

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

SEE SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 362,680,538 including grants of \$ 0) (Revenue \$ 952,168,730)

Instruction NORTHEASTERN ENABLES 33,109 STUDENTS TO FULFILL THEIR EDUCATIONAL GOALS BY PROVIDING TEACHING AND ADVISING THAT RESULT IN THE GRANTING OF ASSOCIATE, BACHELOR, MASTER AND DOCTORAL DEGREES IN A VARIETY OF ACADEMIC DISCIPLINES THE UNIVERSITYS ACADEMIC AREA CONSISTS OF THE BOUVE COLLEGE OF HEALTH SCIENCE, COLLEGE OF ARTS, MEDIA AND DESIGN, D'AMORE-MCKIM SCHOOL OF BUSINESS, COLLEGE OF COMPUTER AND INFORMATION SCIENCE, COLLEGE OF ENGINEERING, COLLEGE OF PROFESSIONAL STUDIES, COLLEGE OF SCIENCE, COLLEGE OF SOCIAL SCIENCES AND HUMANITIES, AND SCHOOL OF LAW

4b

(Code) (Expenses \$ 245,454,049 including grants of \$ 245,454,049) (Revenue \$ 0)

Student financial aid Northeastern awards grants and scholarships to students from several sources federal and state governments, institutionally-funded and endowment/donor funded The Office of Student Financial Services administers financial aid and is committed to working with students to identify financial aid options that can help make a Northeastern education affordable

4c

(Code) (Expenses \$ 108,875,825 including grants of \$ 0) (Revenue \$ 125,581,210)

Auxiliary enterprises Northeastern provides student housing in 32 residential buildings and operates conference centers mainly used for University events

4d

Other program services (Describe in Schedule O)



















(Expenses \$ 344,475,395 including grants of \$ 15,732,794) (Revenue \$ 0)

4e

Total program service expenses

1,061,485,807

Part IV Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	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>	23	Yes	
24a	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>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. 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>	25a		No
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>	25b		No
26	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 so, complete Schedule L, Part II</i>	26	Yes	
27	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>	27		No
28	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	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>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	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>	32		No
33	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>	33	Yes	
34	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>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	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>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☐

		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	39,554			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	15,437			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	Yes			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a				No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	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		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	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	Yes
3	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	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
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	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
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	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	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	No
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	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶MA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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, physical address, and telephone number of the person who possesses the books and records of the organization ▶THOMAS NEDELL 360 HUNTINGTON AVE BOSTON,MA 02115 (617) 373-5374

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

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

[illegible]

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	11,021,861	0	1,533,517

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 908

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

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
EMBANET, 225 SPARKS AVENUE TORONTO, ON M5H 2S5 0CA	ONLINE LEARNING SVCS	19,848,750
COMPASS GROUP, PO BOX 91337 CHICAGO IL 60693 1337	FOOD SERVICES	18,203,486
CONSOLIDATED SERVICE GROUP, 176 WILLIAMS STREET CHELSEA MA 02150	CLEANING SERVICES	11,190,729
SHAWMUT DESIGN CONSTRUCTION, 560 Harrison Ave Suite 200 BOSTON MA 02118	CONSTRUCTION	8,302,852
TISHMAN CONSTRUCTION CORPORATION OF, 66 Long Wharf 2nd Floor BOSTON MA 02110	CONSTRUCTION	8,128,340

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 ▶255

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c	196,967		
	d	Related organizations	1d			
	e	Government grants (contributions)	1e	81,758,636		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	74,741,397		
	g	Noncash contributions included in lines 1a-1f \$		1,622,784		
	h	Total. Add lines 1a-1f		156,697,000		
Program Service Revenue	Business Code					
	2a	TUITION,RM BD,FEES	900099	1,067,504,668	1,067,504,668	
	b	PARKING	812930	7,754,263		3,707,389
	c	FOOD SERVICE	900099	2,491,009		
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f		1,077,749,940		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		12,649,760		852,074
	4	Income from investment of tax-exempt bond proceeds		3,956		
	5	Royalties		0		
	6a	(i) Real	(ii) Personal			
		11,442,290				
		2,727,300				
		8,714,990	0			
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)		8,714,990		8,714,990
	7a	(i) Securities	(ii) Other			
		134,061,556	-39,000			
		108,514,396				
		25,547,160	-39,000			
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)		25,508,160		25,508,160
	8a	Gross income from fundraising events (not including \$ 196,967 of contributions reported on line 1c) See Part IV, line 18				
	a		126,354			
	b	Less direct expenses	b	193,188		
	c	Net income or (loss) from fundraising events		-66,834		-66,834
	9a	Gross income from gaming activities See Part IV, line 19				
	a					
	b	Less direct expenses	b			
	c	Net income or (loss) from gaming activities		0		
	10a	Gross sales of inventory, less returns and allowances				
	a					
	b	Less cost of goods sold	b			
	c	Net income or (loss) from sales of inventory		0		
	Miscellaneous Revenue		Business Code			
	11a	CONFERENCE CENTERS/ARENA	532000	5,539,586		5,539,586
	b	ADVERTISING/SPORTS INCOME	900099	47,260		47,260
	c	FEE FOR SERVICE INCOME	900099	713,571		713,571
	d	All other revenue				
	e	Total. Add lines 11a-11d		6,300,417		
	12	Total revenue. See Instructions		1,287,557,389	1,067,504,668	10,859,880
						52,495,841

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 governments and organizations in the United States. See Part IV, line 21.	15,300,148	15,300,148		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	245,454,049	245,454,049		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	432,646	432,646		
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	8,197,719	2,842,898	4,758,686	596,135
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	2,330,452	743,681	1,151,600	435,171
7	Other salaries and wages.	409,152,038	375,175,748	24,327,240	9,649,050
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	22,678,670	20,467,551	1,633,975	577,144
9	Other employee benefits.	45,743,971	41,284,036	3,295,806	1,164,129
10	Payroll taxes.	24,180,438	21,822,899	1,742,176	615,363
11	Fees for services (non-employees):				
a	Management.	573,674	573,674		
b	Legal.	3,315,810	118,426	3,183,175	14,209
c	Accounting.	634,198		634,198	
d	Lobbying.	420,217	400,000	20,217	
e	Professional fundraising services. See Part IV, line 17.	478,432			478,432
f	Investment management fees.	1,303,833		1,303,833	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	13,672,889	13,657,463	11,025	4,401
12	Advertising and promotion.	10,271,028	6,750,176	3,490,385	30,467
13	Office expenses.	35,898,999	29,817,008	4,215,061	1,866,930
14	Information technology.	36,518,649	22,403,456	13,665,193	450,000
15	Royalties.	86,125	86,125		
16	Occupancy.	51,933,796	48,583,449	2,239,131	1,111,216
17	Travel.	23,337,702	21,716,679	839,969	781,054
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	5,449,883	5,319,200	23,557	107,126
20	Interest.	30,857,362	29,450,249	1,040,333	366,780
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	55,993,651	49,090,838	5,103,051	1,799,762
23	Insurance.	2,209,251	960,959	1,248,292	
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	CONSULTANTS	35,689,536	32,795,902	2,334,290	559,344
b	EQUIPMENT	16,234,020	15,981,786	166,961	85,273
c	MEAL PLAN AND FOOD COST	17,008,601	17,005,522	3,079	
d	PUB, BOOKS, & SUBSCRIPTIONS	12,821,113	10,989,806	1,127,705	703,602
e	All other expenses	38,288,928	32,261,433	5,969,752	57,743
25	Total functional expenses. Add lines 1 through 24e.	1,166,467,828	1,061,485,807	83,528,690	21,453,331
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		0	1	78,537,000
	2	Savings and temporary cash investments		267,313,678	2	237,228,000
	3	Pledges and grants receivable, net		78,645,000	3	99,468,000
	4	Accounts receivable, net		44,768,771	4	50,897,000
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		1,840,000	5	1,800,000
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		32,998,000	7	33,627,000
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		16,785,622	9	15,061,000
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a1,735,278,000			
	b	Less: accumulated depreciation	10b639,950,000	1,059,251,000	10c	1,095,328,000
	11	Investments—publicly traded securities		341,141,000	11	504,035,000
	12	Investments—other securities. See Part IV, line 11		370,101,000	12	382,678,000
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		13,620,000	15	153,602,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,226,464,071	16	2,652,261,000
Liabilities	17	Accounts payable and accrued expenses		141,089,832	17	149,169,000
	18	Grants payable		4,644,000	18	4,644,000
	19	Deferred revenue		65,366,000	19	67,584,000
	20	Tax-exempt bond liabilities		643,240,000	20	779,592,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		73,080,000	23	170,875,000
	24	Unsecured notes and loans payable to unrelated third parties		0	24	900,000
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		103,971,000	25	104,306,000
	26	Total liabilities. Add lines 17 through 25		1,031,390,832	26	1,277,070,000
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		825,275,239	27	944,548,000
	28	Temporarily restricted net assets		186,009,000	28	231,461,000
	29	Permanently restricted net assets		183,789,000	29	199,182,000
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,195,073,239	33	1,375,191,000
	34	Total liabilities and net assets/fund balances		2,226,464,071	34	2,652,261,000

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,287,557,389
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,166,467,828
3	Revenue less expenses Subtract line 2 from line 1	3	121,089,561
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,195,073,239
5	Net unrealized gains (losses) on investments	5	67,396,847
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-8,368,647
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,375,191,000

Part XII Financial Statements and Reporting

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

		Yes	No
1	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		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	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	Yes	
2c	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	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

