1</b>	<b>Summary of Significant Accounting Policies</b>
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(a) ***Description of the University***

The Howard University (Howard) is a private, nonprofit institution of higher education (the University) which also operates Howard University Hospital (the Hospital) located in Washington, DC. The University provides academic services in the form of education and training, primarily for students at the undergraduate, graduate and postdoctoral levels, and performs research, training and other services under grants, contracts, and similar agreements with sponsoring organizations, primarily departments and agencies of the United States government. Howard also provides patient healthcare services at the Hospital and by certain members of the University's faculty as part of its academic clinical activities.

The consolidated financial statements also include the activities of Howard University International (HUI), Howard University Global Initiative – Nigeria, LTD/GTE. (HUGIN), Howard University Technical Assistance Program in Malawi Limited (HUTAP), and Howard University Global Initiative South Africa NPC (HUGISA), wholly-owned subsidiaries of the University. The activities and balances of these entities are reflected in the statements of activities and statements of position, and any intercompany balances have been eliminated in consolidation.

The Hospital has a 49% joint venture interest in the Howard University Dialysis Center LLC (LLC). Howard accounts for its interest in the LLC using the equity method which requires Howard to record a proportional share of the LLC's net income or loss as increases and decreases to the initial investment are received.

Howard is recognized as an organization exempt from Federal income tax under Section 501(a) of the Internal Revenue Code (the Code) as an organization described in Section 501(c)(3) whereby only unrelated business income, as defined by Section 512(a)(1) of the Code, is subject to Federal income tax. Any unrelated business income tax generated by Howard is recorded as income tax using the liability method under which deferred tax assets and liabilities are determined based on the differences between the financial accounting and tax basis of assets and liabilities. Deferred tax assets or liabilities at the end of each period are determined using the currently enacted tax rate expected to apply to taxable income in the period that the deferred tax asset or liability is expected to be realized or to be settled. As of June 30, 2016, 2015, and 2014, Howard had no unrelated business income and therefore had no deferred tax assets or liabilities. In addition, Howard analyzed its tax positions for the years ended June 30, 2016, 2015, and 2014, and determined that there were no uncertain tax positions that would have a material impact on Howard's consolidated financial statements.

(b) ***Basis of Presentation***

The consolidated financial statements of Howard have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP). Howard has elected to show summarized comparative financial information with respect to Howard's statement of activities for the years ended June 30, 2015 and 2014. Such summarized information is prepared in a manner consistent with the statement of activities information from which it was derived.

(c) ***Use of Estimates***

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. These estimates affect the disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual amounts realized or paid could differ significantly from the amounts reported for these assets and liabilities. Significant items subject to such estimates and assumptions include the carrying value of receivables, accumulated depreciation related to property, plant and equipment and investments whose fair values are not readily determinable; and the adequacy of reserves for professional liabilities, retirement benefits, self-insured health benefits, self-insured workers' compensation and environmental liabilities.

(d) ***Change in Accounting Estimate***

As a result of a new study completed in 2016, Howard revised its estimate of its liability related to the abatement of asbestos found in its facilities for FY 2016, resulting in a reduction of net expenses and the liability by \$5,200 and \$7,900, respectively.

(e) ***Changes in Accounting Principle***

In FY 2016 Howard completed an early adoption of ASU 2016-02 (Topic 842), Leases, which is a change in accounting principle. See note 17 for a description of the impact of this change on the financial statements.

(f) **Net Assets**

Net assets are classified based on the existence or absence of donor-imposed restrictions as follows:

**Unrestricted** – Net assets that are not subject to donor-imposed stipulations.

**Temporarily restricted** – Net assets subject to donor-imposed stipulations that either expire by the passage of time or can be fulfilled by actions pursuant to those stipulations.

**Permanently restricted** – Net assets subject to donor-imposed stipulations that do not expire with time or University action. Generally, the donors of these assets permit Howard to use all or part of the income earned on related investments for general or specific purposes.

Contributions are reported in the appropriate category of revenue, except that contributions with donor-imposed restrictions met in the same fiscal year are included in unrestricted revenues. Expirations of temporary restrictions (i.e., the donor-stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as releases from temporarily restricted net assets to unrestricted net assets. Donor restrictions on gifts to acquire long-lived assets are considered fulfilled in the period in which the assets are acquired or placed in service.

(g) **Receivables and Revenue Recognition**

- (1) **Contributions**, including unconditional promises to give, are recognized as revenues in the period received. Conditional promises to give are not recognized until the conditions on which they depend are substantially met. Contributions of assets other than cash are recorded at their estimated fair value at the gift date. Howard has elected not to recognize or capitalize contributions of works of art, historical treasures, and similar assets held as part of collections. Contribution revenue for fiscal years ended June 30, 2016, 2015, and 2014 are shown below:

Contributions Revenue	2016	2015	2014
Unrestricted	\$ 4,156	\$ 4,970	\$ 3,601
Temporarily restricted	(433)	5,924	7,535
Permanently restricted	6,832	1,548	1,162
<b>Total contributions revenue</b>	<b>\$ 10,555</b>	<b>\$ 12,442</b>	<b>\$ 12,298</b>

Unconditional promises to give with payments to be received after one year from the date of the consolidated financial statements are discounted. Allowance is made for creditworthiness of the donors, past collection experience, and other relevant factors.

**Tuition and fees** from student services are recognized ratably over the academic time period to which they apply. A portion of tuition and fees charged in the current fiscal year for the summer term are recognized in the following fiscal year due to summer sessions between May and July crossing fiscal years. To incentivize students to earn their degree early or on-time, Howard University has established a tuition rebate, 50% off of the final semester's tuition, to on-time or early graduates. The rebate is applicable to direct payments made to the University by the student or family toward the final semester's tuition.

**Student receivables** represent unpaid tuition and fees assessed in current and prior periods that are generated when a student registers for classes through the University's formal registration process. Howard maintains a policy of offering qualified applicants admission to the University without regard to financial circumstance. Student financial aid is generally fulfilled through a combination of scholarships, fellowships, loans and employment during the academic year. Tuition and fees are recorded net of discounts for scholarships (merit, talent, and need based), fellowships, graduate remission and employee tuition remission. Funding for financial aid may come from donor designated sources or from unrestricted operations and assets. Financial aid for fiscal years ended June 30, 2016, 2015, and 2014 was \$101,434, \$110,239 and \$92,923, respectively.

Net Tuition Revenue	2016	2015	2014
Gross tuition and fees	\$ 256,887	\$ 264,307	\$ 257,645
Financial aid:			
Merit	64,115	64,925	53,373
Need	15,142	18,967	16,683
Talent	6,304	6,861	7,183
Other	15,873	19,486	15,684
Total financial aid	\$ 101,434	\$ 110,239	\$ 92,923
Total net tuition	\$ 155,453	\$ 154,068	\$ 164,722

- (2) **Other income** represents income from activities other than core business operations and is recognized as revenue in the period it is received.

- (3) **Federal Appropriation** revenue is recognized when received and expended. Howard receives a Federal appropriation that can be used for support of the University's educational mission, a portion of which is held as a temporarily restricted term endowment. For fiscal years ended June 30, 2016, 2015, and 2014, Howard received 28%, 27% and 28%, respectively, of its revenue support from the Federal appropriation. The \$4,302, \$3,405 and \$3,405, receivable for the fiscal years ended June 30, 2016, 2015, and 2014, respectively, represents the portion to be collected on the Federal term endowment as defined in Note 13.
- (4) **Net patient service revenue** is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors and bad debt expense. The Hospital and University faculty physicians have arrangements with third-party payors that provide for payments at established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges and per-diem payments. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined. Patient and third party healthcare payor receivables are the amount due for patient care services rendered by the University's Faculty Practice Plan (FPP) and the Hospital.

Net Patient Service Revenue	2016	2015	2014
Gross Revenues	\$ 645,624	\$ 659,509	\$ 725,111
Third-party settlement revenue	46,637	58,716	49,952
Contractual allowances and adjustments	(411,292)	(410,244)	(494,137)
Charity services	(5,468)	(12,276)	(8,241)
Bad debt	(18,820)	(36,939)	(26,929)
Total net patient service revenue	\$ 256,681	\$ 258,766	\$ 245,756
% of contractals and charity services of gross revenues	65%	64%	69%

- (5) **Grants and contracts** revenue is recognized when reimbursable expenses are incurred (for cost plus contracts) or when deliverables or milestones are met (for fixed price contracts). These revenues include recoveries of eligible direct expenses and indirect costs for facilities and administration, which are generally determined as a negotiated or agreed-upon percentage of direct costs. Receivables under research grants and development agreements represent the amounts due from Federal, state, local, private grants, contracts and others.

Grants and contracts revenue	2016	2015	2014
Reimbursement of direct expenses	\$ 48,324	\$ 55,608	\$ 49,651
Recovery of indirect costs	8,055	8,842	7,397
<b>Total grants and contracts revenue</b>	<b>\$ 56,379</b>	<b>\$ 64,450</b>	<b>\$ 57,048</b>
<b>Indirect costs recovery as a % of direct costs</b>	<b>17%</b>	<b>16%</b>	<b>15%</b>

Grants and contracts revenue by type is detailed in the table below.

Grants and contracts revenue by type	2016	2015	2014
Research	\$ 34,178	\$ 34,590	\$ 32,119
Training	12,188	16,427	13,873
Service/other	10,013	13,433	11,056
<b>Total grants and contracts revenue by type</b>	<b>\$ 56,379</b>	<b>\$ 64,450</b>	<b>\$ 57,048</b>

- (6) **Auxiliary services** revenue is generally recognized when services are rendered or as activities have been completed. Auxiliary receivables are comprised primarily of amounts due from advertisers on Howard's commercial radio station WHUR, bookstore vendors and property rents.

Auxiliary services revenue	2016	2015	2014
Student housing	\$ 23,622	\$ 24,913	\$ 32,370
Radio station	9,900	11,507	12,851
Meal plans	14,141	13,145	10,321
Bookstore	706	665	5,094
Property rentals	1,503	1,508	1,505
Parking fees	544	657	775
Vending sales and fees	432	752	678
Ticket sales	923	303	793
Licensing	72	79	11
Other	638	469	539
<b>Total auxiliary services revenue</b>	<b>\$ 52,481</b>	<b>\$ 53,998</b>	<b>\$ 64,937</b>

- (7) **Notes receivable** represent loans the University extended to students from institutional resources and Federal Student Loan programs with outstanding balances, which includes Federal Perkins Loans. Management regularly assesses the adequacy of the allowance for credit losses on student loans by performing ongoing evaluations of the student loan portfolio, including the financial condition of specific borrowers, the economic environment in which the borrowers operate, and the level of delinquent loans.



Howard's Perkins receivable represents the amounts due from current and former students under the Federal Perkins Loan Program. Loans disbursed under this Program are able to be assigned to the Federal Government in certain non-repayment situations. In these situations, the Federal portion of the loan balance is guaranteed.

(h) ***Cash and Cash Equivalents***

Short-term investments with maturities at date of purchase of nine months or less are classified as cash equivalents, except that any such investments purchased with funds on deposit with bond trustees, or with funds held in trusts or by external endowment investment managers are classified as Deposits with trustees or Investments, respectively. Cash equivalents include certificates of deposit, short-term U.S. Treasury securities and other short-term, highly liquid investments and are carried at approximate fair value.

(i) ***Investments***

Investments are segregated between operating, restricted and endowment investments and deposits with trustees on the consolidated statements of financial position, all of which are stated at fair value and defined as follows:

***Operating Investments*** – represent investments free of any donor or lender imposed restrictions. These investments are short-term in nature and can be liquidated at the discretion of the Board of Trustees (the "Board") to meet operational demands.

***Restricted Investments*** – represent non-endowed investments whose principal and or income are restricted by external sources, including liquidation restrictions. The use of the principal and interest of these investments is not subject to the discretion of the Board and as such they are not available to meet the operational needs of the University.

***Endowment Investments*** – represent the pooled endowment and the Federal matching endowment investments. The endowment investments are spread across various asset categories with the use of the income from these investments restricted based on stated donor stipulations.

Fair values of the University's investments are determined by the most relevant available and observable valuation inputs as defined in Note 12. Purchases and sales of securities are reflected on a trade-date basis. Gains and losses on sales of securities are based upon average historical value (cost of securities purchased or the fair market value at date of gift, if received by donation). Dividend and interest income are recorded on an accrual basis. Accrued but unpaid dividends, interest

and proceeds from investment sales at the report date are recorded as investment receivables.

Realized and unrealized investment gains and losses are allocated in a manner consistent with interest and dividends, to either unrestricted, temporarily restricted or permanently restricted net assets (distinguished between operating and non-operating), based on donor intent or lack thereof. Such amounts may be expended for operations, for specified donor purposes if temporarily restricted, or held in perpetuity at the donor's request. Realized and unrealized investment gains and losses on loan funds are accumulated in permanently restricted net assets.

Operating investment income includes interest, dividends and operating investment returns. This balance is calculated using operating investments as a percentage of total Level 1 investments in common stock and mutual funds.

(j) ***Inventories, Prepaids and Other Assets***

Inventories consist primarily of medical supplies, and are recorded at the lower of cost or realizable value on a first-in, first-out basis. Prepaids consist primarily of insurance, dues, subscriptions and other fees and are amortized over the useful period. Other assets consist primarily of unamortized bond issuance costs, deferred health charges, intellectual property, beneficial interest trust and investment interest in a dialysis joint venture (see Note 21).

(k) ***Long-Lived Assets***

Long-lived assets include right to use assets – operating and financing as well as property, plant and equipment balances for Howard. Property, plant and equipment are stated at cost or at fair value if received by gift, less accumulated depreciation and amortization. Depreciation is computed using the straight-line method over the estimated useful lives of the assets. The useful lives for fiscal years reported are as follow:

Land and land improvements	0-25 years
Building and building improvements	5-40 years
Furniture and equipment	3-20 years
Software	3-10 years
Library books	10 years

Property, plant and equipment acquired under financing leases are amortized over the life of the lease.

Property, plant and equipment is capitalizable when the unit cost is equal to or exceeds \$3 and has a useful life of more than one year.

Title to certain equipment purchased using funds provided by government grants or contracting agencies is vested with Howard, and therefore is included in reported property balances. Interest costs eligible for capitalization are the costs of restricted borrowings, less any interest earned on temporary investment of the proceeds of those borrowings, from the date of borrowing until qualifying assets are intended for use. The recorded values of certain properties include the fair value of any asset retirement obligation necessary to meet contractual or regulatory requirements for disposal or remediation of the property. This primarily pertains to the cost of removal and disposal of asbestos.