Software ID:
Software Version:
EIN: 04-1679980
Name: NORTHEASTERN UNIVERSITY

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH E AOUN PRESIDENT/TRUSTEE	40 0 0 0	X		X				865,028	0	232,982
PETER B CAMERON Trustee	1 0 0 0	X						0	0	0
CHAD GIFFORD Trustee	1 0 0 0	X						0	0	0
WILLIAM J COTTER Trustee	1 0 0 0	X						0	0	0
EDMOND J ENGLISH Trustee	2 0 0 0	X						0	0	0
WILLIAM S HOWARD Trustee	2 0 0 0	X						0	0	0
KATHERINE S MCHUGH Trustee	2 0 0 0	X						0	0	0
HENRY J NASELLA CHAIR/Trustee	5 0 0 0	X						0	0	0
KATHRYN NICHOLSON Trustee	1 0 0 0	X						0	0	0
RONALD L ROSSETTI Trustee	1 0 0 0	X						0	0	0
CAROLE J SHAPAZIAN Trustee	2 0 0 0	X						0	0	0
SEYMOUR STERNBERG Trustee	1 0 0 0	X						0	0	0
MICHAEL J ZAMKOW Trustee	2 0 0 0	X						0	0	0
MARGOT BOTSFORD TRUSTEE	1 0 0 0	X						0	0	0
NONNIE S BURNES TRUSTEE	1 0 0 0	X						0	0	0
VENETIA G KONTOGOURIS TRUSTEE	1 0 0 0	X						0	0	0
BARBARA C ALLEYNE TRUSTEE	1 0 0 0	X						0	0	0
Richard A D'Amore Trustee	2 0 0 0	X						0	0	0
Edward G Galante Trustee	2 0 0 0	X						0	0	0
ALAN S MCKIM Trustee	1 0 0 0	X						0	0	0
RONALD L SARGENT Trustee	1 0 0 0	X						0	0	0
Joseph M Tucci Trustee	1 0 0 0	X						0	0	0
WILLIAM J CONLEY TRUSTEE	1 0 0 0	X						0	0	0
DAVID HOUSE TRUSTEE	1 0 0 0	X						0	0	0
JOHN PULICHINO TRUSTEE	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ARTHUR ZAFIROPOULO TRUSTEE	1 0 0 0	X						0	0	0
JEFFREY J CLARKE TRUSTEE	1 0 0 0	X						0	0	0
SPENCER T FUNG TRUSTEE	1 0 0 0	X						0	0	0
LUCIAN GRAINGE CBE TRUSTEE	1 0 0 0	X						0	0	0
FRANCES N JANIS TRUSTEE	1 0 0 0	X						0	0	0
DAVID J MONDRAGON TRUSTEE	1 0 0 0	X						0	0	0
PHILOMENA V MANTELLA SENIOR VP ENROLLMENT MGMT	40 0 0 0			X				438,352	0	66,589
SAMUEL B SOLOMON DIR OF FINANCE & TREASURER	40 0 0 0			X				202,491	0	46,941
DIANE N MACGILLIVRAY SR VP OF UNIV ADVANCEMENT	40 0 0 0			X				559,394	0	72,766
MICHAEL A ARMINI SENIOR VP - EXTERNAL AFFAIRS	40 0 0 0			X				320,589	0	68,344
STEPHEN W DIRECTOR PROVOST & SVP ACADEMIC AFFAIRS	40 0 0 0			X				633,059	0	79,835
RALPH C MARTIN II SR VP & GENERAL COUNSEL	40 0 0 0			X				545,927	0	56,693
THOMAS NEDELL VICE PRES & CFO	40 0 0 0			X				427,943	0	51,784
STEVE KADISH SR VP & COO	40 0 0 0			X				526,079	0	48,760
NANCY MAY VP - FACILITIES	40 0 0 0				X			227,578	0	36,518
JANE BROWN VP - ENROLLMENT MGMT	40 0 0 0				X			285,557	0	49,448
NADINE AUBRY DEAN - COLLEGE OF ENGINEERING	40 0 0 0				X			461,005	0	51,735
HUGH COURTNEY DEAN D'AMORE-MCKIM SCHL OF BUS	40 0 0 0				X			372,538	0	53,425
TERRY FULMER DEAN-BOUVE' COLL OF HEALTH SCI	40 0 0 0				X			356,020	0	28,451
MARC H MEYER PROFESSOR - ENTREPRENEURSHIP	40 0 0 0					X		626,961	0	28,255
ALEXANDROS MAKRIYANNIS PROFESSOR & BEHRAKIS CHAIR	40 0 0 0					X		511,146	0	27,260
Albert-Laszlo Barabasi Distinguished Professor	40 0 0 0					X		476,170	0	51,458
WILLIAM COEN HEAD COACH MEN'S BASKETBALL	40 0 0 0					X		448,082	0	44,860
MICHAEL B SILEVITCH Distinguished Professor	40 0 0 0					X		410,674	0	49,703
ROBERT P GITTENS VP PUBLIC AFFAIRS	40 0 0 0						X	210,967	0	44,156

SCHEDULE A

(Form 990 or 990EZ)

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.** ▶ **See separate instructions.**
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at**
www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number

04-1679980

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)
- 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 33¹/₃% 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 33¹/₃% 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 that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

11g(i)

☐

☐

(ii)

A family member of a person described in (i) above?

11g(ii)

☐

☐

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

11g(iii)

☐

☐

h

☐

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 or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2013

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	105,704,000	122,376,000	165,358,991	136,157,007	156,697,000	686,292,998
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	105,704,000	122,376,000	165,358,991	136,157,007	156,697,000	686,292,998
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						13,040,857
6 Public support. Subtract line 5 from line 4						673,252,141

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	105,704,000	122,376,000	165,358,991	136,157,007	156,697,000	686,292,998
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,668,574	18,126,650	17,700,666	17,396,199	24,096,006	87,988,095
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	178,224	103,565	57,065	72,629	126,354	537,837
11 Total support (Add lines 7 through 10)						774,818,930

12 Gross receipts from related activities, etc. (see instructions)	12	4,753,214,842
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here. ▶		

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	86.891 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	0 %

- 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶✓
- b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶
- 17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶
- b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶
- 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶

Part IIISupport 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2012 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2013. 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—2012. 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 **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test		
Return Reference	Explanation	

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

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

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

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

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

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

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

Name of the organization NORTHEASTERN UNIVERSITY	Employer identification number 04-1679980
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

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

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

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

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

Part II-A

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

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		480
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		445,600
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		20,217
j	Total. Add lines 1c through 1i.			466,297
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Return Reference	Explanation
Schedule C, Part II-B, Line 1	The University retains legal counsel and other firms and employs staff who perform occasional lobbying activities. The University also pays membership dues to membership organizations which may engage in lobbying activities. Lobbying activities are focused on the interests of Northeastern University (including scientific research & student aid), its students and the higher education industry. During Fiscal Year 2014, payments for these services totaled \$466,297.

[illegible]

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization NORTHEASTERN UNIVERSITY	Employer identification number 04-1679980
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Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

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

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

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to 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) Revenues included in 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

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

- 3

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

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

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

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	671,710,000	618,924,000	611,478,000	532,487,000	507,346,000
b Contributions	29,751,000	13,438,000	34,072,000	11,705,000	5,376,000
c Net investment earnings, gains, and losses	105,372,000	66,081,290	-280,000	93,060,000	30,370,000
d Grants or scholarships	21,756,000	21,862,000	22,502,000	23,780,000	7,808,000
e Other expenditures for facilities and programs	3,942,000	3,426,000	2,353,000	601,000	1,767,000
f Administrative expenses	1,415,000	1,445,290	1,491,000	1,393,000	1,030,000
g End of year balance	779,720,000	671,710,000	618,924,000	611,478,000	532,487,000

- 2

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

Board designated or quasi-endowment

60 840 %
- b

Permanent endowment

37 150 %
- c

Temporarily restricted endowment

2 010 %
- The percentages in 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

3a(i)

No

(ii) related organizations

3a(ii)

No
- b

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

3b
- 4

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to 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		26,103,000		26,103,000
b Buildings		1,357,515,000	398,747,000	958,768,000
c Leasehold improvements				
d Equipment		351,660,000	241,203,000	110,457,000
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,095,328,000

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

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

Part XII

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

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

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

Part XIII

Supplemental Information

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

Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	SPENDING POLICY INCOME FROM QUASI ENDOWMENT FUNDS ARE TO BE USED AS DESIGNATED BY THE BOARD OF TRUSTEES FOR OPERATIONS. TERM ENDOWMENTS ARE TO BE USED AS PER THE DONOR WISHES UPON TERMINATION OF THE CONTRACT. SPENDING POLICY INCOME FROM TRUE ENDOWMENT FUNDS ARE TO BE USED AS SET FORTH BY THE DONOR. CURRENTLY THESE FUNDS PRIMARILY SUPPORT SCHOLARSHIPS AND PROFESSORSHIPS.
SCHEDULE D, PART X, LINE 2	GAAP requires that Northeastern evaluate tax positions taken by the University and recognize a tax liability (or asset) if the University has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service ("IRS"). The University has analyzed the tax positions taken and has concluded that as of June 30, 2014, there are no significant uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

[illegible]

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990,
Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number

04-1679980

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

- 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" to either line 6a or line 6b, explain on Part II

- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	
4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	
5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No
6a	Yes	
6b		No
7	Yes	

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

Return Reference	Explanation
RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E, LINE 3 THE UNIVERSITY PUBLISHES ITS RACIALLY NONDISCRIMINATORY POLICY IN THE LEGAL NOTICE SECTION OF LOCAL NEWSPAPERS, IN UNIVERSITY PUBLICATIONS AND ADVERTISEMENTS, ONLINE, AND VIA EMAIL
GOVERNMENTAL AID OR ASSISTANCE	SCHEDULE E, LINE 6A THE UNIVERSITY RECEIVES FINANCIAL ASSISTANCE FOR ITS FINANCIAL AID PROGRAMS FROM VARIOUS PROGRAMS OF THE DEPARTMENT OF EDUCATION AND THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number
04-1679980

Part I

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in 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
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total					15,019,931
b Total from continuation sheets to Part I					154,088,924
c Totals (add lines 3a and 3b)					169,108,855

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	See Add'l Data								
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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 ▶

4

3

Enter total number of other organizations or entities ▶

1

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to 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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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)*

☐ 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 file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes ☒ No