(l) ***Refundable Advances Under Federal Student Loan Program***

Funds provided by the United States Department of Education under the Federal Student Loan Programs are loaned to qualified students and may be re-loaned after collections. The portion of these funds provided by the Department of Education are ultimately refundable to the Department of Education and are reported as liabilities in the consolidated statements of financial position and as cash flows from financing activities in the consolidated statements of cash flows. Loans issued to students are reported as part of receivables in the consolidated statements of financial position.

(m) ***Operating Expenses by Category***

Expenses were incurred for the following categories for the years ended June 30, 2016, 2015, and 2014:

Operating expenses (in thousands)	2016	2015	2014
Salaries and wages	\$ 347,750	\$ 365,126	\$ 385,707
Employee benefits other than retirement plans	61,419	78,451	73,981
Retirement plans excluding amortization	2,246	12,327	15,366
<b>Total employment expenses</b>	<b>411,415</b>	<b>455,904</b>	<b>475,054</b>
Telecommunications	8,114	9,987	10,772
Utilities	22,704	18,573	21,589
Medical and office supplies	30,293	38,737	39,889
Repairs and maintenance	23,651	28,267	21,763
Food service costs	15,875	14,694	13,495
Grant subcontracts	17,682	20,194	19,752
Insurance and risk management	22,032	28,179	27,473
Professional and administrative services	131,398	132,443	125,413
Provision for bad debts	9,349	9,483	5,939
<b>Total operating expenses exclusive of interest, depreciation and amortization expense</b>	<b>692,513</b>	<b>756,461</b>	<b>761,139</b>
Interest expense	25,133	24,730	23,025
Depreciation	44,883	51,596	55,900
Amortization of retirement plan actuarial losses	8,927	9,361	8,672
<b>Total operating expenses</b>	<b>\$ 771,456</b>	<b>\$ 842,148</b>	<b>\$ 848,736</b>

Howard presents its Statements of Activities by function. Howard allocates its expenses on a functional basis among its various programs and institutional support. Expenses that can be identified with a specific program are charged

directly. Costs related to the operation and maintenance of physical plant including utilities, depreciation of fixed assets and interest expense, are allocated among programs and institutional support based upon square footage.

(n) ***Reserves for Self-Insured Liabilities***

The reserve for self-insured liabilities is comprised primarily of amounts accrued for asserted medical malpractice and worker's compensation claims and includes estimates of the ultimate cost to resolve such claims. The reserve also includes an estimate of the cost to resolve unasserted claims that actuarial analyses indicate are probable of assertion in the future. Medical malpractice claim reserves are stated at an undiscounted amount.

(o) ***Other Liabilities***

Other liabilities are comprised primarily of unclaimed property, student deposits, deposits held in custody for others, reserves for legal and other contingencies and miscellaneous items.

(p) ***Compensated Absences***

Howard records an amount due to employees for future absences, which are attributable to services performed in the current and prior periods and subject to a maximum carryover. This obligation is recognized on the consolidated statements of financial position as part of accounts payable and accrued expenses. At fiscal years ended June 30, 2016, 2015, and 2014 the obligation was \$5,283, \$5,848 and \$7,421, respectively.

(q) ***Pension and Post-Retirement Benefits***

The funded status of Howard's pension benefit (the "Plan") is actuarially determined and recognized in the consolidated statements of financial position as an asset to reflect an overfunded status, or as a liability to reflect an underfunded status. Howard's actuarially determined post-retirement benefit obligation is recognized on the consolidated statements of financial position as a liability. Howard follows the Internal Revenue Service (IRS) guidelines in the administration of the Plan.

(r) ***Measure of Operations***

Howard includes in its measure of operations all revenue and expenses that are integral to its continuing core program services with the key objective being predictability of indicated results. Such measures include the amortization of actuarial gains and losses previously recorded as non-operating items. Howard

uses a spending rate methodology to determine the amount of endowment assets allocated to operations in a given year. Non-operating income and expenses include realized and unrealized appreciation (depreciation), investments, changes in retirement plan liabilities due to market factors, restructuring costs and (charges) credits that do not pertain to continuing core program services.

(s) ***New Accounting Pronouncements***

In February 2016, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2016-02 (Topic 842), *Leases*, which supersedes lease requirements in ASU 2013-270 (Topic 840). Topic 842 establishes the principles that lessees and lessors shall report useful information to users of financial statements about the amount, timing, and uncertainty of cash flows arising from a lease by increasing transparency and comparability by recognizing lease assets and lease liabilities on the Statement of Financial Position. Howard University is adopting ASU 2016-02. Early adoption has resulted in an update to Lease disclosure, as described in Footnote 17.

In January 2016, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2016-01, *Financial Instruments*, requiring all equity investments to be measured at fair value with changes in the fair value recognized through net income, other than those accounted for under the equity method of accounting or those that result in consolidation of the investee. Howard is evaluating adopting ASU 2016-01.

In April 2015, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2015-03 (Subtopic 835-30), *Interest - Imputation of Interest, Simplifying the Presentation of Debt Issuance Costs*, so cost and complexity can be reduced while maintaining or improving the usefulness of the information provided to users of financial statements. ASU 2015-03 requires that debt issuance cost related to a recognized debt liability be presented in the balance sheet as a direct deduction from the carrying amount of that debt liability, consistent with debt discounts. Howard University is evaluating adopting ASU 2015-03.

(t) ***Reclassification***

Certain prior year amounts have been reclassified to conform to the current year's presentation. Such reclassifications did not have any impact on the University's previously reported net asset balances.

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<b>Note 2</b>	<b>Fundraising Expenses</b>
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For fiscal years ended June 30, 2016, 2015, and 2014, Howard incurred expenses of approximately \$4,691, \$5,684 and \$4,803, respectively, in connection with its fundraising activities. These amounts are reflected on the accompanying consolidated statements of activities within each respective expense category, as appropriate.

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<b>Note 3</b>	<b>Charity Care</b>
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The Hospital provides services to patients who meet the criteria of its charity care policy without charge, or at amounts less than established rates. The criteria for charity services are comprised of family income, net worth and eligibility at time of application. In addition the Hospital provides services to patients under the District of Columbia charity care program, DC Alliance. The total of charges foregone for services furnished under the Hospital's charity care policy and the DC Alliance program were \$5,468, \$12,276 and \$8,241 for fiscal years ended June 30, 2016, 2015, and 2014, respectively.

Total uncompensated care charges under all of Howard's clinical services which includes bad debt write offs as well as charity care, for fiscal years ended June 30, 2016, 2015, and 2014 were \$24,288, \$49,215 and \$35,170, respectively.

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<b>Note 4</b>	<b>Insurance and Risk Management</b>
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Howard, along with 16 other institutions of higher education, is a subscriber in Pinnacle Consortium of Higher Education, a Vermont Reciprocal Risk Retention Group. Pinnacle provides commercial general and certain specific liability coverage. Howard's annual payments to Pinnacle for insurance coverage are based on actuarial studies and are charged to expense. Through December 31, 2015, Pinnacle reinsured 95% of its risk to Genesis, Ltd. (Genesis), an affiliated reinsurer. Genesis, a Class 2 reinsurer under the Insurance Act of 1978 of Bermuda, was jointly formed by Howard and 16 other higher education institutions. Genesis reinsured general liability and automobile liability risks of its shareholders. On January 1, 2016, Genesis merged into Pinnacle. At June 30, 2016, Howard had an approximate 6% interest in Pinnacle. Howard's interest in Pinnacle is included in restricted investments. Liability insurance coverage in excess of the primary coverage has been purchased by Howard, with limits of \$125,000 from commercial insurance companies.

Howard is self-insured for initial layers of medical malpractice, worker's compensation, and employee health benefits. The reserves for self-insured risks are actuarially determined and Howard has set aside assets in revocable trusts to partially fund these self-insured risks.

The self-insured program covers professional liability costs up to \$7,500 per occurrence depending on the cause. In addition, there are two layers of excess insurance coverage. The first layer of the excess insurance coverage is up to \$35,000 on a claims-made basis. This layer is purchased through a captive insurance company, Howard University Capitol Insurance Company Ltd. (HUCIC), organized under the laws of the Cayman Islands. HUCIC covers prior acts retroactive to two separate policy periods dating July 1, 1996 and January 1, 1986, and is completely reinsured. The second layer of excess liability insurance which also covers patient care related general liability and professional liability, is up to \$50,000 on a claims-made basis. The second layer of excess coverage is provided by an independent excess insurance company.

The types of insurance and risk management coverages are detailed in the table below:

Insurance and Risk Management	2016	2015	2014
Malpractice claims expense	\$ 5,176	\$ 13,667	\$ 14,705
Malpractice excess insurance	1,470	1,414	1,590
Student sickness	11,622	9,430	6,771
General and other	3,764	3,668	4,407
<b>Totals</b>	<b>\$ 22,032</b>	<b>\$ 28,179</b>	<b>\$ 27,473</b>

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**Note 5      Restructuring Costs**

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Restructuring costs represent non-recurring expenses required to facilitate management, faculty and staff changes resulting from Howard's various renewal initiatives. In fiscal years 2016, 2015, and 2014, Howard implemented a reduction-in-force to better align the number of administrative staff with expected needs and its financial capacity. Severance and other payments related thereto amounted to \$44, \$10,502 and \$3,433, respectively. Additionally, Howard implemented a Faculty Phased Retirement Program with incentive payments of \$19,816 payable between September 2012 and September 2017, which was accrued as of June 30, 2012. As of June 30, 2016, \$2,088 is accrued, reflecting \$17,728 of cumulative payment activity.

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**Note 6      Concentration of Risks**

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Financial instruments that potentially subject Howard to significant concentrations of credit risk consist principally of deposits of cash, cash equivalents, and investments in financial institutions in excess of the applicable government insurance limits. The limit was \$250 per account as of June 30, 2016. Aggregate cash and cash equivalent balances maintained at financial institutions exceed the amount guaranteed by federal agencies, but Howard has not

experienced any loss due to this risk. Concentrations of credit risk with respect to receivables pertain mainly to self-pay patients of Howard's clinical services, and to students. Financial instruments that potentially subject Howard to market risk consist primarily of investments. Howard attempts to mitigate this risk through its investment strategy.

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**Note 7      Receivables**

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Accounts receivable, prior to adjustment for doubtful collections, are summarized as follows at fiscal years ended June 30, 2016, 2015, and 2014:

<b>Receivables</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Student	\$ 131,905	\$ 31,643	\$ 20,151
Notes	15,607	15,521	15,024
Federal appropriation	4,302	3,405	4,290
Patients and third-party payors - Hospital	73,423	64,532	88,326
Patients and third-party payors - FPP	18,970	25,070	16,611
Patients and third-party payors - Dental	3,628	2,631	1,851
Grants and contracts	15,006	14,860	17,343
Contributions	3,643	6,861	4,566
Insurance claims	7,526	12,355	14,057
Auxiliary services	5,673	6,856	6,176
Other	6,829	4,436	3,532
<b>Total</b>	<b>\$ 286,512</b>	<b>\$ 188,170</b>	<b>\$ 191,927</b>

Other receivables includes checks pending deposit at period and year end, and certain vendor credit balances.

Allowance for doubtful receivables is summarized as follows at fiscal years ended June 30, 2016, 2015, and 2014:

<b>Allowance for Doubtful Receivables</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Student	\$ 23,327	\$ 16,979	\$ 10,444
Notes	5,821	2,789	3,210
Patients and third-party payors - Hospital	26,649	33,226	38,943
Patients and third-party payors - FPP	1,357	9,465	4,349
Patients and third-party payors - Dental	1,409	660	571
Grants and contracts	1,119	3,308	4,505
Contributions	2,055	2,527	1,623
Insurance claims	1,689	1,689	1,326
Auxiliary services	531	152	109
Other	115	114	114
<b>Totals</b>	<b>\$ 64,072</b>	<b>\$ 70,909</b>	<b>\$ 65,194</b>
<b>Total receivables, net</b>	<b>\$ 222,440</b>	<b>\$ 117,261</b>	<b>\$ 126,733</b>



Provision for bad debt is summarized as follows at fiscal years ended June 30, 2016, 2015, and 2014:

<b>Provision for Bad Debt</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
<b><i>Non-clinical services:</i></b>			
Student services	\$ 8,583	\$ 6,762	\$ 5,011
Research grants and development agreements	848	1,739	717
Insurance claims	-	(22)	(162)
Auxiliary services	389	100	234
Uncollectible pledges	(471)	904	266
Other	-	-	(127)
<b>Total non-clinical</b>	<b>\$ 9,349</b>	<b>\$ 9,483</b>	<b>\$ 5,939</b>
<b><i>Clinical services:</i></b>			
Patients and third-party payors - Hospital	19,504	22,872	20,057
Patients and third-party payors - FPP	(1,480)	13,919	6,755
Patients and third-party payors - Dental	796	148	117
<b>Total clinical services</b>	<b>\$ 18,820</b>	<b>\$ 36,939</b>	<b>\$ 26,929</b>
<b>Total provision for bad debt</b>	<b>\$ 28,169</b>	<b>\$ 46,422</b>	<b>\$ 32,868</b>

Bad debt expense of \$9,349, \$9,483 and \$5,939 for fiscal years ended June 30, 2016, 2015, and 2014, respectively, reflected in total operating expenses on the statements of activities excludes bad debt expense related to certain clinical services determined to be uncollectible. Clinical services bad debt expense, as shown in the table above, has been netted against patient service revenues.