Part V

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	NORTHEASTERN UNIVERSITY (NU) HAS A FULL TIME EMPLOYEE TO MONITOR SUBAWARDS AND NU FOLLOWS FEDERAL REGULATIONS AS PART OF THE SUBRECIPIENT MONITORING UNDER A-133 NU REVIEWS THE FED ERAL AUDIT CLEARINGHOUSE AND INSTITUTION'S A-133 REPORTS DESK REVIEWS ARE PERFORMED AND P RINCIPAL INVESTIGATORS APPROVE ALL INVOICES

Additional Data

Software ID:
Software Version:
EIN: 04-1679980
Name: NORTHEASTERN UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (I e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	CONFERENCE/Workshops	3,187
Central America and the Caribbean			Program Services	Program Development	16,377
Central America and the Caribbean			Program Services	Study Abroad	659,314

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Program Development	927
East Asia and the Pacific			Program Services	CONFERENCE/Workshops	69,636
East Asia and the Pacific			Program Services	Recruiting	219,750

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Research	33,431
East Asia and the Pacific			Program Services	Study Abroad	3,796,506
Europe (Including Iceland and Greenland)			Program Services	Co-op Job Development	1,580

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	Program Development	4,601
Europe (Including Iceland and Greenland)			Program Services	Recruiting	123
Europe (Including Iceland and Greenland)			Program Services	Research	47,189

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	Study Abroad	9,919,582
Europe (Including Iceland and Greenland)			Program Services	CONFERENCE/Workshops	142,592
Middle East and North Africa			Program Services	Research	10,616

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	CONFERENCE/Workshops	8,130
Middle East and North Africa			Program Services	Study Abroad	86,390
North America			Program Services	Recruiting	10,082

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program Services	Research	4,225
North America			Program Services	Study Abroad	85,941
North America			Program Services	Team Travel	243

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America			Program Services	CONFERENCE/Workshops	55,265
Russia and the Newly Independent States			Program Services	Research	2,228
Russia and the Newly Independent States			Program Services	Study Abroad	10,163

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Russia and the Newly Independent States			Program Services	CONFERENCE/Workshops	11,818
South America			Program Services	Program Development	1,705
South America			Program Services	Research	1,700

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America			Program Services	Study Abroad	339,306
South America			Program Services	CONFERENCE/Workshops	7,064
South Asia			Program Services	Study Abroad	242,947

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Program Services	CONFERENCE/Workshops	4,943
Sub-Saharan Africa			Program Services	Study Abroad	406,754
Europe (Including Iceland and Greenland)			Investments		87,312,056

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Investments		759,331
Central America and the Caribbean			Investments		64,833,153

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe (Including Iceland and Greenland)	SUB-AWARD	126,438	CHECK			
		North America	SUB-AWARD	167,997	CHECK			
		East Asia and the Pacific	SUB-AWARD	55,690	CHECK			
		Europe (Including Iceland and Greenland)	SUB-AWARD	29,643	CHECK			

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

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and the Pacific	SUB-AWARD	54,378	CHECK			

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to 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. ▶ See separate instructions.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization NORTHEASTERN UNIVERSITY	Employer identification number 04-1679980
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Part I Fundraising Activities. Complete if the organization answered "Yes" to 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
- 2a

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

☒ Yes ☐ No
- b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 Ruffalo Cody	Phonathon Management		No	598,140	478,432	119,708
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶				598,140	478,432	119,708

- 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.

CT, FL, MD, MA, NY, WA

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

Revenue			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			<u>Golf Tournament</u>	<u>Nursing Anniv</u>	<u>1</u>	(add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
1	Gross receipts	. . .	115,798	179,987	27,536	323,321	
2	Less Contributions	. .	67,037	117,269	12,661	196,967	
3	Gross income (line 1 minus line 2)	. . .	48,761	62,718	14,875	126,354	
Direct Expenses	4	Cash prizes	. . .				
	5	Noncash prizes	. .	11,370		11,370	
	6	Rent/facility costs	. .	28,807	7,826	36,633	
	7	Food and beverages	.	10,062	54,061	94,315	
	8	Entertainment	. . .		900	900	
	9	Other direct expenses	.	3,438	24,194	49,970	
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶					(193,188)
	11	Net income summary Subtract line 10 from line 3, column (d) ▶					-66,834

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

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<div><input type="checkbox"/> Yes.....%</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes.....%</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes.....%</div> <div><input type="checkbox"/> No</div>	
	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 operates gaming activities _____

a Is the organization licensed to operate 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 _____

Does the organization operate 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 operated in

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

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

Name ▶

Address ▶

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

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

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

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$ _____

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

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

Return Reference	Explanation
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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," to 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.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number
04-1679980

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

2

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

95

3

Enter total number of other organizations listed in the line 1 table

20

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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
(1) Student Financial Aid	13864		245,454,049	COST	TUITION OFFSET

Part IV

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

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	GRANT FUNDING IS AWARDED TO STUDENTS BY STUDENT FINANCIAL SERVICES WITHIN ESTABLISHED BUDGET LEVELS BASED ON UNIVERSITY POLICIES GRANT FUNDS ARE CREDITED TO INDIVIDUAL STUDENT ACCOUNTS ELECTRONICALLY STUDENT FINANCIAL SERVICES WORKS WITH ADVANCEMENT STAFF TO ENSURE THAT RESTRICTED FUNDS ARE AWARDED WITHIN ESTABLISHED CRITERIA, AND WITH FINANCE STAFF TO DETERMINE AVAILABILITY OF FUNDS STUDENT FINANCIAL SERVICES MAINTAINS INTERNAL POLICIES AND PROCEDURES FOR THE CORRECT AWARDED AND ADJUSTING OF INSTITUTIONAL FUNDS ANNUAL AUDITS ARE CONDUCTED TO ASSURE COMPLIANCE WITH ALL POLICIES AND PROCEDURES NORTHEASTERN UNIVERSITY (NU) HAS A FULL TIME EMPLOYEE TO MONITOR SUBAWARDS - NU FOLLOWS FEDERAL REGULATIONS AS PART OF THE SUBRECIPIENT MONITORING UNDER A-133 - NU REVIEWS THE FEDERAL AUDIT CLEARINGHOUSE AND INSTITUTION'S A-133 REPORTS - DESK REVIEWS ARE PERFORMED, AND PRINCIPAL INVESTIGATORS APPROVE ALL INVOICES

Additional Data

Software ID:
Software Version:
EIN: 04-1679980
Name: NORTHEASTERN UNIVERSITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Alaska Pacific University 4101 University Drive Anchorage, AK 99508	92-0023588	501(C)(3)	9,070				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Meridian Institute PO Box 1829 105 Village Place Dillon, CO 80435	84-1435420	501(C)(3)	206,620				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Alpha Foundation for the Improvement of Mine Safet 1650 Market St STE 1200 Philadelphia, PA 19121	45-5152759	501(C)(3)	19,063				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Arnold Magnetic Technologies Corp 770 Linden Avenue Rochester, NY 14625	20-2368759		63,756				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Auburn University 126 Ingram Hall Auburn,AL 36849	63-6000724	501(C)(3)	16,227				Sub-award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
BAE SYSTEMS 85 SPIT BROOK ROAD NASHUA,NH 03060	52-2268742		31,757				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
BARCC 99 Bishop Allen Drive Cambridge, MA 02139	04-2974983	501(C)(3)	27,584				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Beth Israel Deaconess Medical Center 330 Brookline Avenue Boston, MA 02115	04-1203881	501(C)(3)	316,003				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
BOISE STATE UNIVERSITY 1910 UNIVERSITY DRIVE BOISE, ID 83725	82-0290701	115	61,949				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Boston Medical Center 1 Medical Center Pl Boston, MA 02118	04-3314093	501(C)(3)	647,404				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Boston University 25 Buick Street Boston, MA 02215	04-2103547	501(C)(3)	170,115				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Brigham & Women's Hospital 75 Francis Street Boston, MA 02115	04-2312909	501(C)(3)	54,234				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Brown University 164 Angell Street Providence, RI 02912	05-0258809	501(C)(3)	37,239				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Charles Pankow Foundation 223 West Foothill Blvd 2nd Floor Claremont, CA 91711	71-0919052	501(C)(3)	16,630				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Children's Hospital Boston 300 Longwood Avenue Boston, MA 02115	04-2774441	501(C)(3)	5,027				Sub-award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
City of Boston-Boston Public Schools 26 Court St Boston,MA 02108	22-2514422	115	43,092				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Columbia University 615 West 131st Street New York, NY 10027	13-5598093	501(C)(3)	67,984				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
CORNELL UNIVERSITY 617 DAY HALL ITHACA,NY 14853	15-0532082	501(C)(3)	54,513				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
EARTH SCIENCE SYSTEMS LLC 11485 FRONTAGE RD N WHEAT RIDGE, CO 80033	84-1438876		80,973				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
EINHORN ENGINEERING PLLC 6202 36TH AVE NE SEATTLE, WA 98115	26-2737851		85,390				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
EMITECH Inc 150 Harvard Street Fall River, MA 02720	04-3613618		377,264				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Emory University 1599 Clifton road Atlanta, GA 30332	58-0566256	501(C)(3)	62,342				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Eos Photonics 30 Spinelli Place Cambridge, MA 02138	27-2255146		66,124				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Florida State University 200 East Gaines St Tallahassee, FL 32399	59-1961248	115	6,375				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
General Motors Corporation 300 Renaissance Center Detroit, MI 48265	27-0283222		37,771				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
GEORGETOWN UNIVERSITY 37TH O STREET NW WASHINGTON,DC 20057	53-0196603	501(c)(3)	393,600				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Harvard University 1350 Massachusetts Ave Cambridge, MA 02138	04-2103580	501(C)(3)	237,485				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
HXI Inc 12 Lancaster County Road Harvard,MA 01452	26-3240462		83,887				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Indiana University 509 E 3rd Street Bloomington,IN 47401	35-6001673	115	212,842				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
INTERDISCIPLINARY SCIENTIFIC RESEARCH PO BOX 15110 SEATTLE,WA 98115	75-3050164		91,818				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
International Association of Chiefs of Po 515 N Washington St Alexandria,VA 22314	53-0227813	501(C)(3)	27,365				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Johns Hopkins University 3910 Keswick Road Baltimore, MD 21211	52-0595110	501(C)(3)	92,857				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Ledge Light Tech 88 Howard Street New London, CT 06320	54-2071158		86,213				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Lockheed Martin Corporation 6801 Rockledge Drive Bethesda, MD 87532	52-1893632		482,703				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Los Alamos National Laboratory 1112 Plaza Del Norte Española, NM 70804	74-2853972	US GOVT	39,269				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Louisiana Tech University 1051 N First St Baton Rouge, LA 02543	72-6000720	115	43,432				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Marine Biological Laboratory 7 MBL Street Woods Hole, MA 02114	04-2104690	501(C)(3)	154,314				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Massachusetts General Hospital 55 Fruit Street Boston, MA 02139	04-2697983	501(C)(3)	787,810				Sub-award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVENUE CAMBRIDGE,MA 02481	04-2103594	501(C)(3)	253,645				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
MASSBAY COMMUNITY COLLEGE 50 OAKLAND STREET WELLESLEY, MA 02478	22-2581930	501(C)(3)	20,512				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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McLean Hospital 115 Mill Street Belmont, MA 10017	04-2697981	115	299,354				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Michael J Fox Foundation Grand Central Station PO Box 4777 New York, NY 48824	13-4141945	501(C)(3)	39,594				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Michigan State University 301 Admin Bldg East Lansing, MI 30314	38-6005984	115	721,311				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Morehouse College 830 Westview Drive Atlanta, GA 45432	58-0566205	501(c)(3)	8,174				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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MTC Technologies Inc 4032 Linden Ave Dayton, OH 60603	02-0593816		161,222				Sub-Award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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National Opinion Research Center 55 E Monroe St 20th Floor Chicago,IL 32256	36-2167808	501(c)(3)	19,813				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Nemours Children's Clinic 10140 Centurn Pkwy Jacksonville, FL 32207	59-0634433	501(C)(3)	8,858				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Nemucore Medical Innovations Inc 33 Kirkland Circle Wellesley, MA 88001	26-1903758	501(C)(3)	116,081				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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New Mexico State University 2850 North Weddell Las Cruces, NM 48338	85-6000401	115	15,461				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Nissan Technical Center NA PO Box 9200 Farmington, MI 48331	99-2108010		117,255				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Northern Essex Community College 100 Elliott Street Haverhill, MA 60115	04-6002284	115	108,904				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Northern Illinois University 201 Lowden Hall Dekalb,IL 97201	36-6008480	115	28,451				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Oregon Health and Science University 2525 SW First Ave Suite 220 Portland,OR 94025	93-1176109	115	114,842				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Pacific Biosciences of California 1505 Adams Drive Menlo Park, CA 16802	16-1590339		29,186				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Pennsylvania State University 408 Old Main St University Park,PA 10017	24-6000376	115	187,830				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Pfizer Inc 235 East 42nd St New York, NY 10017	13-5315170		11,643				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Public Health Advocacy Institute 102 the Fenway Boston, MA 47907	04-2668916	501(c)(3)	414,408				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Purdue University 1065 Freehafer West Lafayette, IN 48108	35-6002041	501(C)(3)	156,672				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Regents of University of Michigan 3089 Wolverine Tower Ann Arbor, MI 02139	38-6006309	115	135,257				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Relate to Autism dba ilumnu 485 Massachusetts Ave Suite 300 Cambridge, MA 12180	27-0596411	501(c)(3)	155,787				Sub-Award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Rensselaer Polytechnic Institute 110 8th Street Troy, NY 12204	14-1340095	501(c)(3)	165,746				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Research Foundation for Mental Hygiene 150 Broadway Menands, NY 14260	14-1410842	501(C)(3)	263,525				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Research Foundation of Buffalo 402 Crofts Hall Buffalo, NY 14260	14-1368361	501(C)(3)	918,181				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Schepens Eye Research Institute 20 Staniford Street Boston, MA 02114	04-2129889	501(C)(3)	23,152				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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SemiConductor Research Corp 1101 Slater Rd STE 120 Durham, NC 27703	58-1483645		77,428				Sub-Award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Siemens Corporation 170 Wood Avenue South Iselin,NJ 08830	13-2623356		20,797				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Silent Spring Institute 29 Crafts St Newton, MA 02458	04-3237106	501(c)(3)	36,246				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Simmons College 300 The Fenway Boston, MA 02115	04-2103629	501(C)(3)	33,180				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Simons Foundation 160 Fifth Ave 7th Floor New York, NY 10010	13-3794889	501(C)(3)	143,250				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Simpson Gumpertz & Heger Inc 41 Seyon St Building 1 Waltham, MA 83001	04-2256923		171,836				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Square One Systems Design Inc 3500 South Park Dr Jackson, WY 12742	13-4291472		52,583				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Center for Discovery The Center for Discovery PO Box 8 Harris, NY 19462	14-1395426	501(c)(3)	114,868				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Trilion Quality Systems 500 Davis Road Plymouth Meeting, PA 19462	23-2980410		64,892				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Tufts Medical Center 169 Holland St Somerville, MA 02144	04-2103634	501(c)(3)	11,337				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Tuskegee University Kresge Center Tuskegee, AL 36088	63-0288878	501(c)(3)	85,000				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 CALIFORNIA 1111 FRANKLIN STREET OAKLAND, CA 94607	94-6002123	115	162,323				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Chicago 6054 South Drexel Ave Suite 300 Chicago, IL 80202	36-2177139	501(c)(3)	16,590				Sub-Award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 COLORADO 633 17TH STREET DENVER,CO 80202	84-0644739	115	31,605				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Connecticut 438 Whitney Street Storrs, CT 06269	06-0772160	115	61,631				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Connecticut Health Ce 263 Farmington Ave Farmington, CT 06032	52-1725543	115	101,674				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Florida 219 Grinter Hall PO Box 115500 Gainesville,FL 32611	59-6002052	115	74,803				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Florida Research Foundation PO Box 115500 Tallahassee, FL 32611	59-2729133	115	230,597				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 2530 Dole Street Honolulu, HI 99164	99-6000354	115	73,485				Sub-award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Massachusetts 70 Butterfield Terr Amherst,MA 01003	04-3167352	115	341,742				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Massachusetts Lowell 600 Suffolk Street Lowell, MA 01854	04-3167352	115	117,249				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Minnesota 200 Oak Street Minneapolis, MN 55455	41-6007513	115	97,403				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Missouri 118 University Hall Columbia, MO 65211	43-6003859	115	11,797				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Nebraska 3835 Holdrege Street Lincoln, NE 68583	47-0049123	115	53,544				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 New Hampshire 51 College Road Durham, NH 03824	02-6000937	115	75,914				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 New Mexico 1700 Lomas NE Albuquerque, NM 87131	85-6000642	115	19,350				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of North Carolina 104 Airport Drive Chapel Hill, NC 27599	56-6001393	115	28,284				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Notre Dame 415 Main bldg Notre Dame, IN 46556	35-0868188	501(c)(3)	301,446				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Puerto Rico 1187 Flamboyant St San Juan, PR 00926	66-0177776	115	490,792				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Rhode Island 70 Lower College Road Kingston, RI 02881	22-3011455	115	112,255				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ROCHESTER 1325 MT HOPE AVENUE ROCHESTER, NY 14620	16-0743209	115	69,898				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 South Florida 4202 East Fowler Ave Tampa,FL 33620	59-3102112	115	98,732				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Southern California 2500 South Figueroa St LA, CA 90089	95-1642394	501(c)(3)	15,113				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Tennessee 1st Floor State Capitol Nashville, TN 37243	62-6001445	115	278,921				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Texas Austin 111 East 17th Street Austin, TX 78774	74-6000089	115	211,084				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Utah 2110 State Office Salt Lake City, UT 84114	87-6000545	115	116,546				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Vermont 222 waterman Bldg Burlington, VT 05404	03-0179440	115	10,714				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Washington PO Box 43113 Olympia, WA 98504	91-6001089	115	107,122				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Wisconsin 600 Highland Avenue Madison, WI 53792	39-1835630	115	108,575				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Virginia Institute of Marine Science 1375 Greate Rd PO Box 1346 Gloucester Point,VA 99164	54-2027915	115	7,379				Sub-Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Washington State University PO Box 64133 Pullman, WA 99164	91-6033434	115	10,005				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Wellesley College 106 Central St Wellesley, MA 02181	04-2103637	115	250,060				Sub-Award

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
West Virginia University One Waterfront Place Morgantown, WV 26506	55-0665758	115	24,644				Sub-award

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Western Michigan University 3081 Seibert Admin Bldg Kalamazoo, MI 49008	38-6007327	115	25,984				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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President & Fellows of Harvard College 1350 Massachusetts Avenue Cambridge, MA 02138	04-2103580	501(C)(3)	70,323				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Public Health Institute 102 Fenway Boston, MA 02115	04-2668916	501(C)(3)	199,294				SUB-AWARD

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Texas Technical University 111 East 17th Street Austin,TX 78711	74-6000089	115	106,815				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Trustees of Tufts College 169 Holland Street Somerville, MA 02144	04-2103634	501(C)(3)	509,776				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Tufts University 169 Holland Street Somerville, MA 02144	04-2103634	501(C)(3)	225,357				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
UMass Donahue Institute 70 Butterfield Terrace Amherst, MA 01003	04-3167352	115	62,942				SUB-AWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
New York University Office of Sponsored Programs 665 Broadway Suite 801 New York, NY 100122331	13-5562308	501(c)(3)	69,970				SUB-AWARD

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" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number

04-1679980

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

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 in 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 reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