Contributions receivable at June 30, 2016, 2015, and 2014 are expected to be received as follows:

<b>Contributions Receivable</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Within one year	\$ 2,731	\$ 5,529	\$ 4,314
Between one and five years	1,554	1,026	274
Thereafter	402	604	4
Contributions receivable gross	4,687	7,159	4,592
Unamortized discount on contributions receivable (2%-6.5%)	(1,044)	(298)	(26)
Contributions receivable, net of discounts	3,643	6,861	4,566
Allowance for uncollectible contributions	(2,055)	(2,527)	(1,623)
Contributions receivable, net of discounts and allowance	\$ 1,588	\$ 4,334	\$ 2,943

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**Note 8 Inventories, Prepaids and Other Assets**

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Components of inventories, prepaids and other assets accounts at fiscal years ended June 30, 2016, 2015, and 2014 are as follows:

<b>Inventories, Prepaids and Other Assets</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Inventories - Hospital	\$ 3,568	\$ 3,416	\$ 4,679
Prepaid expenses	5,450	6,709	6,154
Unamortized bond issuance costs	4,937	4,563	4,778
Deferred health charges	-	-	1,414
Dialysis joint venture interest	5,588	5,638	5,337
Beneficial interest trust	10,286	5,038	4,968
Self-insured assets	7,972	-	-
Intellectual property costs	1,530	1,530	1,682
Other	227	205	193
<b>Total</b>	<b>\$ 39,558</b>	<b>\$ 27,099</b>	<b>\$ 29,205</b>

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**Note 9 Accounts Payable and Accrued Expenses**

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Components of this liability account at fiscal years ended June 30, 2016, 2015, and 2014 are as follows:

<b>Accounts Payable and Accrued Expenses</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Vendor invoices	\$ 55,705	\$ 97,677	\$ 73,739
Accrued salaries and wages	24,083	22,823	21,930
Accrued employee benefits	7,224	6,984	7,194
Accrued annual leave	5,283	5,848	7,421
Accrued faculty retirement incentive payments	2,088	3,610	6,118
Accrued interest	4,680	5,071	4,822
Other	419	1,337	1,731
<b>Total</b>	<b>\$ 99,482</b>	<b>\$ 143,350</b>	<b>\$ 122,955</b>

**Note 10 Other Liabilities and Deferred Revenue**

These obligations include the following at fiscal years ended June 30, 2016, 2015, and 2014:

<b>Other liabilities</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Asset retirement obligation	\$ -	\$ 13,514	\$ 13,128
Environmental remediation	-	3,000	3,000
Environmental liabilities	8,887	-	-
Due to Provident	5,977	-	-
Unclaimed property	3,499	2,644	2,879
Student deposits and refunds	2,578	3,300	2,725
Reserve for legal contingencies	235	1,574	3,664
Deposits held in custody for others	1,376	1,702	2,425
Other	1,237	3,791	2,354
<b>Total</b>	<b>\$ 23,789</b>	<b>\$ 29,525</b>	<b>\$ 30,175</b>

<b>Deferred revenue</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Deferred tuition, room and board	\$ 94,100	\$ 2,932	\$ 2,825
Deferred grant revenue	11,810	8,430	6,677
Deferred savings incentive revenue	1,775	2,375	-
Other	881	344	498
<b>Total</b>	<b>\$ 108,566</b>	<b>\$ 14,081</b>	<b>\$ 10,000</b>

Howard recorded an asset retirement obligation in FY06 to comply with FIN 47 (prior to the issuance of ASC 410) and subsequently updated the estimate in FY09. In FY16 a study was performed to review the documentation and methodology used to establish the remediation liability. Based on the study, the liability does not qualify for ASC 410 treatment and is considered a general liability. Accordingly, in FY16, the liability was reduced by \$7,900 and the net expense impact of \$5,200 is recorded as a reduction to institutional support.

Howard's environmental remediation liability has been discounted using a rate of 4.9%. Amounts for the fiscal years ended June 30, 2016, 2015, and 2014, were as follows:

<b>Environmental liabilities</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Asset retirement costs	\$ 969	\$ 4,565	\$ 4,565
Accumulated depreciation	841	2,253	2,205
Accretion expense	(2,662)	344	410
Asset retirement obligation	-	13,514	13,128
Environmental liabilities	8,887	-	-
<b>Total</b>	<b>\$ 8,035</b>	<b>\$ 20,676</b>	<b>\$ 20,308</b>

Howard incurred costs related to asbestos abatement during fiscal years ended June 30, 2016, 2015, and 2014 of \$113, \$234 and \$135, respectively.

**Note 11 Deposits with Trustees and Self-insured Liabilities**

	Dedicated Assets		
	2016	2015	2014
Debt service reserve	\$ 12,848	\$ 12,847	\$ 12,880
Professional liability	15	16	5
Workers' compensation	10	10	12
Health insurance trust	1,778	1,384	956
<b>Total</b>	<b>\$ 14,651</b>	<b>\$ 14,257</b>	<b>\$ 13,853</b>
	Liabilities		
	2016	2015	2014
Debt service reserve	NA	NA	NA
Capitalized interest	NA	NA	NA
Professional liability	\$ 59,127	\$ 55,671	\$ 54,365
Workers' compensation	21,234	28,891	27,956
Health insurance trust	6,850	9,987	4,310
<b>Total</b>	<b>\$ 87,211</b>	<b>\$ 94,549</b>	<b>\$ 86,631</b>

NA = Not applicable

**(a) Debt Service Reserve Fund**

As required by the 2011 Revenue Bonds, Howard maintains a debt service reserve fund in an amount greater than or equal to the Debt Service Fund Requirement of \$12,634 for all periods reported. The assets in the debt service reserve fund consist primarily of cash, fixed income investments and other short-term securities.

**(b) Professional Liability**

Howard is involved in litigation arising in the ordinary course of business. Claims alleging malpractice have been asserted against the Hospital and certain faculty physicians and are currently in various stages of litigation. Additional claims may be asserted arising from services provided to patients through June 30, 2016. It is the opinion of management based on the advice of actuaries and legal counsel that estimated malpractice costs accrued for fiscal years ended June 30, 2016, 2015, and 2014 of approximately \$59,127, \$55,671 and \$54,365, respectively is adequate to provide for losses resulting from probable unasserted claims and pending or threatened litigation.

Professional liability activity is summarized as follows for fiscal years ended June 30, 2016, 2015, and 2014 in the table below.

<b>Professional Liability</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
Beginning balance	\$ 55,671	\$ 54,365	\$ 55,204
Malpractice claims expense	5,176	13,667	14,705
Settlement payments	(1,720)	(12,361)	(15,544)
<b>Ending balance</b>	<b>\$ 59,127</b>	<b>\$ 55,671</b>	<b>\$ 54,365</b>

**(c) *Workers' Compensation***

Prior to July 1, 2012, Howard had established a revocable trust fund to partially provide for the satisfaction of its liability under applicable workers' compensation liability. The assets in the workers' compensation trust fund consisted of U.S. Treasury Bills and obligations, as well as domestic and foreign corporate bonds. As of June 30, 2016, workers' compensation liabilities are being satisfied as claims arise. Howard also maintains \$7,972 in letters of credit, which serve as collateral for specific insurance carriers. Howard is self-insured for workers' compensation claims up to per occurrence retention of \$500. The excess is covered through commercial insurance.

For fiscal years ended June 30, 2016, 2015, and 2014 expenses related to workers' compensation were \$(4,327), \$3,860 and \$3,234, respectively and are reflected in employee benefits.

The total liability for future workers' compensation liability claims was approximately \$21,234, \$28,891 and \$27,956 at June 30, 2016, 2015, and 2014, respectively, and includes liabilities for claims covered under existing insurance policies. Reserves reflect actuarially determined estimates for losses on asserted claims, as well as unasserted claims arising from reported and unreported incidents. This liability is recorded on the accompanying consolidated statements of financial position in reserves for self-insured liabilities. Estimated claims for which payments will be covered under existing insurance policies were \$5,837, \$10,666 and \$12,731 at June 30, 2016, 2015, and 2014, respectively, net of allowances for uncollectible amounts and are reflected in other receivables.

**(d) *Health Insurance***

Prior to July 1, 2012, Howard established a revocable self-insured trust fund for the purpose of partially funding group health benefits for its employees. The assets consisted primarily of investments in money market funds. As of June 30, 2014, health insurance claims are being funded as incurred. Deposits to the fund are amounts withheld from employees' salaries and wages and Howard's contributions based on estimates established by the claims administrator. Disbursements from the fund are made in accordance with the payment plan

established with the claims administrator. The total estimated liability for asserted and unasserted probable claims at June 30, 2016, 2015, and 2014, is approximately \$6,850, \$9,987 and \$4,310, respectively.

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**Note 12      Fair Value Measurements**

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Howard applies applicable accounting standards for fair value measurements, defined as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants at the measurement date. These accounting standards establish three categories for fair value measurements based upon the transparency of inputs used to value an asset or liability as of the measurement date as follows:

- Level 1 – quoted market prices for identical assets or liabilities in active markets.
- Level 2 – quoted market prices for similar assets or liabilities in active markets; quoted prices for identical or similar instruments in markets that are not active; or other than quoted prices in which all significant inputs and significant value drivers are observable in active markets either directly or indirectly.
- Level 3 – valuations derived from valuation techniques in which one or more significant inputs or significant value drivers are not observable.

Howard's financial assets and liabilities as of June 30, 2016, 2015, and 2014 are subject to fair value accounting.

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Fair value as of June 30, 2016 is as follows:

Fair Value as of June 30, 2016	Level 1	Level 2	Level 3	Total
<b>Assets:</b>				
Unexpended bond proceeds (6)	\$ -	\$ 5,027	\$ -	\$ 5,027
Deposits with trustees (7)	1,734	12,917	-	14,651
Other assets (8)	7,972	-	5,588	13,560
<b>Total assets (non investment)</b>	<b>\$ 9,706</b>	<b>\$ 17,944</b>	<b>\$ 5,588</b>	<b>\$ 33,238</b>
<b>Operating investments</b>				
Fixed Income-Government Bonds (2)	-	-	-	-
Common Stock (3)	34,433	-	-	34,433
<b>Total operating investments</b>	<b>\$ 34,433</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 34,433</b>
<b>Restricted investments</b>				
Money Market Instrument (1)	-	1,001	-	1,001
Common Stock (3)	36,819	-	-	36,819
Private Equity (4)	-	-	2,902	2,902
Real Estate (4)	-	-	250	250
<b>Total restricted investments</b>	<b>\$ 36,819</b>	<b>\$ 1,001</b>	<b>\$ 3,152</b>	<b>\$ 40,972</b>
<b>Endowment investments</b>				
Money Market Fund (1)	30	50,635	-	50,665
<b>Common/collective trusts</b>	-	-	-	-
Emerging Market Equity (3)	-	43,281	-	43,281
Global Fixed Income Security (2)	-	32,196	-	32,196
International Equity Security (3)	-	96,687	-	96,687
Domestic Common Stock (3)	-	21,931	-	21,931
Commodity Inflation Hedging (8)	-	12,121	-	12,121
<b>Common Stock (3)</b>	<b>42,511</b>	<b>-</b>	<b>-</b>	<b>42,511</b>
<b>Fixed income</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Mortgage Backed Securities (2)	-	-	-	-
Corporate Bond (2)	-	27	-	27
<b>Hedge funds</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Distressed Debt (4)	-	-	-	-
Equity Long/short (4)	-	12,683	-	12,683
Event driven (4)	-	158	12	170
Global opportunities (4)	-	6,108	-	6,108
Multi-strategy (4)	-	22,741	74	22,815
<b>Mutual funds investment</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Emerging Market Equity Security (3)	28,133	-	-	28,133
Domestic Common Stock (3)	30,454	-	-	30,454
Domestic Fixed Income (2)	76,282	-	-	76,282
International Equity Security (3)	9,317	-	-	9,317
<b>Limited partnerships (4)</b>	<b>-</b>	<b>-</b>	<b>75,778</b>	<b>75,778</b>
<b>Real estate (4)</b>	<b>-</b>	<b>-</b>	<b>16,863</b>	<b>16,863</b>
<b>Total endowment investments</b>	<b>\$ 186,727</b>	<b>\$ 298,568</b>	<b>\$ 92,727</b>	<b>\$ 578,022</b>
<b>Total investments</b>	<b>\$ 257,979</b>	<b>\$ 299,569</b>	<b>\$ 95,879</b>	<b>\$ 653,427</b>
Assets not subject to fair value reporting (9)	1,164	-	-	1,164
Liabilities not subject to fair value reporting (9)	(2,054)	-	-	(2,054)
<b>Total assets and liabilities measured at fair value</b>	<b>\$ 266,795</b>	<b>\$ 317,513</b>	<b>\$ 101,467</b>	<b>\$ 685,775</b>

Level 3 investments were 15% of total investments.

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Fair value as of June 30, 2015 is as follows:

<b>Fair Value as of June 30, 2015</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
<b>Assets:</b>				
Unexpended bond proceeds (6)	\$ -	\$ 10,440	\$ -	\$ 10,440
Deposits with trustees (7)	1,395	12,862	-	14,257
Other assets (8)	-	-	5,038	5,038
<b>Total assets (non investment)</b>	<b>\$ 1,395</b>	<b>\$ 23,302</b>	<b>\$ 5,038</b>	<b>\$ 29,735</b>
<b>Operating investments</b>				
Fixed Income-Government Bonds (2)	-	-	-	-
Common Stock (3)	36,333	-	-	36,333
<b>Total operating investments</b>	<b>\$ 36,333</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 36,333</b>
<b>Restricted investments</b>				
Money Market Instrument (1)	-	1,820	-	1,820
Common Stock (3)	44,091	-	-	44,091
Private Equity (4)	-	-	1,940	1,940
Real Estate (4)	-	-	250	250
<b>Total restricted investments</b>	<b>\$ 44,091</b>	<b>\$ 1,820</b>	<b>\$ 2,190</b>	<b>\$ 48,101</b>
<b>Endowment investments</b>				
Money Market Fund (1)	283	38,730	-	39,013
<b>Common/collective trusts</b>				
Emerging Market Equity (3)	-	27,543	-	27,543
Global Fixed Income Security (2)	-	30,848	-	30,848
International Equity Security (3)	-	104,663	-	104,663
Domestic Common Stock (3)	-	23,348	-	23,348
Commodity Inflation Hedging (8)	-	14,384	-	14,384
<b>Common Stock (3)</b>	<b>46,703</b>	<b>-</b>	<b>-</b>	<b>46,703</b>
<b>Fixed income</b>				
Corporate Bond (2)	-	44	-	44
<b>Hedge funds</b>				
Distressed Debt (4)	-	2,769	-	2,769
Equity Long/short (4)	-	13,541	-	13,541
Event driven (4)	-	3,328	3,096	6,424
Global opportunities (4)	-	6,233	-	6,233
Multi-strategy (4)	-	25,889	3,578	29,467
<b>Mutual funds investment</b>				
Emerging Market Equity Security (3)	33,035	-	-	33,035
Domestic Common Stock (3)	30,915	-	-	30,915
Domestic Fixed Income (2)	74,038	-	-	74,038
International Equity Security (3)	9,814	-	-	9,814
<b>Limited partnerships (4)</b>	<b>-</b>	<b>-</b>	<b>81,305</b>	<b>81,305</b>
<b>Real estate (4)</b>	<b>-</b>	<b>-</b>	<b>16,362</b>	<b>16,362</b>
<b>Total endowment investments</b>	<b>\$ 194,788</b>	<b>\$ 291,320</b>	<b>\$ 104,341</b>	<b>\$ 590,449</b>
<b>Total investments</b>	<b>\$ 275,212</b>	<b>\$ 293,140</b>	<b>\$ 106,531</b>	<b>\$ 674,883</b>
Assets not subject to fair value reporting (9)	935	-	-	935
Liabilities not subject to fair value reporting (9)	(725)	-	-	(725)
<b>Total assets and liabilities measured at fair value</b>	<b>\$ 276,817</b>	<b>\$ 316,442</b>	<b>\$ 111,569</b>	<b>\$ 704,828</b>

Level 3 investments were 16% of total investments.