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

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1	THE UNIVERSITY WILL APPROVE BUSINESS CLASS AIR TRAVEL (OR FIRST CLASS IF BUSINESS CLASS IS NOT AVAILABLE) FOR THE PRESIDENT AS APPROPRIATE. TRAVEL FOR BUSINESS PURPOSES IS NOT INCLUDED IN TAXABLE WAGES. THE PRESIDENT HAS AUTHORITY TO APPROVE FIRST CLASS / BUSINESS CLASS TRAVEL IF NECESSARY IN CERTAIN CIRCUMSTANCES FOR INDIVIDUALS LISTED IN SCHEDULE J, PART II. THE PRESIDENT, THE PROVOST & SENIOR VICE PRESIDENT OF ACADEMIC AFFAIRS, AND THE SENIOR VICE PRESIDENT OF UNIVERSITY ADVANCEMENT ARE THE ONLY LISTED INDIVIDUALS WHO USED FIRST CLASS / BUSINESS CLASS TRAVEL DURING THE YEAR ENDED JUNE 30, 2014. THE PRESIDENT'S SPOUSE TRAVELS ON OCCASION WITH THE PRESIDENT WHEN NECESSARY FOR BUSINESS PURPOSES AND UPON APPROVAL OF THE CHAIRMAN OF THE BOARD. TRAVEL FOR BUSINESS PURPOSES IS NOT INCLUDED IN TAXABLE WAGES. HOUSING IS PROVIDED FOR THE PRESIDENT AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE EMPLOYER AND IS NOT INCLUDED IN TAXABLE WAGES. A HOUSING ALLOWANCE IS PROVIDED TO THE PROVOST AND THE DEAN OF THE D'AMORE-MCKIM SCHOOL OF BUSINESS AND IS INCLUDED IN TAXABLE WAGES. SOCIAL CLUB DUES ARE PROVIDED FOR THE PRESIDENT. USE OF THE SOCIAL CLUB IS FOR BUSINESS PURPOSES ONLY AND DUES ARE NOT INCLUDED IN TAXABLE WAGES.
SCHEDULE J, PART I, LINE 4B	CERTAIN INDIVIDUALS PARTICIPATED IN LONG TERM INCENTIVE PLANS UNDER WHICH A DEFERRED PAYMENT IS AWARDED CONTINGENT ON CONTINUED EMPLOYMENT AND/OR ACHIEVEMENT OF CERTAIN CRITICAL UNIVERSITY GOALS. INDIVIDUALS WHO RECEIVED PAYMENTS UNDER LONG TERM INCENTIVE PLANS ARE LISTED BELOW. A PORTION OF EACH PAYMENT REFLECTED BELOW WAS REPORTED ON PRIOR YEARS' FORMS 990, SCHEDULE J, PART II COLUMN C AS DEFERRED COMPENSATION. DIANE N MACGILLIVRAY \$125,000.
Schedule J, Part I, Line 7	Payments which are part of a Variable pay plan are included in the SECTION ON BONUS AND INCENTIVE COMPENSATION. THIS PLAN IS BASED ON ACHIEVEMENT OF PRE-ESTABLISHED GOALS. IT IS APPROVED BY THE BOARD OF TRUSTEES FOR THE PRESIDENT AND OTHER OFFICERS. OTHER EMPLOYEES HAVE RECEIVED BONUSES WHICH ARE AWARDED TO A LIMITED NUMBER OF EMPLOYEES FOR EXCEPTIONAL CONTRIBUTIONS.
Schedule J, Part I, Line 8	THE PROVOST HAD A LONG TERM CONTRACT, WHICH COVERED HIM DURING 2013.
Schedule J, Part II	ALLEN SOYSTER, DISTINGUISHED PROFESSOR, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS INTERIM DEAN. STEVEN ZOLOTH, DEAN OF ACADEMIC AFFAIRS FOR EXTERNAL PROGRAMS AND VICE PROVOST FOR HEALTH RESEARCH, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS DEAN - BOUVE' COLLEGE. DAVID LUZZI, PROFESSOR AND EXECUTIVE DIRECTOR, STRATEGIC SECURITY INITIATIVE MECHANICAL AND INDUSTRIAL ENGINEERING, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS DEAN - ENGINEERING. HARRY LANE, DISTINGUISHED PROFESSOR, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS ACTING DEAN. AS OF 7/1/2009, THE BY-LAWS OF NORTHEASTERN UNIVERSITY WERE AMENDED SUCH THAT THE VICE PRESIDENTS ARE NO LONGER CONSIDERED OFFICERS OF THE UNIVERSITY. THEREFORE, THEY ARE DISCLOSED, AS APPLICABLE, AS FORMER OFFICERS.

Additional Data

Software ID:

Software Version:

EIN: 04-1679980

Name: NORTHEASTERN UNIVERSITY

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOSEPH E AOUN PRESIDENT/TRUSTEE	(i) (ii)	725,764 0	85,000 0	54,264 0	99,050 0	133,932 0	1,098,010 0	0 0
PHILOMENA V MANTELLA SENIOR VP ENROLLMENT MGMT	(i) (ii)	384,980 0	37,900 0	15,472 0	61,750 0	4,839 0	504,941 0	0 0
SAMUEL B SOLOMON DIR OF FINANCE & TREASURER	(i) (ii)	192,810 0	8,600 0	1,081 0	20,300 0	26,641 0	249,432 0	0 0
DIANE N MACGILLIVRAY SR VP OF UNIV ADVANCEMENT	(i) (ii)	381,809 0	38,250 0	139,335 0	46,333 0	26,433 0	632,160 0	104,167 0
MICHAEL A ARMINI SENIOR VP - EXTERNAL AFFAIRS	(i) (ii)	286,759 0	29,000 0	4,830 0	42,167 0	26,177 0	388,933 0	0 0
STEPHEN W DIRECTOR PROVOST & SVP ACADEMIC AFFAIRS	(i) (ii)	495,059 0	60,000 0	78,000 0	46,333 0	33,502 0	712,894 0	0 0
RALPH C MARTIN II SR VP & GENERAL COUNSEL	(i) (ii)	473,395 0	46,800 0	25,732 0	46,334 0	10,359 0	602,620 0	0 0
THOMAS NEDELL VICE PRES & CFO	(i) (ii)	382,323 0	30,960 0	14,660 0	25,500 0	26,284 0	479,727 0	0 0
STEVE KADISH SR VP & COO	(i) (ii)	439,397 0	35,200 0	51,482 0	25,500 0	23,260 0	574,839 0	0 0
ROBERT P GITTENS VP PUBLIC AFFAIRS	(i) (ii)	207,981 0	0 0	2,986 0	21,552 0	22,604 0	255,123 0	0 0
VINCENT J LEMBO VP AND SENIOR COUNSEL	(i) (ii)	257,671 0	0 0	4,352 0	25,500 0	16,751 0	304,274 0	0 0
JACK MOYNIHAN VP ALUMNI RELATIONS	(i) (ii)	233,982 0	0 0	1,176 0	24,152 0	22,737 0	282,047 0	0 0
KATHERINE N PENDERGAST VP HUMAN RESOURCES MANAGEMENT	(i) (ii)	228,352 0	4,000 0	3,612 0	23,159 0	3,475 0	262,598 0	0 0
JOHN H MCCARTHY SR ADVISOR TO THE PRESIDENT	(i) (ii)	302,895 0	25,000 0	9,141 0	25,500 0	8,280 0	370,816 0	0 0
NANCY MAY VP - FACILITIES	(i) (ii)	221,742 0	4,000 0	1,836 0	22,838 0	13,680 0	264,096 0	0 0
ALLEN SOYSTER DISTINGUISHED PROFESSOR	(i) (ii)	155,280 0	0 0	3,955 0	16,392 0	25,209 0	200,836 0	0 0
JANE BROWN VP - ENROLLMENT MGMT	(i) (ii)	275,061 0	4,000 0	6,496 0	25,500 0	23,948 0	335,005 0	0 0
NADINE AUBRY DEAN - COLLEGE OF ENGINEERING	(i) (ii)	374,107 0	0 0	86,898 0	25,500 0	26,235 0	512,740 0	0 0
HUGH COURTNEY DEAN D'AMORE- MCKIM SCHL OF BUS	(i) (ii)	332,456 0	0 0	40,082 0	25,500 0	27,925 0	425,963 0	0 0
TERRY FULMER DEAN-BOUVE' COLL OF HEALTH SCI	(i) (ii)	344,688 0	0 0	11,332 0	25,500 0	2,951 0	384,471 0	0 0

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DAVID LUZZI EXEC DIR STRATEGIC SECURITY	(i) (ii)	323,647 0	0 0	10,031 0	25,500 0	26,005 0	385,183 0	0 0
HARRY LANE DISTINGUISHED PROFESSOR	(i) (ii)	186,732 0	0 0	53,035 0	19,627 0	27,492 0	286,886 0	0 0
STEPHEN ZOLOTH DEAN EXT PROGRAMS&VICE PROVOST	(i) (ii)	303,291 0	0 0	10,149 0	25,500 0	28,275 0	367,215 0	0 0
MARC H MEYER PROFESSOR - ENTREPRENEURSHIP	(i) (ii)	260,658 0	0 0	366,303 0	25,500 0	2,755 0	655,216 0	0 0
ALEXANDROS MAKRIYANNIS PROFESSOR & BEHRAKIS CHAIR	(i) (ii)	344,859 0	0 0	166,287 0	25,500 0	1,760 0	538,406 0	0 0
Albert-Laszlo Barabasi Distinguished Professor	(i) (ii)	306,254 0	0 0	169,916 0	25,500 0	25,958 0	527,628 0	0 0
WILLIAM COEN HEAD COACH MEN'S BASKETBALL	(i) (ii)	415,183 0	0 0	32,899 0	25,500 0	19,360 0	492,942 0	0 0
MICHAEL B SILEVITCH Distinguished Professor	(i) (ii)	272,175 0	0 0	138,499 0	25,500 0	24,203 0	460,377 0	0 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number
04-1679980