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Fair value as of June 30, 2014 is as follows:

<b>Fair Value as of June 30, 2014</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
<b>Assets:</b>				
Unexpended bond proceeds (6)	\$ -	\$ 46,325	\$ -	\$ 46,325
Deposits with trustees (7)	968	12,885	-	13,853
Other assets (8)	-	-	4,968	4,968
<b>Total assets (non investment)</b>	<b>\$ 968</b>	<b>\$ 59,210</b>	<b>\$ 4,968</b>	<b>\$ 65,146</b>
<b>Operating investments</b>				
Fixed Income-Government Bonds (2)	8,431	-	-	8,431
Common Stock (3)	31,664	-	-	31,664
<b>Total operating investments</b>	<b>\$ 40,095</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 40,095</b>
<b>Restricted investments</b>				
Money Market Instrument (1)	-	3,434	-	3,434
Common Stock (3)	38,684	-	-	38,684
Private Equity (4)	-	-	1,872	1,872
Real Estate (4)	-	-	250	250
<b>Total restricted investments</b>	<b>\$ 38,684</b>	<b>\$ 3,434</b>	<b>\$ 2,122</b>	<b>\$ 44,240</b>
<b>Endowment investments</b>				
Money Market Fund (1)	841	34,890	-	35,731
<b>Common/collective trusts</b>				
Emerging Market Equity (3)	-	22,357	-	22,357
Global Fixed Income Security (2)	-	32,693	-	32,693
International Equity Security (3)	-	105,359	-	105,359
Domestic Common Stock (3)	-	22,661	-	22,661
Commodity Inflation Hedging (8)	-	19,016	-	19,016
<b>Common Stock (3)</b>	<b>61,777</b>	<b>-</b>	<b>-</b>	<b>61,777</b>
<b>Fixed income</b>				
Mortgage Backed Securities (2)	-	1,840	-	1,840
Corporate Bond (2)	-	4,153	-	4,153
<b>Hedge funds</b>				
Distressed Debt (4)	-	3,002	-	3,002
Equity Long/short (4)	-	9,084	-	9,084
Event driven (4)	-	3,697	3,804	7,501
Global opportunities (4)	-	7,901	-	7,901
Multi-strategy (4)	-	24,679	3,584	28,263
<b>Mutual funds investment</b>				
Emerging Market Equity Security (3)	27,275	-	-	27,275
Domestic Common Stock (3)	26,838	-	-	26,838
Domestic Fixed Income (2)	57,563	-	-	57,563
International Equity Security (3)	9,942	-	-	9,942
<b>Limited partnerships (4)</b>	<b>-</b>	<b>-</b>	<b>91,102</b>	<b>91,102</b>
<b>Real estate (4)</b>	<b>-</b>	<b>-</b>	<b>17,054</b>	<b>17,054</b>
<b>Total endowment investments</b>	<b>\$ 184,236</b>	<b>\$ 291,332</b>	<b>\$ 115,544</b>	<b>\$ 591,112</b>
<b>Total investments</b>	<b>\$ 263,015</b>	<b>\$ 294,766</b>	<b>\$ 117,666</b>	<b>\$ 675,447</b>
Assets not subject to fair value reporting (9)	1,416	-	-	1,416
Liabilities not subject to fair value reporting (9)	(626)	-	-	(626)
<b>Total assets and liabilities measured at fair value</b>	<b>\$ 264,773</b>	<b>\$ 353,976</b>	<b>\$ 122,634</b>	<b>\$ 741,383</b>

Level 3 investments were 17% of total investments.

The following assumptions and estimates were used to determine fair value of each class of financial instruments listed above:

- (1) Money market instruments include investments in open ended mutual funds that invest in US treasury securities, US agency bonds, certificates of deposit and corporate bonds. Funds that are quoted daily in active markets are classified as Level 1. Funds that are not quoted daily with prices based on amortized cost are classified as Level 2.
- (2) For investments in government securities and corporate bonds, fair value is based first upon quoted market prices for those securities that can be classified as Level 1. For securities where an active market is not available, fair value is determined with reference to similar securities using market prices and broker quotes for similar instruments and are classified as Level 2.
- (3) Common stocks are largely valued based on the last sales price for identical securities traded on a primary exchange. These investments are classified as Level 1. Securities that trade infrequently, or that have comparable traded assets – that trade in either active or inactive markets, are priced using available quotes and other market data that are observable as of the reporting date, and are classified as Level 2. Investments in comingled funds with underlying securities in common stock are classified as Level 2 because there is a readily determinable unit price and the units held can be redeemed in less than one month.
- (4) Alternative investments include Howard’s limited partnership interests, hedge funds, private equity and real estate and commodity funds. Trading in this class of funds is infrequent and, as a result, market values are not readily determinable. The investments in privately held funds are valued based on valuation techniques that take into account each fund’s underlying assets and include valuation methods such as market, cost and income approaches. In accordance with ASC 820, *Fair Value Measurement*, which governs the classification of certain investments with the option of Net Asset Value redemption value as Level 2, Howard has classified qualifying investments in Hedge Funds and Commodity Funds as Level 2. These investments can be redeemed on a quarterly basis with a 30 to 90 days redemption notice period. Hedge Funds and Commodity Funds with liquidation terms in excess of 90 days are classified as Level 3. Limited partnerships including private equity and real estate funds and other non-redeemable funds are categorized as Level 3.

These investments cannot be redeemed or withdrawn prior to termination of the partnership. Instead, the distributions are received through liquidation of the underlying assets of the fund. No active market exists for these funds and their valuation is based on unobservable and/or significantly adjusted inputs using the best available information provided by the partnership, including management assumptions. Due diligence procedures performed by management indicate that the values reported are reasonable. These investments are classified as Level 3.

- (5) Interest rate swaps are valued using observable and unobservable inputs, such as quotations received from counterparty dealers or brokers, whenever available and considered reliable. In instances where models are used, the value of the interest rate swap depends upon the contractual terms of, and specific risks inherent in, the instrument as well as the availability and reliability of the observed inputs. Such inputs include market prices for reference securities, yield curves, credit curves, measures of volatility, pre-payment rates, assumptions for non-performance risk, and correlations of such inputs. Certain parts of the interest rate swap arrangements have inputs which can generally be corroborated by market data and are therefore, classified as Level 2 within the fair value hierarchy.
- (6) Unexpended bond proceeds include investments in government debt security funds. These funds are not quoted daily and are valued at amortized cost. These investments are classified as Level 2.
- (7) Deposits held with trustees, including workers' compensation, professional and general liability, health insurance and bond debt service deposits, are comprised primarily of money market instruments, US treasury securities, mortgage-backed securities and corporate bonds. Money market investments are classified as either Level 1 or Level 2 based on whether their prices are quoted daily. Investments in US treasury securities are classified as Level 1 and other fixed income securities are classified as Level 2.
- (8) Other assets represent the University's beneficial interest in certain trust assets held by third parties. The fair value of this interest has been measured using the income approach as there is no active principal market trading in this interest. This interest was valued using the quoted market value for the underlying marketable securities of the Trust discounted for expected future cash flows to the University. These interests are classified as Level 3 assets as the reported fair values are based on a combination of observable and unobservable inputs.

- (9) Assets and liabilities not subject to fair value reporting represent transactions that have been entered into but not settled by the reporting date of June 30.

The methods described above may produce a fair value that may not be indicative of net realizable value or reflective of future fair value. Furthermore, while Howard believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different estimate of fair value as of the reporting date.

The following tables present the changes in amounts included in the consolidated statements of financial position for financial instruments classified within Level 3 of the valuation hierarchy defined above.

Changes in Level 3 securities for the period ended June 30, 2016 is as follows:

Changes in Level 3 for the period ended June 30, 2016	Private Equity and Venture Capital	Hedge Funds	Real Estate	Other Assets	Total
Balance July 1, 2015	\$ 83,245	\$ 6,674	\$ 16,612	\$ 5,038	\$ 111,569
Gain and Loss (Realized and unrealized)	5,527	(303)	2,824	550	8,598
Acquisitions	8,261	-	2,518	-	10,779
Sales	(18,353)	(6,285)	(4,841)	-	(29,479)
<b>Balance June 30, 2016</b>	<b>\$ 78,680</b>	<b>\$ 86</b>	<b>\$ 17,113</b>	<b>\$ 5,588</b>	<b>\$ 101,467</b>
<b>Change in unrealized investments held</b>	<b>\$ 6,306</b>	<b>\$ (1,325)</b>	<b>\$ 2,903</b>	<b>\$ 550</b>	<b>\$ 8,435</b>

There were no transfers into or out of Level 3 during fiscal year ended June 30, 2016. Transfers, when made, are deemed to be made at the end of the fiscal year.

Changes in Level 3 securities for the period ended June 30, 2015 is as follows:

Changes in Level 3 for the period ended June 30, 2015	Private Equity and Venture Capital	Hedge Funds	Real Estate	Other Assets	Total
Balance July 1, 2014	\$ 92,974	\$ 7,388	\$ 17,305	\$ 4,968	\$ 122,635
Gain and Loss (Realized and unrealized)	5,681	(714)	2,544	70	7,581
Acquisitions	7,604	-	1,210	-	8,814
Sales	(23,014)	-	(4,447)	-	(27,461)
<b>Balance June 30, 2015</b>	<b>\$ 83,245</b>	<b>\$ 6,674</b>	<b>\$ 16,612</b>	<b>\$ 5,038</b>	<b>\$ 111,569</b>
<b>Change in unrealized investments held</b>	<b>\$ (7,690)</b>	<b>\$ (714)</b>	<b>\$ 1,175</b>	<b>\$ 70</b>	<b>\$ (7,159)</b>

There were no transfers into or out of Level 3 during fiscal year ended June 30, 2015. Transfers, when made, are deemed to be made at the end of the fiscal year.

Changes in Level 3 securities for the period ended June 30, 2014 is as follows:

Changes in Level 3 for the period ended June 30, 2014	Private Equity and Venture Capital	Hedge Funds	Real Estate	Other Assets	Total
Balance July 1, 2013	\$ 95,906	\$ 5,931	\$ 8,965	\$ 4,378	\$ 115,180
Gain and Loss (Realized and unrealized)	16,859	1,457	2,142	590	21,048
Acquisitions	8,113	-	7,012	-	15,125
Sales	(27,904)	-	(814)	-	(28,718)
<b>Balance June 30, 2014</b>	<b>\$ 92,974</b>	<b>\$ 7,388</b>	<b>\$ 17,305</b>	<b>\$ 4,968</b>	<b>\$ 122,635</b>
<b>Change in unrealized investments held</b>	<b>\$ 3,212</b>	<b>\$ 457</b>	<b>\$ 2,252</b>	<b>\$ 589</b>	<b>\$ 6,510</b>

There were no transfers into or out of Level 3 during fiscal year ended June 30, 2014.

Net investment income (loss) is summarized as follows for fiscal years ended June 30, 2016, 2015, and 2014:

Net Investment Income (Loss)	2016	2015	2014
Interest and dividends	\$ 7,997	\$ 12,397	\$ 13,810
Net realized gains (losses)	15,955	29,417	39,553
Net unrealized gains (losses)	(36,720)	(32,910)	37,855
Other investment income (expenses)	71	201	339
Investment expenses	(3,490)	(3,006)	(4,539)
<b>Net investment income (loss)</b>	<b>\$ (16,189)</b>	<b>\$ 6,099</b>	<b>\$ 87,018</b>
<b>Current year unrestricted operating return (loss)</b>	<b>(1,015)</b>	<b>966</b>	<b>7,053</b>
Current year non-operating investment return (loss):			
Unrestricted	(6,984)	1,826	38,834
Restricted	(8,190)	3,307	41,131
<b>Total current year investment return</b>	<b>\$ (16,189)</b>	<b>\$ 6,099</b>	<b>\$ 87,018</b>
Prior year return designated for current operations:			
Unrestricted	(6,581)	(6,346)	(6,080)
Restricted	(7,693)	(7,372)	(7,016)
<b>Total designated for current operation</b>	<b>\$ (14,274)</b>	<b>\$ (13,718)</b>	<b>\$ (13,096)</b>
<b>Net non-operating investment return:</b>			
Unrestricted	(13,565)	(4,520)	33,387
Restricted	(15,883)	(4,064)	33,481

**Liquidity Terms and Unfunded Commitments** – The following tables represent Howard’s investments by asset class and their respective liquidity terms and unfunded commitments as of June 30, 2016, 2015, and 2014. Real estate funds and limited partnerships do not have readily ascertainable market values and may be subject to withdrawal restrictions.

Investments as of June 30, 2016	Fair Value	Unfunded Commitments	Redemption/ Withdrawal Frequency	Redemption/ Withdrawal Notice Period
Hedge funds	\$ 41,776	\$ -	Monthly-Annually	45-90 days
Real estate funds	17,113	1,082	-	2-10 years
Common/collective trusts	206,216	-	Monthly	-
Limited partnerships	78,680	31,983	-	≤ 10 years

Investments as of June 30, 2015	Fair Value	Unfunded Commitments	Redemption/ Withdrawal Frequency	Redemption/ Withdrawal Notice Period
Hedge funds	\$ 58,434	\$ -	Monthly-Annually	45-90 days
Real estate funds	16,612	3,059	-	2-10 years
Common/collective trusts	200,786	-	Monthly	-
Limited partnerships	83,245	26,841	-	≤ 10 years

Investments as of June 30, 2014	Fair Value	Unfunded Commitments	Redemption/ Withdrawal Frequency	Redemption/ Withdrawal Notice Period
Hedge funds	\$ 55,751	\$ -	Monthly-Annually	45-90 days
Real estate funds	17,304	3,148	-	2-10 years
Common/collective trusts	202,086	-	Monthly	-
Limited partnerships	92,974	29,234	-	≤ 10 years

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**Note 13      Net Assets**

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Temporarily restricted net assets consist of the following at June 30:

Temporarily Restricted Net Assets	2016	2015	2014
Scholarships	\$ 48,910	\$ 52,050	\$ 54,511
Professorships	33,136	34,405	34,753
Student loans	1,721	1,405	1,173
Federal term endowment	119,145	124,883	128,648
General operations and other	33,441	38,176	37,698
<b>Total</b>	<b>\$ 236,353</b>	<b>\$ 250,919</b>	<b>\$ 256,783</b>

The Federal term endowment restriction is for 20 years for each contribution beginning in 1985. Howard transfers the amount of the original contribution plus accumulated investment returns to unrestricted net assets at the end of each 20 year period. For fiscal years ended June 30, 2016, 2015, and 2014, the transfer amounts were \$7,701, \$10,146 and \$10,612, respectively.

Permanently restricted net assets are held in perpetuity and the income there from is only expendable for the noted purposes at June 30:

Permanently Restricted Net Assets	2016	2015	2014
Scholarships	\$ 57,296	\$ 55,122	\$ 54,633
Professorships	24,713	24,431	24,151
Student loans	34,548	36,943	36,321
General operations and other	11,691	11,610	10,838
<b>Total</b>	<b>\$ 128,249</b>	<b>\$ 128,106</b>	<b>\$ 125,943</b>

Temporarily restricted net assets that were released from donor restrictions due to the passage of time or by incurring expenses satisfying the restricted purpose specified by the donors as noted for fiscal years ended June 30, 2016, 2015, and 2014 are as follows:

Net Assets Released from Restrictions	2016	2015	2014
Federal term	\$ 7,701	\$ 10,146	\$ 10,612
Restrictions released based on purpose:			
Scholarships and fellowships	3,242	5,032	3,671
Professorships	711	463	626
Student loans	57	128	127
General operations and other	2,584	1,943	2,024
<b>Total</b>	<b>\$ 14,296</b>	<b>\$ 17,712</b>	<b>\$ 17,060</b>

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**Note 14      Endowment Fund**

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Howard's endowment includes approximately 800 individual accounts established to fund scholarships, professorships, student loans, general operations and other purposes. Effective July 1, 2008, Howard adopted Financial Accounting Standards Board Staff Position – Endowments of Not-for-profit Organizations: Net Asset Classifications of Funds Subject to an Enacted Version of the Uniform Prudent Management of Institutional Funds Act (UPMIFA), and Enhanced Disclosures for All Endowment Funds. Howard is subject to the District of Columbia Uniform Prudent Management of Institutional Funds Act of 2008 (DC UPMIFA).

### **Interpretation of Relevant Law**

**Net Asset Classification** - The Board of Trustees of Howard has interpreted the UPMIFA as requiring the preservation of the fair value of the original gift, as of the gift dates of the donor-restricted endowment funds, absent explicit donor stipulations to the contrary. As a result of this interpretation, Howard classifies as permanently restricted net assets:

1. The original value of gifts with permanent donor-directed use restrictions.
2. The value of accumulations in accordance with the applicable donor gift instrument at the time the accumulation occurs.

Any portion of the donor-restricted gift that is not classified as permanently restricted is classified as temporarily restricted until those amounts are appropriated for expenditure in a manner consistent with the standard of prudence prescribed by UPMIFA.

**Spending** - In accordance with UPMIFA, Howard considers the following factors in making a determination to spend or accumulate donor-restricted endowment funds:

1. The duration and preservation of the fund
2. The purposes of Howard and the donor-restricted endowment fund
3. General economic conditions
4. The possible effect of inflation and deflation
5. The expected total return from income and appreciation of investments
6. Other resources of Howard
7. The investment policies of Howard

**Management and Investment** - In accordance with UPMIFA, Howard considers the following factors in making investment, as well as other management decisions, regarding donor-restricted endowment funds:

1. General economic conditions
2. The possible effect of inflation and deflation
3. The expected tax consequences, if any
4. The role of an investment/action in context of the entire portfolio
5. The expected total income and appreciation
6. Other University resources
7. The needs to preserve capital and make distributions
8. An asset's special relationship or value to the University's charitable purpose.



As of fiscal years ended June 30, 2016, 2015, and 2014 total endowment funds classified as permanently restricted and temporarily restricted net assets were:

<b>Restricted Endowment</b>	<b>2016</b>	<b>2015</b>	<b>2014</b>
<b>Permanently Restricted Net Assets</b> The portion of perpetual endowment funds that is required to be retained permanently either by explicit donor stipulation or by UPMIFA:	\$ 88,658	\$ 81,904	\$ 80,975
<b>Temporarily Restricted Net Assets</b> Time restricted funds The portion of perpetual endowment funds subject to a time restriction under DC UPMIFA:	134,335	140,868	145,272
Without purpose restrictions	3,578	4,204	4,707
With purpose restrictions	49,523	58,106	64,463
<b>Total endowment funds classified as temporarily restricted net assets</b>	\$ 187,436	\$ 203,178	\$ 214,442

The change in value and the composition of amounts classified as endowment as of June 30, 2016 is as follows:

<b>Endowment Change in Value For period ended June 30, 2016</b>	<b>Unrestricted</b>	<b>Temporarily Restricted</b>	<b>Permanently Restricted</b>	<b>Total</b>
<b>Endowment net assets, beginning of year</b>	\$ 308,982	\$ 203,178	\$ 81,904	\$ 594,064
Investment return:				
Investment income	3,200	3,719	175	7,094
Net depreciation (realized and unrealized)	(10,594)	(9,783)	(38)	(20,415)
<b>Total investment return</b>	\$ (7,394)	\$ (6,064)	\$ 137	\$ (13,321)
Contributions	373	3,458	6,727	10,558
Appropriation of endowment assets for operations	(7,775)	(6,389)	(110)	(14,274)
Other changes:				
Match release	7,701	(7,701)	-	-
Transfer and other changes	3,453	954	-	4,407
<b>Endowment net assets, end of year</b>	\$ 305,340	\$ 187,436	\$ 88,658	\$ 581,434
Donor-restricted endowment funds	(7,137)	187,436	88,658	268,957
Board-designated endowment funds	312,477	-	-	312,477
<b>Endowment net assets, end of year</b>	\$ 305,340	\$ 187,436	\$ 88,658	\$ 581,434

The change in value and the composition of amounts classified as endowment as of June 30, 2015 is as follows:

<b>Endowment Change in Value For period ended June 30, 2015</b>	<b>Unrestricted</b>	<b>Temporarily Restricted</b>	<b>Permanently Restricted</b>	<b>Total</b>
<b>Endowment net assets, beginning of year</b>	<b>\$ 299,890</b>	<b>\$ 214,442</b>	<b>\$ 80,975</b>	<b>\$ 595,307</b>
Investment return:				
Investment income	4,821	5,803	239	10,863
Net depreciation (realized and unrealized)	(2,068)	(3,780)	(153)	(6,001)
<b>Total investment return</b>	<b>\$ 2,753</b>	<b>\$ 2,023</b>	<b>\$ 86</b>	<b>\$ 4,862</b>
Contributions	182	3,426	827	4,435
Appropriation of endowment assets for operations	(6,994)	(6,615)	(108)	(13,717)
Other changes:				
Match release	10,146	(10,146)	-	-
Transfer and other changes	3,005	48	124	3,177
<b>Endowment net assets, end of year</b>	<b>\$ 308,982</b>	<b>\$ 203,178</b>	<b>\$ 81,904</b>	<b>\$ 594,064</b>
Donor-restricted endowment funds	(4,181)	203,178	81,904	280,901
Board-designated endowment funds	313,163	-	-	313,163
<b>Endowment net assets, end of year</b>	<b>\$ 308,982</b>	<b>\$ 203,178</b>	<b>\$ 81,904</b>	<b>\$ 594,064</b>

The change in value and the composition of amounts classified as endowment as of June 30, 2014 is as follows:

<b>Endowment Change in Value For period ended June 30, 2014</b>	<b>Unrestricted</b>	<b>Temporarily Restricted</b>	<b>Permanently Restricted</b>	<b>Total</b>
<b>Endowment net assets, beginning of year</b>	<b>\$ 250,937</b>	<b>\$ 187,817</b>	<b>\$ 78,771</b>	<b>\$ 517,525</b>
Investment return:				
Investment income	5,934	7,046	163	13,143
Net depreciation (realized and unrealized)	35,959	35,617	525	72,101
<b>Total investment return</b>	<b>\$ 41,893</b>	<b>\$ 42,663</b>	<b>\$ 688</b>	<b>\$ 85,244</b>
Contributions	330	3,475	1,199	5,004
Appropriation of endowment assets for operations	(3,131)	(9,797)	(168)	(13,096)
Other changes:				
Match release	9,820	(9,820)	-	-
Transfer and other changes	41	104	485	630
<b>Endowment net assets, end of year</b>	<b>\$ 299,890</b>	<b>\$ 214,442</b>	<b>\$ 80,975</b>	<b>\$ 595,307</b>
Donor-restricted endowment funds	(2,666)	214,442	80,975	292,751
Board-designated endowment funds	302,556	-	-	302,556
<b>Endowment net assets, end of year</b>	<b>\$ 299,890</b>	<b>\$ 214,442</b>	<b>\$ 80,975</b>	<b>\$ 595,307</b>

Howard's endowment net assets include receivables related to the federal term endowment, which have not been received and therefore not included as part of endowment investments. For fiscal years ended June 30, 2016, 2015, and 2014 receivables of \$4,302, \$3,405 and \$3,405, respectively were recorded, and represent the difference between endowment investments reflected on consolidated statements of financial position and endowment net assets reported above.

***Funds with Deficiencies*** - From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level the donor or the Trustees require Howard to retain as a fund of perpetual duration. Deficiencies of this nature, so called “underwater accounts”, are reported in unrestricted net assets and totaled \$7,137, \$4,181 and \$2,666 as of fiscal years ended June 30, 2016, 2015, and 2014, respectively. Howard has adopted a policy allowing spending in certain situations from underwater, donor-restricted endowment funds, absent overriding provisions in donor agreements. Howard’s investment and spending policy is intended to conform with the UPMIFA which allows spending in underwater endowments, in support of an endowment’s purpose.

***Return Objectives and Risk Parameters*** - Howard has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to minimize the risk associated with obtaining such income streams. Endowment assets include those that the organization must hold in perpetuity or for a donor-specified period(s), as well as board-designated endowment funds. Under these policies the endowment assets are invested through a well-diversified investment program designed to exceed the risk-adjusted performance of the market benchmark representative of each asset class over rolling five to seven year periods. Howard’s objective, over time, is to obtain an average total real rate of return (inflation adjusted) that exceeds its targeted distribution amount over rolling five to seven year periods. Howard’s investment strategy aims for a low to moderate level of investment risk. Actual returns in any given year may significantly vary from this objective.

***Strategies Employed for Achieving Objectives*** - To satisfy its long-term rate-of-return objectives, Howard relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and yield (interest and dividends). Howard targets a diversified asset allocation which places greater emphasis on global public equity-based investments complimented by private markets, real estate and fixed income strategies to achieve its long-term return objectives within prudent risk constraints. The endowment’s long-term target asset allocation is approved by the Investment Committee of the Board of Trustees.

***Spending Policy and How the Investment Objectives Relate to Spending Policy*** - Howard’s spending policy allows for distribution each year of up to 5 percent of its endowment fund's market value, excluding Federal term and Islamic Funds, based upon a three-year moving average with the most recent year removed. In establishing this policy, Howard considered the long-term expected return on its endowment consistent with its general goal of facilitating the ability of

endowments (specifically permanent and time specific endowments) to best fulfill the purposes for which they were designed.

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**Note 15      Estimated Third-Party Settlements**

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Certain services rendered by the Hospital are reimbursed by third-party payors at cost, based upon cost reports filed after year-end. Contractual allowances are recorded based upon preliminary estimates of reimbursable costs.

Net patient service revenue recorded under cost reimbursement agreements for the current and prior years is subject to audit and retroactive adjustments by significant third-party payors for the following years:

Medicare 2015-2016  
Medicaid 2011-2016

Final settlements and changes in estimates related to Medicare and Medicaid third-party cost reports for prior years resulted in an increase (decrease) in net patient service revenues of approximately \$7,961, \$8,764 and (\$8,879) for fiscal years ended June 30, 2016, 2015, and 2014, respectively.

Third-party settlement revenue	2016	2015	2014
Medicare appeals	\$ -	\$ -	\$ (9,472)
Medicare pass-through	9,990	8,644	10,907
Disproportionate Share Hospital	25,990	43,262	37,406
Graduate Medical Education	6,429	6,973	5,338
Other	4,228	(163)	5,773
<b>Total third-party settlement revenue</b>	<b>\$ 46,637</b>	<b>\$ 58,716</b>	<b>\$ 49,952</b>

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**Note 16 Long-Lived Assets**

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Long-Lived Assets	2016	2015	2014
Land and land improvements	\$ 27,911	\$ 27,911	\$ 27,911
Buildings and building improvements	871,570	847,079	836,112
Property held for expansion	54,819	54,819	54,819
Property held under leases	28,236	28,236	28,236
Furniture and equipment	321,277	292,669	292,751
Library books	91,376	91,075	91,036
Right to use assets - operating	3,958	4,886	5,330
Right to use assets - financing	68,871	76,589	76,145
Software	114,827	114,353	112,941
Software in progress	6,169	6,169	5,833
Construction in progress	15,186	77,798	50,849
Long-lived assets, gross	1,604,200	1,621,584	1,581,963
Accumulated depreciation and amortization	(1,027,747)	(1,001,841)	(956,361)
<b>Long-lived assets, net</b>	<b>\$ 576,453</b>	<b>\$ 619,743</b>	<b>\$ 625,602</b>

For the fiscal year ended June 30, 2016 there were \$14,662 in additions and \$27,339 in sales, disposals and retirements. Right to use assets – operating and financing are not available by Howard for use as collateral.

Depreciation expense for the years ended June 30, 2016, 2015, and 2014 were \$44,883, \$51,596 and \$55,900, respectively. For fiscal years ended June 30, 2016, 2015, and 2014, respectively, net interest costs of \$158, \$198 and \$592 were incurred during construction and capitalized as part of the cost of capital projects.

Long-lived assets includes property held for expansion, consisting of land and buildings acquired for future use in carrying out educational, research and other activities in line with the overall mission of Howard. Depreciation for buildings commences when property is converted to use.

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**Note 17 Leases**

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***Lease Obligations***

Howard University has elected to adopt the new Accounting Standard Update (ASU) 2016-02, *Leases (Topic 842)* for leases issued by the Financial Accounting Standards Board (FASB). The new standard defines a lease as a contract, or part of a contract, that conveys the right to control the use of identified property, plant or equipment (the underlying asset) for a period of time in exchange for consideration.

Under the new standard, Howard has recognized lease assets and liabilities, with certain exceptions, on the statement s of financial position. Both financing leases and operating leases create an asset (right-of-use or ROU asset) and a liability measured at the present value of the lease payment, that are reflected on our statement of financial position.

Howard University assessed whether any expired or existing contracts are or contain leases. The lease classification was also assessed to determine whether there were any expired or existing leases classified as operating leases. All existing leases that were classified as capital leases will now be classified as finance leases.

Howard is obligated under financing leases for office and medical equipment that extend through 2020, and the chiller plant that extends through 2031 in the amounts of \$25,045, \$33,488 and \$44,125, respectively at fiscal years ended June 30, 2016, 2015, and 2014. The assets are amortized over their estimated useful lives. Accumulated amortization related to the leased assets is \$51,066, \$55,068 and \$46,764, respectively.

Howard has several non-cancelable operating leases for office space, master antenna, fleet and equipment that expire by 2019. Future rental lease obligation payments for the master antenna and fleet for fiscal years ended June 20, 2017, 2018 and 2019 will be \$566, \$522, \$213, respectively.