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MHEFA SERIES R	04-2456011	57586C2Z7	05-22-2008	92,267,998	REFUND SERIES N BONDS		X		X		X
B MHEFA SERIES T	04-2456011	57586CZ57	05-22-2008	210,795,125	REFUND SERIES P BONDS		X		X		X
C MHEFA SERIES Y	04-2456011	57586EFE6	02-05-2009	64,431,595	NEW PROJECT/REFUND SERIES F,H,K,		X		X		X
D MHEFA SERIES 2010A	04-2456011	57584ETH4	03-18-2010	266,921,019	REFUND SERIES I,Q,U,W		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	11,713,818		1,453,803		17,114,555		34,322,654	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	92,267,998		225,893,991		66,093,741		266,921,019	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	0		8,470,410		1,517,334		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	396,998		1,078,308		536,194		1,281,074	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	3,771,000		0		0		34,652,829	
10	Capital expenditures from proceeds	0		0		38,000,000		0	
11	Other spent proceeds	88,100,000		209,716,817		25,895,401		230,987,116	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2010							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X		X		X	
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?			X		X			
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?			X		X			
c	Are there any research agreements that may result in private business use of bond-financed property?				X		X		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		4 270 %		2 810 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5			4 270 %		2 810 %			
7	Does the bond issue meet the private security or payment test?				X		X		
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?				X		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?				X		X		
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?			X		X			

Part IV

Arbitrage

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

Part IV

Arbitrage (Continued)

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

Part V

Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	X		X		X		X	

Part VI

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

Return Reference	Explanation
SCHEDULE K, PART VI	PART I, LINE B, COLUMN (E) IN APRIL 2012, SERIES T-2 BONDS FOR \$70,000,000 WERE CONVERTED TO FULLY REGISTERED FIXED RATE BONDS IN THE AGGREGATE PRINCIPAL AMOUNT OF \$66,315,000 WITH A FINAL MATURITY DATE IN OCTOBER 2037 THE BALANCE OF THE INITIAL AGGREGATE PRINCIPAL AMOUNT OF THE SERIES T-2 BONDS IN THE AMOUNT OF \$3,685,000 WAS CANCELLED IN APRIL 2012 BOND ISSUANCE COSTS OF \$395,335 ARE RECORDED IN PREPAID EXPENSES AND OTHER ASSETS AND WILL BE AMORTIZED OVER THE LIFE OF THE RESPECTIVE BONDS THE SERIES T-2 BONDS WERE REMARKETED WITH A PREMIUM TOTALING \$4,080,335 WHICH IS RECORDED IN LONG-TERM DEBT THE PREMIUM WILL BE AMORTIZED USING THE EFFECTIVE INTEREST METHOD OVER THE LIFE OF THE RESPECTIVE BONDS IN FEBRUARY 2012, SERIES T-1 BONDS FOR \$70,000,000 WERE CONVERTED TO FULLY REGISTERED FIXED RATE BONDS IN THE AGGREGATE PRINCIPAL AMOUNT OF \$63,260,000 WITH A FINAL MATURITY DATE IN OCTOBER 2037 THE BALANCE OF THE INITIAL AGGREGATE PRINCIPAL AMOUNT OF THE SERIES T-1 BONDS IN THE AMOUNT OF \$6,740,000 WAS CANCELLED IN FEBRUARY 2012 BOND ISSUANCE COSTS OF \$399,790 ARE RECORDED IN PREPAID EXPENSES AND OTHER ASSETS AND WILL BE AMORTIZED OVER THE LIFE OF THE RESPECTIVE BONDS THE SERIES T-1 BONDS WERE REMARKETED WITH A PREMIUM TOTALING \$7,139,790 WHICH IS RECORDED IN LONG-TERM DEBT THE PREMIUM WILL BE AMORTIZED USING THE EFFECTIVE INTEREST METHOD OVER THE LIFE OF THE RESPECTIVE BONDS PART I, LINE A, COLUMN (F) MHEFA SERIES R REFUNDED SERIES N BONDS WHICH WERE ISSUED JANUARY 23, 2003 PART I, LINE B, COLUMN (F) MHEFA SERIES T REFUNDED SERIES P BONDS WHICH WERE ISSUED JULY 18, 2007 PART I, LINE C, COLUMN (F) MHEFA SERIES Y (I) FINANCED THE CONSTRUCTION OF A DORMITORY, RENOVATIONS TO VARIOUS ACADEMIC AND ATHLETIC FACILITIES, AND MISCELLANEOUS FURNITURE AND EQUIPMENT ACQUISITIONS, AND (II) REFUNDED SERIES F, H, AND K BONDS WHICH WERE ISSUED JULY 6, 1999, JULY 9, 1998, AND JULY 11, 2000, RESPECTIVELY

Return Reference	Explanation
PART I, LINE D, COLUMN (F)	MHEFA SERIES 2010(A) REFUNDED SERIES I, Q, U, AND W * SERIES I BONDS WERE ISSUED MAY 26, 1999 TO FINANCE VARIOUS CAPITAL PROJECTS * SERIES Q BONDS WERE ISSUED MAY 28, 2008 FOR THE PURPOSE OF REFUNDING THE SERIES L BONDS WHICH WERE ISSUED JANUARY 25, 2001 TO FINANCE VARIOUS CAPITAL PROJECTS * SERIES U BONDS WERE ISSUED JULY 31, 2008 FOR THE PURPOSE OF REFUNDING THE SERIES M BONDS WHICH WERE ISSUED JULY 3, 2002 SERIES M BONDS WERE ISSUED FOR THE PURPOSE OF REFUNDING THE SERIES E BONDS WHICH WERE ISSUED APRIL 1992 * SERIES W BONDS WERE ISSUED DECEMBER 17, 2008 FOR THE PURPOSE OF REFUNDING THE SERIES G BONDS WHICH WERE ISSUED APRIL 1998 TO FINANCE VARIOUS CAPITAL PROJECTS PART I, LINE A, COLUMN (F) MDFA SERIES 2012 REFUNDED SERIES S BONDS WHICH WERE ISSUED MAY 22, 2008 PART I, LINE B, COLUMN (F) MDFA SERIES 2014A WERE ISSUED JANUARY 23, 2014 TO FINANCE VARIOUS CAPITAL PROJECTS PART II, LINE 3 - TOTAL PROCEEDS OF ISSUE MHEFA SERIES T - PROCEEDS REPORTED ON LINE 3 INCLUDES \$8,470,410 OF CAPITALIZED INTEREST AND \$6,628,457 OF INVESTMENT EARNINGS ACTUAL PROCEEDS OF ISSUE IS \$210,000,000 MHEFA SERIES Y - PROCEEDS REPORTED ON LINE 3 INCLUDES \$1,517,334 OF CAPITALIZED INTEREST AND \$144,812 OF INVESTMENT EARNINGS ACTUAL PROCEEDS OF ISSUE IS \$64,431,595 MDFA SERIES 2014A - PROCEEDS REPORTED ON LINE 3 INCLUDES \$3,143,767 OF CAPITALIZED INTEREST AND \$120,300 OF INVESTMENT EARNINGS ACTUAL PROCEEDS OF ISSUE IS \$150,000,000 PART II, LINE 9 - WORKING CAPITAL WORKING CAPITAL CONSISTS OF BOND PROCEEDS USED TO FINANCE TERMINATION PAYMENTS DUE TO SWAP COUNTERPARTIES PART IV, LINE 2C, COLUMN (A) - DATE REBATE CALCULATION WAS PERFORMED MHEFA SERIES R - AUGUST 11, 2014 PART IV, LINE 2C, COLUMN (B) - DATE REBATE CALCULATION WAS PERFORMED MHEFA SERIES T - AUGUST 11, 2014 PART IV, LINE 2C, COLUMN (C) - DATE REBATE CALCULATION WAS PERFORMED MHEFA SERIES Y - AUGUST 11, 2014 PART IV, LINE 2C, COLUMN (D) - DATE REBATE CALCULATION WAS PERFORMED MHEFA SERIES 2010A - AUGUST 11, 2014 PART IV, LINE 2C, COLUMN (A) - DATE REBATE CALCULATION WAS PERFORMED MDFA SERIES 2012 - AUGUST 11, 2014 PART IV, LINE 2C, COLUMN (B) - DATE REBATE CALCULATION WAS PERFORMED MDFA SERIES 2014A - AUGUST 11, 2014

Return Reference	Explanation
PART IV, LINE 3 - HEDGE	PART IV, LINE 3 - HEDGE THE UNIVERSITY HAS ENTERED INTO AN INTEREST RATE SWAP AGREEMENT WITH AIG FOR BOND ISSUE MHEFA SERIES T TO MANAGE THE INTEREST COST AND VARIABLE RATE RISK ASSOCIATED WITH ITS OUTSTANDING DEBT THE INTEREST RATE SWAP AGREEMENT WAS NOT IDENTIFIED ON THE BOOKS AND RECORDS OF THE ISSUER OR THE INSTITUTION AND WERE NOT IDENTIFIED TO BE TREATED AS A "QUALIFYING HEDGE" WITH RESPECT TO THE SERIES T BONDS THE INTEREST RATE SWAP AGREEMENT WAS NOT ENTERED INTO FOR TRADING OR SPECULATIVE PURPOSES UNDER THE TERMS OF THE AGREEMENT, THE UNIVERSITY PAYS A FIXED RATE, DETERMINED AT INCEPTION, TO A THIRD PARTY WHO IN TURN PAYS THE UNIVERSITY A VARIABLE RATE ON THESE RESPECTIVE NOTIONAL PRINCIPAL AMOUNTS THERE IS NO COLLATERAL POSTING REQUIREMENT FOR THE UNIVERSITY RELATED to the swap with aig

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number
04-1679980

Part I

Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	MDFA SERIES 2012	04-2456011	57583USRO	09-13-2012	58,405,024	REFUND SERIES S		X		X		X
B	MDFA Series 2014A	04-3431814	57583UA81	01-23-2014	152,658,416	New Project		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	338,730		16,805					
2	Amount of bonds legally defeased	0		0					
3	Total proceeds of issue	58,405,024		155,922,483					
4	Gross proceeds in reserve funds	0		0					
5	Capitalized interest from proceeds	0		3,143,767					
6	Proceeds in refunding escrows	0		0					
7	Issuance costs from proceeds	430,024		1,060,898					
8	Credit enhancement from proceeds	0		0					
9	Working capital expenditures from proceeds	0		0					
10	Capital expenditures from proceeds	0		13,908,846					
11	Other spent proceeds	57,975,000		0					
12	Other unspent proceeds	0		137,688,672					
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
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		X		X				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X		X				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV

Arbitrage

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

Part IV

Arbitrage (Continued)

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

Part V

Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	X		X					

Part VI

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

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, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**
▶ **Information about Schedule L (Form 990 or 990-EZ) and its instructions is at**
www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization NORTHEASTERN UNIVERSITY	Employer identification number 04-1679980
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) 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 organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e)Original principal amount	(f)Balance due	(g) In default?		(h) Approved by board or committee?		(i)Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) Stephen W Director		Home Loan		X	2,000,000	1,800,000		No	Yes		Yes	
Total ▶ \$ 1,800,000												

Part III Grants or Assistance Benefitting 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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Peter Lembo	BROTHER OF NU FMR OFFICER	118,298	NU Employee		No
(2) Sally Solomon	SISTER OF NU OFFICER	74,833	NU Employee		No
(3) CLEAN HARBORS	TRUSTEES GALANTE & MCKIM	170,354	CLEANING SERVICES		No
(4) Blue Cross Blue Shield	OFFICER RALPH MARTIN	58,421,145	Health Insurance		No
(5) Staples	TRUSTEE RONALD SARGENT	930,745	Provision of Goods		No
(6) Geoffrey Trussell	TRUSTEE CHAD GIFFORD	263,313	NU EMPLOYEE		No

Part V Supplemental Information

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

Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number
04-1679980

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	1	0	
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	53	1,401,975	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (EQUIPMENT)	X	6	220,809	MARKET VALUE
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

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

1

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information.