Rental payments are recognized on a straight-line basis and are allocated in the statements of activities by function. Rent expense related to building space and equipment for fiscal years ended June 30, 2016, 2015, and 2014 was \$8,446, \$6,012, and \$5,590, respectively.

At June 30, 2016, the minimum future lease principal payments under financing leases and non-cancelable operating leases (with initial or remaining lease terms in excess of one year) for future years ending June 30, are as follow:

<b>Lease Obligations</b>	<b>Financing Leases</b>	<b>Operating Leases</b>
Future principal and interest years ending June 30		
2017	\$ 6,570	\$ 566
2018	4,107	522
2019	2,913	212
2020	2,204	-
2021	2,216	-
2022 and thereafter	21,764	-
Obligation, gross	39,774	1,300
Amounts representing interest rates from 2% to 10%	(14,729)	-
<b>Total Lease Obligations, net</b>	<b>\$ 25,045</b>	<b>\$ 1,300</b>

At June 30, 2016, the minimum lease interest payments under finance leases and non-cancelable operating leases (with initial or remaining lease terms in excess of one year) for future years ending June 30, are as follow:

<b>Lease obligations - interest</b>	<b>Financing Leases</b>
Future interest payments years ending June 30	
2017	\$ 1,804
2018	1,601
2019	1,461
2020	1,378
2021	1,306
2022 and thereafter	7,179
<b>Total lease obligation interest</b>	<b>\$ 14,729</b>

The right to use operating and finance lease assets are reported on the Statement of Financial Position as a component of Property Plant and Equipment, and are disclosed in Footnote 16.

At June 30, 2016, the amortization of finance right to use lease assets for fiscal years ended June 30, 2016, 2015, and 2014 was, \$3,958, \$4,886 and \$5,330, respectively. The minimum future lease payments for right to use financing assets for years ending June 30, are as follow:

<b>Lease assets</b>	<b>Right to Use Financing Assets</b>
2017	\$ 970
2018	109
2019	-
2020	-
2021	-
2022 and thereafter	-
<b>Total minimum lease income receipts</b>	<b>\$ 1,079</b>

### ***Lease Income***

Howard University assessed the Meridian Hill transaction to be a lease and determined the lease was of 2 separate components, namely building and land. Howard University has engaged an independent 3<sup>rd</sup> party company to value land and building respectively. The Meridian Hill lease is treated separately from other leases. Howard University has elected to account for each separate lease component separately from the non-lease components of the contract. Howard University has classified each separate lease component at the lease

commencement date. For the modification of lease contracts, Howard University has accounted for it as a separate contract when required to do so.

Howard University determined that land is a part of the underlying assets in the Meridian Hill lease transaction. Therefore, Howard University has appropriately accounted for the right to use land as a separate lease component unless the accounting effect of doing so would be insignificant (for instance, separating the land element would have no effect on lease classification of any lease component or the amount recognized for the land lease component would be insignificant).

Under ASC 842-30-50-3, lessors are required to classify leases. Operating leases are to be recognized by lessors as lease receivables. Such leases results in the recognition of lease income on a straight-line basis, while the underlying leased asset remains on the lessor's statement of financial position and is continuously depreciated.

Howard has several operating leases for retail and commercial space for which rent payments are fixed at the time of lease commencement. The Basis, terms, conditions and extensions for each leased property is specified in the lease agreement. Lease payments are governed by the lease agreement and are fixed. Some lessors either have the option of re-negotiating a new agreement upon the termination of the lease or extending the terms in the current lease for another couple of years or go on a month-to-month lease. Termination terms are explicitly stated in each lease agreements as both the Lessor and Lessee can exercise rights to terminate agreement.

Howard's leased properties are comprised of (1). Wonder Plaza Building, (2) Parking Spaces, (3) Rooftops Towers, and (4) Ground Lease (Provident and Meridian Hill). Other standalone buildings owned by Howard are leased to private corporations such as (5) Public Charter School, (6) Car Rental Company, and (7) Pharmacy. Howard leases space in the Hospital to a large private pharmacy. Howard does not have any standing agreements for lessee to purchase the underlying asset being leased at the end of the lease term.

Howard University receives monthly income under these lease agreements, which have termination dates through 2022 and thereafter. The total lease income received for fiscal years ended June 30, 2016, 2015, and 2014 was \$1,745, \$1,508 and \$1,505, respectively.



The future minimum lease income for years ending at June 30 is as follows:

Future minimum lease income	June 30, 2016
2017	1,895
2018	1,605
2019	1,640
2020	1,641
2021	1,542
2022 and thereafter	6,168
<b>Total minimum lease income receipts</b>	<b>\$ 14,491</b>

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**Note 18      Bonds and Notes Payable**

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(a) ***Bonds Payable***

Howard is obligated with respect to the following bond issues at June 30:

Bonds Payable	2016	2015	2014
<b><i>District of Columbia issues:</i></b>			
2010 Revenue bonds, 5.05% Serial due 2010 through 2025	\$ 7,477	\$ 8,048	\$ 8,650
2011A Revenue bonds 5.00% to 6.50% Serial due 2020 through 2041	225,250	225,250	225,250
2011B Revenue bonds 4.31% to 7.63% Serial due 2015 through 2035	63,665	65,065	65,065
2016 Revenue bonds Serial due 2015 through 2031	160,000	-	-
<b>Total bonds payable, gross</b>	<b>\$ 456,392</b>	<b>\$ 298,363</b>	<b>\$ 298,965</b>
Unamortized bond premium (discount)	(5,316)	(5,510)	(5,771)
<b>Total bonds payable, net</b>	<b>\$ 451,076</b>	<b>\$ 292,853</b>	<b>\$ 293,194</b>

(1) **2010 Revenue Bonds**

In August 2010, Howard issued \$10,400 of Series 2010 bonds. The bonds bear interest at 5.05% repayable from 2010 to 2025. The proceeds were used to retire an expiring equipment note and to fund energy related projects.

(2) **2011 Revenue Bonds**

In April 2011, Howard issued \$225,250 of tax exempt revenue bonds (Series 2011A) and \$65,065 of taxable revenue bonds (Series 2011B) to refund the Series 1998 and Series 2006 bonds and to finance new capital improvements. The interest rate on the tax exempt bonds range from 5.25% to 6.50% and the bonds are repayable from 2020 to 2041. The

taxable bonds bear interest between 4.31% and 7.63% and are repayable from 2015 to 2035. The average coupon is 6.57%. The 2011 bonds require Howard to maintain a debt service fund of \$12,634. At fiscal year ended June 30, 2016 the fund balance was \$12,848.

The Series 2011A Bonds maturing on or after October 1, 2021 are subject to optional redemption by the District of Columbia, at the written direction of Howard, in its sole discretion, on or after April 1, 2021 in whole or in part at any time, at a redemption price equal to the principal amount of the Series 2011A Bonds being redeemed, plus accrued interest, if any, to the redemption date.

The Series 2011B Bonds are subject to optional redemption prior to maturity in whole or in part on any Business Day at the Make-Whole Redemption Price at the direction of Howard.

2011 Bond proceeds of \$19,782 were used to create a deposit for capitalized interest. The remaining balance of this fund is \$0 at June 30, 2016.

On June 5, 2015, Moody's Investors Service placed under review a downgrade of Howard's Series 2011A and 2011B bonds to Ba2 with a negative outlook from Baa3. The downgrade to Ba2 reflects the cumulative effect on ongoing losses at both Howard University Hospital and Howard University combined with expected continued pressure on revenue and liquidity management. On July 30, 2015, Moody's Investors Service confirmed the June 5, 2015 review for downgrade of Howard's Series 2011A and 2011B bonds to Ba2 with a negative outlook from Baa3.

**(3) 2016 Revenue Bonds**

In June 2016, Howard issued \$162,420 of taxable private placement bonds ("the 2016 Revenue Bonds"). The Bonds will bear interest at a weekly rate with a maximum bond rate of 12%. The 2016 Revenue Bonds are repayable by August 2031.

**(4) Fair Value of Bonds**

Currently the estimated fair value of Howard's bonds is determined based on quoted market prices. At fiscal years ended June 30, 2016, 2015, and 2014, the estimated fair value was approximately \$480,939, \$316,072 and \$330,896, respectively. Fair value estimates are made at a specific point in time, are subjective in nature, and involve uncertainties and matters of judgment. Howard is not required to settle its debt obligations at fair value

and settlement is not possible in most cases because of the terms under which the debt was issued and legal limitations on refunding tax-exempt debt.

(b) **Notes Payable**

Howard is obligated with respect to the following notes payable at June 30:

Notes Payable	2016	2015	2014
<b>Bank of America Property Loan</b>			
Due monthly, through June 1, 2017, variable interest rate of Libor plus 3.50%	\$ -	\$ 3,971	\$ 5,447
<b>Multi-bank Agreement</b>			
Due July 24, 2016, variable interest rate at daily LIBOR plus 2.5%	-	95,000	65,000
<b>Total Notes Payable</b>	<b>\$ -</b>	<b>\$ 98,971</b>	<b>\$ 70,447</b>

In June 2016, Howard entered into a \$75,000 JP Morgan Chase Revolving Credit Agreement. There is no outstanding balance at June 30, 2016. The initial agreement terminates in June 2019. Howard is obligated to pay a quarterly non-refundable commitment fee. The Commitment fee shall be payable upon availability of funds commencing on October 1, 2016.

In June 2014, Howard replaced its \$135,000 Multi-bank Credit Agreement with a \$100,000 Multi-bank Credit Agreement that extended through July 2016. The outstanding balance of \$95,000 was paid with proceeds from the 2016 Revenue Bonds in June 2016. Outstanding borrowings under these agreements at fiscal years ended June 30, 2016, 2015, and 2014 were \$0, \$95,000 and \$65,000, respectively.

In February 2014, Howard amended its financing agreement for the Bank of America Property Loan for the unpaid principal balance of \$5,447, extending the final maturity date from May 31, 2014 to June 1, 2017. In June 2016, the outstanding balance of \$3,971 was paid with proceeds from the 2016 Revenue Bonds.

(c) **Compliance with Contractual Covenants**

In May 2011, Howard's debt covenants were amended in conjunction with the 2011 Bond issuance and Multi-bank Credit Agreement execution. In June 2014, the debt covenants were amended for the re-negotiated Multi-bank Credit Agreement.

In 2015, Howard, as was required by the terms of the Multi-bank Credit Agreement, granted lenders a security interest in collateral in the form of cash and

securities delivered to their collateral agent. Howard would pledge additional collateral when the collateral value was less than the minimum collateral amount. The collateral agent was not allowed to re-pledge or sell the collateral securities. At June 30, 2015, the carrying value of the pledged securities was \$133,903 and was reported in endowment investments. There were no pledged securities at fiscal years ended June 30, 2016 or 2014.

At June 30, 2016, 2015, and 2014, Howard was compliant with the Liquidity Ratio measurements and with the Debt Service Coverage Ratio measurements for the 2011 Revenue Bonds and the Property Loan. At June 30, 2016, 2015, and 2014, Howard was compliant with the Liquidity Ratio measurement for the Multi-bank Credit Agreement. The Debt Service Coverage Ratio measurement requirement was removed for fiscal year 2015 for the Multi-bank Credit Agreement. Howard was not in compliance with the Debt Service Coverage Ratio for the Multi-bank Credit Agreement at June 30, 2014.

The 2011 Bond, 2016 Revenue Bonds and Revolving Credit Agreement contain restrictive financial covenants as summarized in the table below as of June 30, 2016.

Covenant	Instrument	Measurement Date	Criteria
Debt Service Coverage Ratio	2011 Revenue Bonds	June 30 each year	1.10:1.00
Debt Service Coverage Ratio	2016 Revenue Bonds	June 30 each year	1.10:1.00
Liquidity Ratio	Revolving Credit Agreement	Quarterly	0.25:1.00

(d) ***Scheduled Bond and Note Repayments***

The scheduled principal repayments of bonds and notes payable, including sinking fund requirements, are as follows:

Aggregate Annual Maturities	2016	2015	2014
2015	NA	NA	\$ 67,352
2016	NA	\$ 98,813	3,813
2017	\$ 2,546	4,700	4,426
2018	10,966	2,771	2,771
2019	12,079	3,480	3,480
2020	14,148	5,135	5,135
2021	14,957	3,892	3,892
2022 and thereafter	401,696	278,543	278,543
Subtotal	456,392	397,334	369,412
Bond premiums/(discounts)	(5,316)	(5,510)	(5,771)
<b>Total</b>	<b>\$ 451,076</b>	<b>\$ 391,824</b>	<b>\$ 363,641</b>

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**Note 19      Retirement Plans**

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**Employee Retirement Plan** - Howard had a noncontributory defined benefit pension plan (the Plan) that was available to substantially all full-time employees. In accordance with government funding regulations, Howard's policy is to make annual contributions to the Plan at least equal to the minimum contribution. Based upon years of service and other factors, the Plan's benefit formula provides that eligible retirees receive a percentage of their final annual pay, based upon years of service and other factors. Plan assets consist primarily of common equity securities, U.S. Treasury securities, corporate bonds, and private investment funds. Effective July 1, 2010, the Plan no longer accrues benefits and is closed to new participants.

**Post-retirement Plan** - Howard provides post-retirement medical benefits and life insurance to employees who, at the time they retire, meet specified eligibility and service requirements. Howard pays a portion of the cost of such benefits depending on various factors, including employment start date, age, years of service and either the date of actual retirement or the retirement eligibility date of the participant. The post-retirement benefit plan is unfunded and has no plan assets.

Effective April 1, 2013 Howard eliminated the subsidy for post-65 medical and dental coverage for Class II and Class IV participants. This plan change is considered a significant event, and triggered a plan amendment as of the re-measurement date. The action resulted in (1) revised expense for the final quarter of the fiscal year ended June 30, 2013, which included amortization of the new prior service credit generated from the negative plan amendment and (2) reduction to the Accumulated Pension Benefit Obligation of \$113,000.

During FY 2016 there was a curtailment of the Hospital's plan due to a nearly 20% decrease in active participants in FY 2015. This reduced the Accumulated Benefit Obligation by \$2,600.

**Supplemental Retirement Plan** – Howard also has a supplemental retirement plan available to certain retired executives. The plan is noncontributory, unfunded and has a June 30 measurement date. The projected benefit obligation is \$1,711, \$1,704 and \$1,710 at fiscal years ended June 30, 2016, 2015, and 2014, respectively. The amounts not yet reflected in operating expenses, but included in unrestricted net assets pertain to accumulated losses of \$1,106, \$1,024 and \$943 at June 30, 2016, 2015, and 2014, respectively. The actuarial cost method and the assumption on discount rate used to determine the benefit obligation and net periodic cost in the actuarial valuation for the year ended June 30, 2016 are consistent with the method and assumptions used for the defined benefit pension plan.