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

Return Reference	Explanation
SCHEDULE M, PART I, COLUMN (B)	NORTHEASTERN UNIVERSITY REPORTED THE NUMBER OF CONTRIBUTIONS
SCHEDULE M, PART I, LINE 33	NORTHEASTERN UNIVERSITY'S ACCOUNTING POLICY STATES THAT NO REVENUE IS TO BE RECOGNIZED FOR GIFTS IN KIND UNLESS THERE IS AN IDENTIFIABLE USEFUL LIFE OR DETERMINABLE MARKET VALUE ALL GIFTS IN KIND ARE REVIEWED TO DETERMINE IF THEY MEET EITHER CRITERIA

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

**Complete to provide information for responses to specific questions on
Form 990 or 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.**

2013**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number

04-1679980

Return Reference	Explanation
Mission Statement	<p>Form 990, Parts I and III, line 1 To educate students for a life of fulfillment and accomplishment To create and translate knowledge to meet global and societal needs This mission inspires members of the University community in whatever they do-as students and scholars, as teachers and researchers, as mentors, as administrators, and as leaders Northeastern's commitment to this mission is focused in three areas of distinction where the university can have the greatest effect on the lives of students and the wider world experiential learning, use-inspired research, and global impact By concentrating its energy in these areas, Northeastern is best positioned to set priorities, make decisions, and focus resources that allow the institution to achieve its goals as a leader in higher education Form 990, Part III, Line 4d Other program services consist of Research, academic support, student services, and other student aid Form 990, Part VI, Line 1a PURSUANT TO THE BYLAWS, THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES IS AUTHORIZED TO ACT WITH THE FULL AUTHORITY OF THE BOARD OF TRUSTEES IN THE MONTHS IN WHICH THE FULL BOARD DOES NOT MEET All members of the Board of Trustees who are not appointed to serve on the Executive Committee shall be authorized to serve as alternates to the Executive Committee with full voting authority The Secretary shall be authorized to select an alternate whenever a member notifies the Secretary of his or her inability to attend any regular or special meeting of the Executive Committee A majority of the members of the Executive Committee, including any alternate(s), shall constitute a quorum for any meeting of the Executive Committee Form 990, Part VI, Line 2 Edw ard G Galante Alan S McKim Business Relationship Form 990, Part VI, Line 4 The University's bylaws were amended to - Change terms limiting the minimum and maximum size of the Board of Trustees - Remove maximum age limits for members of the Board of Trustees</p>

Return Reference	Explanation
Form 990, Part VI, Line 7a & 7b	Members of the Corporation have the responsibility of electing members of the Corporation and the Board of Trustees THE CHAIRMAN OF THE BOARD OF TRUSTEES HAS THE AUTHORITY TO APPOINT ONE EMERITUS/MEMBER ON AN ANNUAL BASIS TO SERVE AS A VOTING TRUSTEE

Return Reference	Explanation
Form 990, Part VI, Line 11B	The University's Form 990 review process is a collaborative effort. The core Form 990 and related schedules were reviewed by four committees of the Board of Trustees, senior management, an independent compensation consultant and a paid tax preparer. All feedback from the above parties was incorporated in the form. The Form 990 as filed is provided to the full board prior to filing with the IRS.

Return Reference	Explanation
Form 990, Part VI, Line 12c	<p>THE CONFLICT OF INTEREST POLICY FOR TRUSTEES, OFFICERS, AND OTHER INSTITUTIONAL DECISION-MAKERS APPLIES TO ALL VOTING MEMBERS OF THE BOARD OF TRUSTEES, CERTAIN MEMBERS OF THE CORPORATION, ALL OFFICERS, AND ALL OTHER INSTITUTIONAL DECISION-MAKERS OF NORTHEASTERN UNIVERSITY. THE POLICY REQUIRES THAT ALL TRUSTEES, OFFICERS AND OTHER GOVERNING BOARD MEMBERS WHO SERVE ON STANDING COMMITTEES ARE REQUIRED TO ADHERE TO A POLICY WHICH REQUIRES DISCLOSURE IN ADVANCE OF ANY CONFLICT, NON-PARTICIPATION IN DECISIONS REGARDING THE POTENTIAL CONFLICT, AND AN ANNUAL REPORTING OF ANY CONFLICTS FOR PERSONAL OR THIRD PARTY INVOLVEMENT. THE SECRETARY TO THE BOARD REVIEWS THE DISCLOSURES TO DETERMINE WHETHER ANY DISCLOSURES ARE SUFFICIENTLY MATERIAL THAT THEY SHOULD BE BROUGHT TO THE ATTENTION OF A SUB-COMMITTEE OF THE TRUSTEESHIP COMMITTEE. THE SUB-COMMITTEE OF THE TRUSTEESHIP COMMITTEE SHALL DETERMINE WHETHER ANY DISCLOSED MATTER IS OF SUCH SIGNIFICANCE THAT IT MERITS REPORTING TO THE BOARD OF TRUSTEES OR THE EXECUTIVE COMMITTEE. IT SHALL BE SOLE PREROGATIVE OF THE BOARD OF TRUSTEES OR EXECUTIVE COMMITTEE TO APPROVE OR TAKE OTHER ACTION RELATED TO A CONFLICTS DISCLOSURE, INCLUDING DETERMINING WHETHER OR NOT A TRANSACTION RELATED TO A DISCLOSURE SHOULD BE PERMITTED (IF THE TRANSACTION HAS NOT BEEN FINALIZED) OR CONTINUED (IF THE TRANSACTION HAS ALREADY BEGUN). PERSONS COVERED BY THIS POLICY ARE REQUIRED TO REFRAIN FROM MAKING ANY DECISION ABOUT, AND FROM PARTICIPATING IN ANY CONSIDERATION OF, ANY TRANSACTION OR OTHER MATTER WITHIN THE LETTER OR SPIRIT OF THIS POLICY, EXCEPT THAT HE OR SHE MAY RESPOND TO REQUESTS FOR INFORMATION BY THE PRESIDENT OR ANY DISINTERESTED TRUSTEE CONCERNING THE MATTER. THE CONFLICT OF INTEREST AND COMMITMENT POLICY IN THE FACULTY HANDBOOK APPLIES TO ALL MEMBERS OF NORTHEASTERN'S FACULTY AND RESEARCH STAFF INCLUDING FACULTY MEMBERS SERVING AS UNIVERSITY OFFICERS (COLLECTIVELY REFERRED TO AS 'THE FACULTY'). ANNUALLY, FACULTY ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST AND COMMITMENT DISCLOSURE STATEMENT THAT REQUIRES DISCLOSURE OF ANY RELATIONSHIPS THAT WOULD PRESENT THE APPEARANCE OF A CONFLICT. THESE DISCLOSURE FORMS ARE REVIEWED BY THE DIRECTOR OF COMPLIANCE TO DETERMINE WHETHER ANY DISCLOSURES ARE SUFFICIENTLY MATERIAL THAT THEY SHOULD BE BROUGHT TO THE ATTENTION OF THE APPROPRIATE COLLEGE DEAN FOR REVIEW. THE POLICY PROVIDES COLLEGE DEANS WITH THE PRIMARY RESPONSIBILITY FOR ENSURING IMPLEMENTATION OF THIS POLICY AND AUTHORITY TO REVIEW AND APPROVE EXCEPTIONS TO THE POLICY. ALL EMPLOYEES ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST AND COMMITMENT DISCLOSURE STATEMENT THAT REQUIRES DISCLOSURE OF ANY SIGNIFICANT FINANCIAL INTEREST RELATIONSHIP AS DEFINED AND DISCLOSURE OF ANY GIFT OVER \$100 FROM A SINGLE THIRD PARTY SEEKING BENEFIT FROM THE UNIVERSITY. THESE DISCLOSURE FORMS ARE REVIEWED BY THE DIRECTOR OF COMPLIANCE TO DETERMINE WHETHER ANY DISCLOSURES ARE SUFFICIENTLY MATERIAL THAT THEY SHOULD BE BROUGHT TO THE ATTENTION OF THE APPROPRIATE UNIT DEAN, VICE-PRESIDENT OR DIRECTOR FOR REVIEW. THE UNIT DEAN, VICE-PRESIDENT OR DIRECTOR ARE RESPONSIBLE FOR REVIEWING THE IDENTIFIED CONFLICT AND FOR RESOLVING THOSE CONFLICTS APPROPRIATELY. CONFLICT OF INTEREST DISCLOSURES ARE ACCESSIBLE BY THE AUDIT COMMITTEE.</p>