**Savings Plan** – Howard supplements its pension plan by offering employees a defined contribution plan under Section 403(b) of the Internal Revenue Code. Eligible employees received a contribution of 6% of base salary and are also permitted to contribute up to 15% of their base pay to the plan. The administration of the plan is provided by three financial administrators: Teachers Insurance and Annuity Association/College Retirement Equities Fund, American International Group – Variable Annuity Life Insurance Company, and Lincoln Financial. Effective July 1, 2011 Lincoln Financial has been replaced as a financial administrator by Voya Financial (formally ING Financial Advisors). These administered plans provide additional retirement benefits including the purchase of annuity contracts for eligible employees. Total costs recognized in the consolidated statements of activities were \$20,494, \$22,502 and \$22,989 for fiscal years ended June 30, 2016, 2015, and 2014, respectively. The fair value of plan assets for the savings plan for fiscal years ended June 30, 2016, 2015, and 2014 were \$914,319, \$929,126 and \$921,876, respectively. These investments are held by Howard on behalf of its employees and excluded from the consolidated statements of financial position.

Effective July 1, 2010, the Savings Plan was modified such that Howard will automatically, upon hire, contribute 6% of any eligible employee's base pay, regardless of tenure or election into the Savings Plan. Howard will contribute a matching contribution of up to 2% of employee elected self contributions.

Effective March 1, 2013 employer base (6%) and matching (2%) contributions were suspended. Employees were still able to contribute to the Savings Plan. This suspension was ended effective July 1, 2013.

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Howard recognizes a plan's overfunded or underfunded status as an asset or liability, with an offsetting adjustment to unrestricted net assets. The reconciliation of the Plan's funded status to amounts recognized in the consolidated financial statements at fiscal years ended June 30, 2016, 2015, and 2014 are as follows:

Retirement Benefits	Pension			Medical and Life Insurance			Savings Plan and Supplemental		
	2016	2015	2014	2016	2015	2014	2016	2015	2014
<b>Change in benefit obligation</b>									
Projected benefit obligation at beginning of year	\$ 669,090	\$ 659,234	\$ 616,455	\$ 63,438	\$ 71,302	\$ 67,852	\$ 1,704	\$ 1,710	\$ 1,737
Service Cost	-	-	-	479	507	459	-	-	-
Interest Cost	28,291	27,147	28,760	2,728	2,927	3,198	69	67	78
Actuarial (gain)/loss	40,972	17,285	43,938	5,279	(7,051)	4,678	182	171	139
Benefits paid	(36,474)	(34,576)	(32,619)	(10,833)	(11,970)	(10,270)	(244)	(244)	(244)
Special termination benefits	-	-	-	-	-	-	-	-	-
Medicare Part D subsidy	-	-	-	18	820	828	-	-	-
Employee contributions	-	-	-	7,281	6,903	4,557	-	-	-
Prior service amendment	-	-	-	-	-	-	-	-	-
Plan curtailments	-	-	-	(782)	-	-	-	-	-
Plan amendments	-	-	2,700	-	-	-	-	-	-
<b>Projected benefit obligation at end of period</b>	<b>\$ 701,879</b>	<b>\$ 669,090</b>	<b>\$ 659,234</b>	<b>\$ 67,608</b>	<b>\$ 63,438</b>	<b>\$ 71,302</b>	<b>\$ 1,711</b>	<b>\$ 1,704</b>	<b>\$ 1,710</b>
<b>Change in plan assets:</b>									
Fair value of plan assets at beginning of year	538,962	552,605	489,000	-	-	-	-	-	-
Actual return on plan assets	24,393	4,632	85,230	-	-	-	-	-	-
Employer contributions	8,320	16,301	10,994	3,534	4,247	4,885	20,494	22,502	22,722
Employee contributions	-	-	-	7,281	6,903	4,557	-	-	-
Medicare Part D subsidy	-	-	-	18	820	828	-	-	-
Benefits paid	(36,474)	(34,576)	(32,619)	(10,833)	(11,970)	(10,270)	(244)	(244)	(244)
<b>Fair value of plan assets at end of period</b>	<b>\$ 535,201</b>	<b>\$ 538,962</b>	<b>\$ 552,605</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>
<b>Total</b>	<b>\$ (166,678)</b>	<b>\$ (130,128)</b>	<b>\$ (106,629)</b>	<b>\$ (67,608)</b>	<b>\$ (63,438)</b>	<b>\$ (71,302)</b>	<b>NA</b>	<b>NA</b>	<b>NA</b>

NA = Not Applicable

Components of net periodic benefit cost and other amounts recognized in unrestricted net assets at fiscal years ended June 30, 2016, 2015, and 2014:

Retirement Benefits	Pension			Medical and Life Insurance			Savings Plan and Supplemental		
	2016	2015	2014	2016	2015	2014	2016	2015	2014
<b>Recognized in Statement of Activities</b>									
Amortization of transition obligation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Amortization of prior service cost	100	100	-	-	-	-	-	-	-
Amortization of net actuarial loss	8,102	8,459	7,972	626	802	621	99	91	79
<b>Total amortization</b>	<b>\$ 8,202</b>	<b>\$ 8,559</b>	<b>\$ 7,972</b>	<b>\$ 626</b>	<b>\$ 802</b>	<b>\$ 621</b>	<b>\$ 99</b>	<b>\$ 91</b>	<b>\$ 79</b>
Service Cost	-	-	-	479	507	459	20,494	22,502	22,478
Interest Cost	28,291	27,147	28,760	2,728	2,927	3,198	69	67	78
Curtailment recognition of prior service credit	-	-	-	(15,342)	(12,785)	(12,785)	-	-	-
Expected return on plan assets	(32,337)	(27,834)	(27,287)	-	-	-	-	-	-
<b>Recognized in operating expenses</b>	<b>\$ 4,156</b>	<b>\$ 7,872</b>	<b>\$ 9,445</b>	<b>\$ (11,509)</b>	<b>\$ (8,549)</b>	<b>\$ (8,507)</b>	<b>\$ 20,662</b>	<b>\$ 22,660</b>	<b>\$ 22,635</b>
Amortization of transition obligation	-	-	-	-	-	-	-	-	-
Amortization of prior service cost	(100)	(100)	-	-	-	-	-	-	-
Amortization of net actuarial loss	(8,102)	(8,459)	(7,972)	(626)	(802)	(621)	(99)	(91)	(79)
<b>Total amortization</b>	<b>\$ (8,202)</b>	<b>\$ (8,559)</b>	<b>\$ (7,972)</b>	<b>\$ (626)</b>	<b>\$ (802)</b>	<b>\$ (621)</b>	<b>\$ (99)</b>	<b>\$ (91)</b>	<b>\$ (79)</b>
Net actuarial (gain) loss during the year	48,914	40,532	(14,011)	4,528	(6,453)	2,839	182	171	139
New prior service cost arising during period	-	-	2,700	15,342	12,785	12,785	-	-	-
<b>Total recognized in other changes in unrestricted net assets</b>	<b>\$ 40,712</b>	<b>\$ 31,973</b>	<b>\$ (19,283)</b>	<b>\$ 19,244</b>	<b>\$ 5,530</b>	<b>\$ 15,003</b>	<b>\$ 83</b>	<b>\$ 80</b>	<b>\$ 60</b>
<b>Total recognized in Statements of Activities</b>	<b>\$ 44,868</b>	<b>\$ 39,845</b>	<b>\$ (9,838)</b>	<b>\$ 7,735</b>	<b>\$ (3,019)</b>	<b>\$ 6,496</b>	<b>\$ 20,745</b>	<b>\$ 22,740</b>	<b>\$ 22,695</b>

Amounts included in unrestricted net assets at fiscal years ended June 30, 2016, 2015, and 2014:

Retirement Benefits	Pension			Medical and Life Insurance		
	2016	2015	2014	2016	2015	2014
Net actuarial loss	\$ (300,743)	\$ (259,931)	\$ (227,858)	\$ (10,322)	\$ (6,420)	\$ (13,675)
Prior service cost	(2,500)	(2,600)	(2,700)	29,800	45,142	57,927
<b>Total</b>	<b>\$ (303,243)</b>	<b>\$ (262,531)</b>	<b>\$ (230,558)</b>	<b>\$ 19,478</b>	<b>\$ 38,722</b>	<b>\$ 44,252</b>

The estimated net actuarial loss, prior service cost, and transition obligation for the pension and post-retirement plans that were accounted for as a part of net periodic benefit cost over the next fiscal year are \$10,160, \$100 and \$0, respectively.

Contributions to the pension plan of \$8,320, \$16,301 and \$10,994, were made in fiscal years ended June 30, 2016, 2015, and 2014, respectively. Contributions of \$0 are expected to be paid to the pension plan during the fiscal year ended June 30, 2017.

The weighted average assumptions used to determine the benefit obligation in the actuarial valuations for fiscal years ended June 30, 2016, 2015, and 2014 were as follows:

Actuarial Assumptions	Pension Benefits			Post-retirement Benefits		
	2016	2015	2014	2016	2015	2014
Discount rate	3.88%	4.36%	4.25%	3.96%	4.45%	4.29%
Expected return on plan assets	7.00%	7.00%	7.00%	0.00%	0.00%	0.00%
Rate of compensation increase	-	-	-	3.50%	3.50%	3.50%

The weighted average assumptions used to determine net periodic cost in the actuarial valuations for fiscal years ended June 30, 2016, 2015, and 2014 were as follows:

Actuarial Assumptions	Pension Benefits			Post-retirement Benefits		
	2016	2015	2014	2016	2015	2014
Discount rate	4.36%	4.25%	4.82%	4.45%	4.29%	4.89%
Expected return on plan assets	7.00%	7.00%	7.00%	0.00%	0.00%	0.00%
Rate of compensation increase						
To age 35	-	-	-	3.50%	3.50%	3.50%
Thereafter	-	-	-	3.50%	3.50%	3.50%

The overall long-term rate of return for the pension plan assets was developed by estimating the expected long-term real return for each asset class within the portfolio. An average weighted real rate of return was computed for the portfolio which reflects the Plan's targeted asset allocation. Consideration was given to the correlation between asset classes and the anticipated real rate of return and was added to the anticipated long-term rate of inflation.



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Pension plan investments as of June 30, 2016 were as follows:

<b>Pension Plan Investments as of June 30, 2016</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
<b>Pension Plan Investments</b>				
<b>Assets:</b>				
Money Market Instrument (1)	\$ -	\$ 6,969	\$ -	\$ 6,969
Common/Collective Trusts				
Emerging Market Equity (3)	-	10,545	-	10,545
International Equity-Developed (3)	-	78,737	-	78,737
Domestic Common Stock (3)	-	20,717	-	20,717
Commodity Inflation Hedging (8)	-	11,185	-	11,185
Common Stock (3)	26,974	-	-	26,974
Fixed Income	-	-	-	-
Mortgage Backed Securities (2)	-	10,468	-	10,468
Corporate Bond (2)	-	37,517	-	37,517
Government Bond (2)	81,691	-	-	81,691
Hedge Fund	-	-	-	-
Distressed Debt (4)	-	-	-	-
Equity Long/short (4)	-	5,525	-	5,525
Event driven (4)	-	(0)	-	(0)
Global opportunities (4)	-	7,173	-	7,173
Multi-strategy (4)	-	-	57	57
Mutual Fund	-	-	-	-
Emerging Market Equity Security (3)	15,473	-	-	15,473
Domestic Common Stock (3)	32,177	-	-	32,177
International Equity Security (3)	-	-	-	-
Domestic Fixed Income (2)	122,828	-	-	122,828
Private Equity and Venture Capital (4)	-	-	71,620	71,620
Real Estate (4)	-	-	10,790	10,790
<b>Total assets</b>	<b>\$ 279,143</b>	<b>\$ 188,835</b>	<b>\$ 82,467</b>	<b>\$ 550,445</b>
<b>Liabilities:</b>				
Financial Derivatives – Option Contracts	\$ -	\$ (308)	\$ -	\$ (308)
<b>Total liabilities</b>	<b>\$ -</b>	<b>\$ (308)</b>	<b>\$ -</b>	<b>\$ (308)</b>
<b>Total pension plan investments</b>	<b>\$ 279,143</b>	<b>\$ 188,527</b>	<b>\$ 82,467</b>	<b>\$ 550,137</b>
Operating asset not subjected to fair value reporting (9)	21,467	-	-	21,467
Operating liabilities not subjected to fair value reporting (9)	(36,403)	-	-	(36,403)
<b>Total plan assets</b>	<b>\$ 264,206</b>	<b>\$ 188,527</b>	<b>\$ 82,467</b>	<b>\$ 535,201</b>

Level 3 investments were 15% of total plan investments.

Refer to Note 12 – Fair Value Measurements for explanation of financial instrument classifications.

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Pension plan investments as of June 30, 2015 were as follows:

<b>Pension Plan Investments as of June 30, 2015</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
<b>Pension Plan Investments</b>				
<b>Assets:</b>				
Money Market Instrument (1)	\$ 391	\$ 10,505	\$ -	\$ 10,896
Common/Collective Trusts				
Emerging Market Equity (3)	-	4,616	-	4,616
International Equity-Developed (3)	-	85,472	-	85,472
Domestic Common Stock (3)	-	22,056	-	22,056
Commodity Inflation Hedging (8)	-	13,274	-	13,274
Common Stock (3)	30,937	-	-	30,937
Fixed Income				
Mortgage Backed Securities (2)	-	6,938	-	6,938
Corporate Bond (2)	-	2,181	-	2,181
Government Bond (2)	64,809	-	-	64,809
Hedge Fund				
Distressed Debt (4)	-	2,769	-	2,769
Equity Long/short (4)	-	5,657	-	5,657
Event driven (4)	-	2,663	2,477	5,140
Global opportunities (4)	-	2,488	-	2,488
Multi-strategy (4)	-	-	2,578	2,578
Mutual Fund				
Emerging Market Equity Security (3)	18,169	-	-	18,169
Domestic Common Stock (3)	33,357	-	-	33,357
International Equity Security (3)	-	-	-	-
Domestic Fixed Income (2)	145,579	-	-	145,579
Limited Partnerships (4)	-	-	80,380	80,380
Real Estate (4)	-	-	11,720	11,720
<b>Total assets</b>	<b>\$ 293,242</b>	<b>\$ 158,619</b>	<b>\$ 97,155</b>	<b>\$ 549,016</b>
<b>Liabilities:</b>				
Financial Derivatives – Option Contracts	\$ -	\$ (63)	\$ -	\$ (63)
<b>Total liabilities</b>	<b>\$ -</b>	<b>\$ (63)</b>	<b>\$ -</b>	<b>\$ (63)</b>
<b>Total pension plan investments</b>	<b>\$ 293,242</b>	<b>\$ 158,556</b>	<b>\$ 97,155</b>	<b>\$ 548,953</b>
Operating asset not subjected to fair value reporting (9)	11,989	-	-	11,989
Operating liabilities not subjected to fair value reporting (9)	(21,980)	-	-	(21,980)
<b>Total plan assets</b>	<b>\$ 283,251</b>	<b>\$ 158,556</b>	<b>\$ 97,155</b>	<b>\$ 538,962</b>

Level 3 investments were 18% of total plan investments.