Return Reference	Explanation
Form 990, Part VI, Lines 15a & 15b	<p>NORTHEASTERN UNIVERSITY FOLLOWS A CAREFULLY DEFINED PROCESS FOR REVIEWING SENIOR EXECUTIVE COMPENSATION LEVELS. THE POSITIONS INCLUDED IN THIS PROCESS DURING 2013 ARE THE PRESIDENT, SENIOR VICE PRESIDENT FOR ACADEMIC AFFAIRS AND PROVOST, SENIOR VICE PRESIDENT FOR UNIVERSITY ADVANCEMENT, SENIOR VICE PRESIDENT FOR ENROLLMENT MANAGEMENT AND STUDENT LIFE, SENIOR VICE PRESIDENT AND CHIEF OPERATING OFFICER, VICE PRESIDENT AND CHIEF FINANCIAL OFFICER, SENIOR VICE PRESIDENT FOR EXTERNAL AFFAIRS, THE DIRECTOR OF FINANCE & TREASURER, AND SENIOR VICE PRESIDENT & GENERAL COUNSEL. OTHER POSITIONS INCLUDING, BUT NOT LIMITED TO, DEANS MAY BE INCLUDED EACH YEAR. THIS PROCESS EMBRACES THE BEST PRACTICES UTILIZED IN THE HIGHER EDUCATION INDUSTRY. IN 2013, A COMPETITIVE PAY ASSESSMENT WAS CONDUCTED BY A THIRD PARTY INDEPENDENT COMPENSATION CONSULTING FIRM, USING MULTIPLE MARKET REFERENCES, INCLUDING SURVEYS REPRESENTING SIMILAR UNIVERSITIES AND OTHER RELEVANT LABOR MARKETS (AS APPLICABLE FOR CERTAIN POSITIONS). THE ASSESSMENT IS BASED ON PEER REFERENCES THAT REFLECT OTHER UNIVERSITIES OF SIMILAR SIZE AND PROMINENCE WITH WHICH NORTHEASTERN COMPETES FOR EXECUTIVE TALENT. THE INDEPENDENT CONSULTANT ALSO PROVIDED ADDITIONAL PROPRIETARY COMPENSATION MARKET DATA AND AN ASSESSMENT OF THE REASONABLENESS OF THE DATA. THE COMPENSATION COMMITTEE CONSISTS OF THE CHAIRMAN OF THE BOARD OF TRUSTEES, ALSO SERVING AS THE CHAIR, ALONG WITH FIVE OTHER INDEPENDENT TRUSTEE MEMBERS. THIS COMMITTEE HAS CONTINUED TO ENGAGE TOWERS WATSON AS ITS INDEPENDENT COMPENSATION CONSULTANT, WITH THE EXPECTATION THAT ITS PROCESSES AND PROCEDURES WOULD CONTINUE TO EVOLVE TO REFLECT EMERGING BEST PRACTICES. THE COMPETITIVE PAY ASSESSMENT AND INDEPENDENT CONSULTANT REVIEW WERE PROVIDED TO THE PRESIDENT FOR HIS USE IN MAKING SALARY AND BONUS RECOMMENDATIONS TO THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES FOR THE POSITIONS INCLUDED IN THE PROCESS, EXCLUDING HIS OWN. THE PRESIDENT'S RECOMMENDATIONS TO THE COMPENSATION COMMITTEE TAKE INTO CONSIDERATION THE MARKET INFORMATION, AS WELL AS THE RESULTS OF A FORMAL ANNUAL PERFORMANCE ASSESSMENT PROCESS BASED ON PRE-DETERMINED GOALS AND OBJECTIVES. THE COMPENSATION COMMITTEE REVIEWED THE COMPETITIVE INFORMATION AND THE RESULTS OF THE PERFORMANCE ASSESSMENT PROCESS PRESENTED BY THE PRESIDENT, DISCUSSED POTENTIAL CHANGES, AND VOTED TO APPROVE THE FINAL RECOMMENDATIONS, WHICH WERE THEN PRESENTED TO THE FULL BOARD OF TRUSTEES. THE BOARD ALSO VOTED TO APPROVE THE RECOMMENDATIONS. THESE DISCUSSIONS AND RESULTING APPROVALS ARE DOCUMENTED IN THE MINUTES OF EACH MEETING. IN DETERMINING THE PRESIDENT'S COMPENSATION, THE INDEPENDENT CONSULTANT PROVIDED THE RESULTS OF THE MARKET PAY ASSESSMENT FOR THE PRESIDENT DIRECTLY TO THE COMMITTEE. THE COMMITTEE ALSO CONDUCTED A FORMAL PERFORMANCE ASSESSMENT OF THE PRESIDENT, UTILIZING PRE-DETERMINED GOALS AND OBJECTIVES. THE COMMITTEE THEN DISCUSSED POTENTIAL CHANGES TO THE PRESIDENT'S COMPENSATION BASED ON THE MARKET DATA AND THE RESULTS OF THE PERFORMANCE ASSESSMENT, AND PRESENTED ITS RECOMMENDATIONS TO THE FULL BOARD OF TRUSTEES FOR THEIR APPROVAL. THE BOARD VOTED TO APPROVE THE RECOMMENDATIONS. THESE DISCUSSIONS AND RESULTING APPROVALS ARE DOCUMENTED IN THE MINUTES OF EACH MEETING.</p>

Return Reference	Explanation
Form 990, Part VI, Line 19	<p>Original hard copy Financial Statements and Governing documents are available upon request. The Conflict of interest policy and the annual financial statements are available via the internet at www.NEU.EDU. FORM 990, PART VII, COLUMN (A) ALLEN SOYSTER, DISTINGUISHED PROFESSOR, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS INTERIM DEAN. STEVEN ZOLOTH, DEAN OF ACADEMIC AFFAIRS FOR EXTERNAL PROGRAMS AND VICE PROVOST FOR HEALTH RESEARCH, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS DEAN - BOUVE COLLEGE. DAVID LUZZI, PROFESSOR AND EXECUTIVE DIRECTOR, STRATEGIC SECURITY INITIATIVE MECHANICAL AND INDUSTRIAL ENGINEERING, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS DEAN - ENGINEERING. HARRY LANE, DISTINGUISHED PROFESSOR, IS LISTED AS "FORMER" DUE TO PREVIOUSLY SERVING AS ACTING DEAN. AS OF 7/1/2009, THE BY-LAWS OF NORTHEASTERN UNIVERSITY WERE AMENDED SUCH THAT THE VICE PRESIDENTS ARE NO LONGER CONSIDERED OFFICERS OF THE UNIVERSITY. THEREFORE, THEY ARE DISCLOSED, AS APPLICABLE, AS FORMER OFFICERS.</p>

Return Reference	Explanation
Form 990, Part VII, Column (B)	40 hours constitutes a full-time equivalent employee at Northeastern University

Return Reference	Explanation
Form 990, Part XI, Line 9	SWAP ADJUSTMENT (\$9,279,000) NU Housing Adjustment \$910,353 _____ (\$8,368,647)

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. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
NORTHEASTERN UNIVERSITY

Employer identification number

04-1679980

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Renaissance Park Garage LLC 1209 Orange St Wilmington, DE 19801 04-3480384	Parking svcs	DE	1,896,369	17,727,551	NORTHEASTERN
(2) NU Research LLC 360 Huntington Ave Boston, MA 02115 17-0388661	Research Ctr	MA		0	NORTHEASTERN
(3) NU Innovation LLC 360 Huntington Ave Boston, MA 02115 27-0388561	Research Ctr	MA		0	NORTHEASTERN
(4) George J Kostas Research Institute Suite 250 CP 360 Huntington Avenue Boston, MA 02115 46-5228806	Research Ctr	MA		26,000	NORTHEASTERN

Part II Identification of Related Tax-Exempt Organizations

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) NU Housing Corporation c/o NU 716 Columbus Ave Boston, MA 02120 26-0874402	Real Estate	MA	501(C)(3)	9	NORTHEASTERN	Yes	
(2) The Mass Green High Perf Computing Ctr 77 Mass Ave Cambridge, MA 02139 27-3014805	Research Ctr	MA	501(C)(3)	11A-I	NA		No
(3) MGHPCC Holyoke Inc 77 Mass Ave CAMBRIDGE, MA 02139 45-2257442	RESEARCH CTR	MA	501(C)(3)	11A-I	NA		No

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
See Additional Data Table									

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

k Lease of facilities, equipment, or other assets from related organization(s)

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

No

1c

No

1d

No

1e

No

1f

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

1s

Yes

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NU Housing Corporation	S	292,808	FMV

Schedule R (Form 990) 2013

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]

Part VII **Supplemental Information**

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

Return Reference	Explanation
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Additional Data

Software ID:
Software Version:
EIN: 04-1679980
Name: NORTHEASTERN UNIVERSITY

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(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
Azland Inc c/o NU 360 Huntington Avenue Boston, MA 02115 04-2454917	Real Estate	DE	NORTHEASTERN	C Corp	23,166	221,099	100 000 %	Yes	
Charitable Remainder Trust (1)	INVESTING	CA	NORTHEASTERN	TRUST				Yes	
Charitable Remainder Trust (1)	INVESTING	ME	NORTHEASTERN	TRUST				Yes	
Charitable Remainder Trust (11)	INVESTING	MA	NORTHEASTERN	TRUST				Yes	
Charitable Remainder Trust (3)	INVESTING	NH	NORTHEASTERN	Trust				Yes	
Pooled Income Trust (1)	INVESTING	MA	NORTHEASTERN	TRUST				Yes	
Perpetual Trust (1)	INVESTING	MA	Northeastern	Trust				Yes	
Perpetual Trust (1)	Investing	ME	Northeastern	Trust				Yes	

Form **4562**
Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2013

Attachment
Sequence No **179**

Name(s) shown on return
NORTHEASTERN UNIVERSITY

Business or activity to which this form relates
GENERAL DEPRECIATION

Identifying number

04-1679980

Part I

Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$ 2,600,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7	Listed property Enter the amount from line 29	7		
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9	Tentative deduction Enter the smaller of line 5 or line 8	9		
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562	10		
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13	Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II

Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	1,231,243

Part III

MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2013	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV

Summary (see instructions.)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	1,231,243
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year (see instructions)					
43 Amortization of costs that began before your 2013 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	