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Pension plan investments as of June 30, 2014 were as follows:

<b>Pension Plan Investments as of June 30, 2014</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
<b>Pension Plan Investments</b>				
<b>Assets:</b>				
Money Market Instrument (1)	\$ -	\$ 27,336	\$ -	\$ 27,336
Common/Collective Trusts	-	-	-	-
Emerging market equity (3)	-	5,382	-	5,382
International Equity-Developed (3)	-	85,821	-	85,821
US Common Stock (3)	-	21,407	-	21,407
Commodity Inflation Hedging (8)	-	17,545	-	17,545
Common Stock (3)	40,216	-	-	40,216
Fixed Income (2)				
Asset backed	-	6,961	-	6,961
Corporate Bonds	-	2,276	-	2,276
Government Bond	65,391	-	-	65,391
Hedge Funds (4)				
Distressed Debt	-	3,002	-	3,002
Equity Long/short	-	5,271	-	5,271
Event driven	-	2,958	3,043	6,001
Inflation hedge	-	-	-	-
Multi-Global opportunities	-	4,079	-	4,079
Multi-strategy	-	7,342	2,578	9,920
Mutual Funds Investment				
Domestic common stock (3)	46,018	-	-	46,018
Emerging market equity (3)	7,198	-	-	7,198
International equity (3)	-	-	-	-
Domestic Fixed Income (2)	102,539	-	-	102,539
Limited Partnerships (4)	-	-	90,901	90,901
Real Estate (4)	-	-	13,171	13,171
<b>Total assets</b>	<b>\$ 261,362</b>	<b>\$ 189,380</b>	<b>\$ 109,693</b>	<b>\$ 560,435</b>
<b>Liabilities:</b>				
Financial Derivatives – Option Contracts	\$ -	\$ (7)	\$ -	\$ (7)
<b>Total liabilities</b>	<b>\$ -</b>	<b>\$ (7)</b>	<b>\$ -</b>	<b>\$ (7)</b>
<b>Total pension plan investments</b>	<b>\$ 261,362</b>	<b>\$ 189,373</b>	<b>\$ 109,693</b>	<b>\$ 560,428</b>
Assets not subject to fair value reporting (9)	\$ 4,557	\$ -	\$ -	\$ 4,557
Liabilities not subject to fair value (9)	\$ (12,380)	\$ -	\$ -	\$ (12,380)
<b>Total plan assets</b>	<b>\$ 253,539</b>	<b>\$ 189,373</b>	<b>\$ 109,693</b>	<b>\$ 552,605</b>

Level 3 investments were 20% of total plan investments.

The following table presents changes in amounts for financial instruments classified within Level 3 of the valuation hierarchy as previously defined, at June 30, 2016.

Changes in Level 3 for the period ended June 30, 2016	Private Equity and Venture Capital	Hedge Funds	Real Estate	Total
Balance July 1, 2015	\$ 80,380	\$ 5,055	\$ 11,720	\$ 97,155
Gain and loss (realized and unrealized)	4,546	(9)	(2,520)	2,018
Purchases	4,542	-	5,800	10,342
Transfer out and sales	(17,848)	(4,990)	(4,210)	(27,048)
<b>Balance at June 30, 2016</b>	<b>\$ 71,620</b>	<b>\$ 57</b>	<b>\$ 10,790</b>	<b>\$ 82,467</b>
<b>Change in unrealized investments held</b>	<b>\$ (5,553)</b>	<b>\$ (590)</b>	<b>\$ 1,072</b>	<b>\$ (5,070)</b>

The following table presents changes in amounts for financial instruments classified within Level 3 of the valuation hierarchy as previously defined, at June 30, 2015.

Changes in Level 3 for the period ended June 30, 2015	Private Equity and Venture Capital	Hedge Funds	Real Estate	Total
Balance July 1, 2014	\$ 90,901	\$ 5,621	\$ 13,171	\$ 109,693
Gain and loss (realized and unrealized)	5,411	(566)	1,797	6,642
Purchases	6,977	-	605	7,582
Transfer out and sales	(22,909)	-	(3,853)	(26,762)
<b>Balance at June 30, 2015</b>	<b>\$ 80,380</b>	<b>\$ 5,055</b>	<b>\$ 11,720</b>	<b>\$ 97,155</b>
<b>Change in unrealized investments held</b>	<b>\$ (5,473)</b>	<b>\$ (566)</b>	<b>\$ 784</b>	<b>\$ (5,255)</b>

The following table presents changes in amounts for financial instruments classified within Level 3 of the valuation hierarchy as previously defined, at June 30, 2014.

Changes in Level 3 for the period ended June 30, 2014	Private Equity and Venture Capital	Hedge Funds	Real Estate	Total
Balance July 1, 2013	\$ 93,450	\$ 5,218	\$ 8,743	\$ 107,411
Gain and loss (realized and unrealized)	17,422	403	1,736	19,561
Purchases	7,926	-	3,506	11,432
Transfer out and sales	(27,897)	-	(814)	(28,711)
<b>Balance at June 30, 2014</b>	<b>\$ 90,901</b>	<b>\$ 5,621</b>	<b>\$ 13,171</b>	<b>\$ 109,693</b>
<b>Change in unrealized investments held</b>	<b>\$ 4,073</b>	<b>\$ 402</b>	<b>\$ 1,854</b>	<b>\$ 6,329</b>

**Pension Plan Liquidity Terms and Unfunded Commitments** – The following tables represent Howard’s investments by asset class and their respective liquidity terms and unfunded commitments as of June 30, 2016, 2015, and 2014. Real estate funds and limited partnerships do not have readily ascertainable market values and may be subject to withdrawal restrictions.

Investments as of June 30, 2016	Fair Value	Unfunded Commitments	Redemption/ Withdrawal Frequency	Redemption/ Withdrawal Notice Period
Hedge funds	\$ 12,755	\$ -	Monthly-Annually	45-90 days
Real estate funds	10,790	621	-	2-5 years
Common/collective trusts	121,202	-	Monthly	-
Limited partnerships	72,072	16,487	-	≤ 10 years

Investments as of June 30, 2015	Fair Value	Unfunded Commitments	Redemption/ Withdrawal Frequency	Redemption/ Withdrawal Notice Period
Hedge funds	\$ 18,632	\$ -	Monthly-Annually	45-90 days
Real estate funds	11,720	1,609	-	2-10 years
Common/collective trusts	125,418	-	Monthly	-
Limited partnerships	80,380	15,263	-	≤ 10 years

Investments as of June 30, 2014	Fair Value	Unfunded Commitments	Redemption/ Withdrawal Frequency	Redemption/ Withdrawal Notice Period
Hedge funds	\$ 28,273	\$ -	Monthly-Annually	45-90 days
Real estate funds	13,171	1,654	-	2-10 years
Common/collective trusts	130,155	-	Monthly	-
Limited partnerships	90,901	22,029	-	≤ 10 years

The asset allocation of the Plan is analyzed annually to determine the need for rebalancing to maintain an allocation that is within the allowable ranges. The investment strategy is to invest in asset classes that are negatively correlated to minimize overall risk in the portfolio. Interim targets outside of the allowable ranges were set to allow for flexibility in reaching the long-term targets in the private equity and real estate categories.

The actual allocation of the Plan for June 30, and the allowable range is as follows:

Pension Plan Asset Allocation	2016	2015	2014	Allowable Range
Mid-Large Cap U.S. Equity	8.8%	9.7%	11.5%	10-20%
Small Cap U.S. Equity	3.0%	3.3%	3.9%	0-10%
International Equity - Developed	14.7%	16.0%	15.8%	10-20%
Private Equity/Venture Capital	15.4%	16.3%	15.7%	5-15%
Hedge Funds	2.4%	3.5%	5.2%	5-10%
Inflation Hedging	5.4%	5.9%	9.7%	10-15%
Emerging Markets Equity	4.9%	4.3%	2.3%	0-10%
U.S. Long Bonds	44.7%	39.3%	31.7%	25-35%
Cash and Cash Equivalents	0.7%	1.7%	4.2%	0-5%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	

The trend rate for growth in health care costs, excluding dental, used in the calculation for fiscal year 2016 is 7.31%. This growth rate was assumed to decrease gradually to 4.5% in 2030 and to remain at this level thereafter. The health care cost trend rate assumption has a significant effect on the obligations reported for the health care plans.

The following benefit payments, which reflect expected future service as appropriate, are expected to be paid over the next ten years as follows:

Expected Future Benefit Payments	Pension Benefits	Post-retirement Benefits		
		Excluding Subsidy	Subsidy Payments	Net of Subsidy
Year ending June 30:				
2017	\$ 43,333	\$ 4,645	\$ 140	\$ 4,785
2018	43,932	4,601	139	4,740
2019	44,498	4,515	137	4,652
2020	44,781	4,459	133	4,592
2021	44,666	4,376	128	4,504
Years 2022-2026	217,545	20,313	550	20,863
<b>Total</b>	<b>\$ 438,755</b>	<b>\$ 42,909</b>	<b>\$ 1,227</b>	<b>\$ 44,136</b>

The mortality retirement rates base table used MRP-2007 (Actuary adaptation of the Society of Actuaries' RP2014 table).

If eligible, participants are assumed to retire according to the following schedule:

Retirement Age	Assumed Rate of Retirement
55 - 60	5%
61 - 63	12%
64	16%
65	25%
66 - 69	16%
70+	100%

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**Note 20      Commitments and Contingencies**

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(a)      ***Federal Awards***

Howard receives substantial revenues from government grants, contracts, and Federal student financial assistance programs authorized by Title IV and Title VII of the Higher Education Act of 1965. Previous compliance audits have reported certain deficiencies in the administration of both the University's Title IV and Title VII programs and its federal grants and contracts. The ultimate determination of amounts received under these programs generally is based upon allowable costs reported to and audited by the government or its designees.

(b)      ***Litigation and Other Claims***

During the ordinary course of business, Howard is a party to various litigation and other claims in the ordinary course of business including claims of malpractice by the Hospital and faculty physicians. It is also subject to potential future claims based on findings or accusations arising from past practices under governmental programs and regulations and tort law. In fiscal years ended June 30, 2016, 2015, and 2014 Howard reserved \$1,135, \$1,574 and \$3,664, respectively for legal contingencies. In the opinion of management and Howard's general counsel, an appropriate monetary provision has been made to account for probable losses upon ultimate resolution of these matters.

(c)      ***Collective Bargaining Agreements***

Howard has several collective bargaining agreements currently in effect with unions representing approximately 1,800 employees. Certain of these agreements are in negotiations and have been extended beyond the stated expiration date.

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**Note 21      Related Party Transactions**

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(a)      ***Howard University Charter Middle School***

Howard University Board of Trustees founded Howard University Charter Middle School of Mathematics and Science, which operates from premises owned by Howard. The Middle School is a separate legal entity and not a component of Howard University. For fiscal years ended June 30, 2016, 2015, and 2014, Howard has contributed to the Middle School as follows:

Related Party Transactions	2016	2015	2014
Cash operating support	\$ 1,000	\$ 1,000	\$ 900
Facility leased (market value)	1,577	1,577	1,009
<b>Total</b>	<b>\$ 2,577</b>	<b>\$ 2,577</b>	<b>\$ 1,909</b>

(b) ***The Howard Dialysis Center***

Howard and American Renal Associates, LLC (ARA) have a joint venture agreement for the operation of the Howard University Dialysis Center LLC (LLC). The entity was formed on March 1, 2012. Howard and the LLC are parties to a non-compete agreement, and Howard jointly guarantees the LLC's debt agreements.

On March 1, 2012, the LLC commenced a lease with Howard for the current space, employees, and Medical Director associated with its Hospital outpatient dialysis services which will result in monthly rental income for Howard in addition to its proportionate share of earnings (losses) of the LLC.

As of fiscal years ending June 30, 2016, 2015, and 2014, the consolidated statements of financial position for the LLC are as follows:

Howard Dialysis Center, LLC Statements of Financial Position	2016	2015	2014
<b>Total Assets</b>	\$ 12,200	\$ 12,096	\$ 12,069
<b>Total Liabilities</b>	795	590	1,177
<b>Equity</b>			
Partner	6,911	7,837	8,986
Retained earning	4,493	3,669	1,906
<b>Total Equity</b>	\$ 11,404	\$ 11,506	\$ 10,892
<b>ARA interest</b>	\$ 5,816	\$ 5,868	\$ 5,555
<b>Howard interest</b>	\$ 5,588	\$ 5,638	\$ 5,337

(c) ***Provident Group – Howard Properties, LLC***

The University entered into a 40-year ground lease with Provident Group – Howard Properties, LLC and Provident Resources Group, Inc. ("Owner") in which the Owner will design, construct and furnish the College Hall North and South dormitory facilities ("dorms") for the benefit of the University. The Owner issued \$113,900 in revenue bonds through the District of Columbia to finance the construction of the dorms. The University and Owner entered into a management agreement such that the University will be responsible for managing, operating and maintaining the dorms in conjunction with general business. In general, revenues and expenses associated with the dorm are the responsibility of the Owner. The bonds will be repaid solely from revenues from the dorms. A management fee and ground lease payment will be paid to the University only upon the settlement of various expenses and if minimum cash requirements are made. Reimbursement of utilities expense will be subordinate to debt service. Ownership of the dorms will revert to Howard upon termination of the Ground Lease and full repayment of the debt. The University has not recorded any transactions related to potential future title to or ownership in the dorms for the year ended June 30, 2016.



(d) ***Barnes & Noble College Booksellers, LLC***

Howard engaged Barnes & Noble College Booksellers, LLC to manage and operate its bookstore. The relationship is for the period of April 1, 2014 through March 31, 2019 with an option to renew for an additional five two-year periods, subject to mutual agreement.

(e) ***Campus Apartments***

In August 2014, Howard entered into a subcontractor agreement with Campus Apartments to perform all management responsibilities relating to the newly constructed Student Dormitory Facilities that were completed and placed into service in August 2014.

(f) ***Paladin Healthcare***

Howard University signed a Management Service Agreement (MSA) with Paladin Healthcare. Effective October 6, 2014, Paladin Healthcare assumed responsibility for day-to-day operations of the Hospital under the oversight of a joint Howard and Paladin Healthcare Management Committee. Under the MSA, Howard will continue to be the licensed operator of the Hospital.

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<b>Note 22</b>	<b>Subsequent Events</b>
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Howard performed an evaluation of subsequent events through November 23, 2016, which is the date the financial statements were issued, noting no additional events which affect the consolidated financial statements as of June 30, 2016.